# MADISON COUNTY VOLUNTEER FIRE COMPANY, INC.

P. O. BOX 255
MADISON, VIRGINIA 22727

Mary Jane Costello
January 14, 2020

Reference: MCVFD FY21 Budgetary Request

The Madison County Volunteer Fire Company, Inc. held its regularly scheduled meeting on December 17, 2019. During that meeting it was discussed and approved to request $82,000.00 from the Madison County Board of Supervisors for the upcoming fiscal year.

Last year the Fire Department took delivery of a 2019 Spartan Rescue Pumper at a cost of nearly $750,000 and equipped that piece with approximately $100,000 in equipment. The Fire Department has in the last several years updated or upgraded several items to include SCBA on the AFG grant and rescue equipment placed in service with the new Rescue Pumper.

The Fire Department realizes the financial burden that the Count incurs annually and for that reason we do not request an increase from years past. We do depend on the County assistance for many things under our general operating budget.

Thank You for Your Consideration,

Brian J. Gordon
Madison County Volunteer Fire Company, Inc.
President

30300

January 11, 2020

Madison County Board of Supervisors
P. O. Box 705
Madison, VA 22727

Dear Board Members:

The Madison County Volunteer Rescue Squad, Inc. request to continue funding for all items as specified in the current MOU. Also, last fiscal year, MEMS included in their budget and it was approved that all supplies for both agencies would be funded by the County.

In addition, we are requesting $25,000.00 to provide partial personal property tax relief for all active running members as provided for in Code of Virginia 58.1-3506. This policy was implemented recently in Culpeper County and within 60 sixty days Culpeper and Reva Rescue had 39 new applications for membership. We feel this policy would be a huge benefit for both recruitment and retention of squad members.

Thank you for your consideration and should you have any further questions, please feel free to contact me at 540-820-7307.

Sincerely,



Steve A. Grayson, President
Madison County Rescue Squad

# Madison County Rescue Squad Inc.
## Balance Sheet (all classes)
### As of December 31, 2019

| | | Dec 31, 19 |
|---|---|---|
| ASSETS | | |
| Current Assets | | |
| Checking/Savings | | |
| 10000 · Cash | | |
| 10100 · Operating - StellarOne | 4,675.48 | |
| 10200 · Savings - StellarOne | 40,657.27 | |
| 10300 · Memorials - StellarOne | 7,086.41 | |
| 10500 · Revenue Recovery - StellarOne | 118,461.82 | |
| 10600 · Building Fund | 1,039,081.48 | |
| Total 10000 · Cash | | 1,209,962.46 |
| Total Checking/Savings | | 1,209,962.46 |
| Other Current Assets | | |
| 11000 · Due from Members | | 306.00 |
| 13000 · Investments - StellarOne | | 192,287.12 |
| 13500 · CD - StellarOne | | |
| 13510 · CD - UnRestricted | | |
| 13150-1 · 7700033746 | 10,000.00 | |
| 13150-2 · 7700034574 | 54,528.31 | |
| Total 13510 · CD - UnRestricted | | 64,528.31 |
| 13520 · CD - Building Fund | | |
| 13520-1 · 1155216.24 | 40,000.00 | |
| 13520-2 · 115630121 | 160,000.00 | |
| 13520-8 · 7700055461 | 50,000.00 | |
| 13520-9 · 7700055473 | 150,000.00 | |
| Total 13520 · CD - Building Fund | 400,000.00 | |
| Total 13500 · CD - StellarOne | | 464,528.31 |
| Total Other Current Assets | | 657,121.43 |
| Total Current Assets | | 1,867,083.89 |
| Fixed Assets | | |
| 15000 · Fixed Assets | | |
| 15100 · Buildings | 192,102.24 | |
| 15200 · Land | 376,996.83 | |
| 15500 · Vehicles | 543,743.33 | |
| Total 15000 · Fixed Assets | | 1,112,842.40 |
| Total Fixed Assets | | 1,112,842.40 |
| TOTAL ASSETS | | **2,979,926.29** |
| LIABILITIES & EQUITY | | |
| Liabilities | | |
| Current Liabilities | | |
| Other Current Liabilities | | |
| 22001 · Loan Truck | | 812.61 |
| 23000 · Building Fund Restricted | | 175,000.00 |
| Total Other Current Liabilities | | 175,812.61 |
| Total Current Liabilities | | 175,812.61 |
| Total Liabilities | | 175,812.61 |
| Equity | | |
| 30000 · Opening Balance Equity | | 1,291,304.36 |
| 32000 · Unrestricted Net Assets | | 1,407,614.96 |
| Net Income | | 105,194.36 |
| Total Equity | | 2,804,113.68 |
| TOTAL LIABILITIES & EQUITY | | **2,979,926.29** |

MCRS Budget Meeting 12/30/2019

| Expense | Budget 2019 | Actual 2019 | Proposed 2020 |
|---|---|---|---|
| Installation Banquet | 3,800.00 | 7,104.94 | 500.00 |
| Brunches/Dinners | 10,000.00 | 6,799.00 | 7,500.00 |
| Fund Drive | 3,000.00 | 2,366.09 | 2,500.00 |
| Office Supplies/Postage | 3,500.00 | 2,604.40 | 3,000.00 |
| Training/Instructional | 12,000.00 | 3,606.93 | 16,000.00 |
| Meetings/Trips | 1,000.00 | 2,076.39 | 1,000.00 |
| Convention/Symposium/Resc | 4,000.00 | 2,518.01 | 3,000.00 |
| Insurance | 45,000.00 | 42,544.50 | 42,500.00 |
| Bld. Maint/Improv | 10,000.00 | 10,370.00 | 10,000.00 |
| Utilities (elec. Prop) | 14,000.00 | 11,448.64 | 12,000.00 |
| Cell phones/Fax | 600.00 | 650.35 | 600.00 |
| Website/Internet | 1,500.00 | 1,306.24 | 1,500.00 |
| Uniforms | 5,000.00 | 4,121.40 | 6,000.00 |
| First Aid Supplies | 5,000.00 | 2,856.09 | 3,000.00 |
| Oxygen | 5,000.00 | 6,676.27 | 7,000.00 |
| HazMat | 300.00 | 433.82 | 450.00 |
| Maint. Office/Bldg Equip | 1,000.00 | 129.53 | 200.00 |
| Maint. Extrication/Rescue | 13,000.00 | 12,386.60 | 4,000.00 |
| Maint. ALS Equip | 12,000.00 | 7,847.30 | 8,000.00 |
| Maint. Communications Equi | 2,000.00 | 802.58 | 1,000.00 |
| Vehicle Maintenance | 50,000.00 | 48,002.56 | 55,000.00 |
| Purch. Office/Bldg. Equip/Mis | 6,500.00 | 3,445.85 | 8,000.00 |
| Purch. Extrication/Rescue Eq | 31,000.00 | 15,608.55 | 15,000.00 |
| Purch. ALS Equip | 2,000.00 | - | 1,000.00 |
| Purch. Communications Equi | 2,000.00 | 414.76 | 3,800.00 |
| Member Medical Expense | 750.00 | - | 2,000.00 |
| Public Relations | 2,500.00 | 786.85 | 2,500.00 |
| OMD | 5,000.00 | 5,000.00 | 5,000.00 |
| Dues/Subs/Rsrch/Membersh | 650.00 | 980.00 | 1,000.00 |

| | | | |
|---|---|---|---|
| Recruitment & Retention | 20,000.00 | 3,970.90 | 5,000.00 |
| Scrapbook | 350.00 | 19.60 | 400.00 |
| Concerts/Festivals/Raffles | - | 255.94 | - |
| Freight In | 600.00 | 150.00 | 200.00 |
| Loan Pmt Principal Vehicle | 24,000.00 | 26,887.39 | - |
| Loan Pmt Interest Vehicle | 1,000.00 | 292.62 | - |
| Accountant Position | 3,500.00 | 3,880.00 | 4,000.00 |
| Cadet | 2,000.00 | 337.43 | 2,000.00 |
| Bank Fees | 2,000.00 | 2,015.38 | 2,000.00 |
| 386 Upgrade | - | 375.00 | - |
| 387 Repair 2015 Intntl | - | 12,120.49 | - |
| Cot system | | | 46,000.00 |
| New Ambulance | 245,000.00 | - | 190,000.00 |
| | 550,550.00 | 253,192.40 | 472,650.00 |
| Other Expense | - | - | |
| | 550,550.00 | 253,192.40 | 472,650.00 |

**Income**

| | | | |
|---|---|---|---|
| Board of Supervisors | 100,000.00 | 100,000.00 | 100,000.00 |
| Donations | 45,000.00 | 35,463.43 | 40,000.00 |
| Fund Drive | 30,000.00 | 29,465.00 | 30,000.00 |
| Estates | - | 129.69 | |
| MCRS Auxillary | 10,000.00 | 10,000.00 | 5,000.00 |
| Six 1/4 for Life | 14,500.00 | 15,101.84 | 15,000.00 |
| Interest | 300.00 | 20.36 | 100.00 |
| Sale to Members | 300.00 | - | - |
| Building Rental | 2,500.00 | 1,050.00 | 1,500.00 |
| Sale of Equip & Supply | - | - | - |
| Grants | 132,400.00 | - | 179,040.00 |
| Brunches/Dinners | 30,000.00 | 26,589.07 | 30,000.00 |
| GML/Co. Fair | 3,000.00 | 1,864.50 | 2,000.00 |
| Concerts/Raffles/Other | - | - | |

# Madison County Rescue Squad Inc.
## Profit & Loss Budget vs. Actual (no building)
### January through December 2019

| | Jan - Dec 19 | Budget |
|---|---|---|
| **Ordinary Income/Expense** | | |
| **Income** | | |
| **40000 · Income** | | |
| 40100 · Donations | 35,463.43 | 45,000.00 |
| 40200 · Estates | 129.69 | |
| 40300 · MCRS Auxillary | 10,000.00 | 10,000.00 |
| 41100 · Fund Drive | 29,465.00 | 30,000.00 |
| 41300 · Brunches / Dinners | 26,589.07 | 30,000.00 |
| 41400 · GML / Co. Fair | 1,864.50 | 3,000.00 |
| 42100 · Board of Supervisors | 100,000.00 | 100,000.00 |
| 42200 · Six 1/4 for Life | 15,101.84 | 14,500.00 |
| 42300 · Grants | 0.00 | 132,400.00 |
| 43100 · Building Rental | 1,050.00 | 2,500.00 |
| 43200 · Sale to Members | 0.00 | 300.00 |
| 43450 · Cadet Income | 118.00 | |
| 45100 · Interest | 20.36 | 300.00 |
| 48000 · Insurance for '12 Dodge Repair | 1,773.63 | |
| 48001 · Ins 2015 International 387 | 11,297.79 | |
| **Total 40000 · Income** | 232,873.31 | 368,000.00 |
| **Total Income** | 232,873.31 | 368,000.00 |
| **Expense** | | |
| **50000 · Operations** | | |
| **51000 · Maintenance** | | |
| 51100 · Extrication / Rescue | 12,386.60 | 13,000.00 |
| 51200 · ALS Equipment | 7,847.30 | 12,000.00 |
| 51300 · Communications Equipment | 802.58 | 2,000.00 |
| 51400 · Vehicles | 48,002.56 | 50,000.00 |
| 51450 · 388 Upgrade | 375.00 | |
| 51461 · 2015 Intl 387 Repair | 12,120.49 | |
| **Total 51000 · Maintenance** | 81,534.53 | 77,000.00 |
| **52000 · Purchase** | | |
| 52100 · Extrication / Rescue | 15,608.55 | 31,000.00 |
| 52200 · ALS Equipment | 0.00 | 2,000.00 |
| 52300 · Communications Equipment | 414.76 | 2,000.00 |
| 52400 · Uniforms | 4,121.40 | 5,000.00 |
| 52500 · First Aid Supplies | 2,856.09 | 5,000.00 |
| 52600 · Oxygen | 6,676.27 | 5,000.00 |
| **Total 52000 · Purchase** | 29,677.07 | 50,000.00 |

# Madison County Rescue Squad Inc.
## Profit & Loss Budget vs. Actual (no building)
### January through December 2019

| | Jan - Dec 19 | Budget |
|---|---|---|
| 53000 · Member Medical Expense | 0.00 | 750.00 |
| 54000 · Recruitment & Retention | 3,970.90 | 20,000.00 |
| 54500 · Cadet Expense | 337.43 | 2,000.00 |
| 55000 · Public Relations | 786.85 | 2,500.00 |
| 56000 · Freight In | 150.00 | 600.00 |
| 57000 · OMD | 5,000.00 | 5,000.00 |
| 59000 · HazMat | 433.82 | 300.00 |
| Total 50000 · Operations | 121,890.60 | 158,150.00 |
| 60000 · Training | | |
| 60100 · Convention / Symposium / Rescue | 2,518.01 | 4,000.00 |
| 60200 · Training / Instructional | 3,606.93 | 12,000.00 |
| 60300 · Meetings / Trips | 2,076.39 | 1,000.00 |
| Total 60000 · Training | 8,201.33 | 17,000.00 |
| 70000 · Fund Raising | | |
| 70100 · Brunches / Dinners | 6,799.00 | 10,000.00 |
| 70200 · Fund Drive | 2,366.09 | 3,000.00 |
| 70400 · Concerts / Festivals / Raffles | 255.94 | |
| Total 70000 · Fund Raising | 9,421.03 | 13,000.00 |
| 80000 · Overhead | | |
| 80100 · Office Supplies / Postage | 2,604.40 | 3,500.00 |
| 80200 · Insurance | 42,544.50 | 45,000.00 |
| 81000 · Utilities - Electric Property | 11,448.64 | 14,000.00 |
| 81050 · Cell Phones / Fax & Modem | 650.35 | 600.00 |
| 81100 · Website / Internet | 1,306.24 | 1,500.00 |
| 81150 · Dues / Subs / Rsch / Membership | 980.00 | 650.00 |
| 82000 · Accounting | 3,880.00 | 3,500.00 |
| 86000 · Installation Banquet | 7,104.94 | 3,800.00 |
| 87500 · Interest Paid Vehicle Note | 292.62 | 1,000.00 |
| 88000 · Scrapbook | 19.60 | 350.00 |
| 89000 · Maintenance - Building Improv. | 10,370.00 | 10,000.00 |
| 89050 · Maintenance - Office / Bldg Eq | 129.53 | 1,000.00 |
| 89100 · Purchase - Office / Bldg Eq | 3,445.85 | 6,500.00 |
| 89150 · Bank Fees | 2,015.38 | 2,000.00 |
| Total 80000 · Overhead | 86,792.05 | 93,400.00 |
| 900000 · Void | 0.00 | |
| Total Expense | 226,305.01 | 281,550.00 |
| Net Ordinary Income | 6,568.30 | 86,450.00 |
| Net Income | **6,568.30** | **86,450.00** |

Form **990**

# Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

**2018**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2018 calendar year, or tax year beginning , 2018, and ending , 20

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization: Madison County Rescue Squad, Inc.

Doing business as:

Number and street (or P.O. box if mail is not delivered to street address): P O Box 23

Room/suite:

City or town, state or province, country, and ZIP or foreign postal code: Madison , VA 22727

D Employer identification number: 51-0250532

E Telephone number: (540) 948-3001

G Gross receipts $: 299,697.

F Name and address of principal officer: Wayne Jones, P O Box 172, Madison, VA 22727

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www.madisonrescuesquad.org

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

L Year of formation: 1963

M State of legal domicile: VA

## Part I Summary

1 Briefly describe the organization's mission or most significant activities: Volunteer Rescue Squad

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

| | | | |
|---|---|---|---|
| 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 50 |
| 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 0 |
| 5 | Total number of individuals employed in calendar year 2018 (Part V, line 2a) | 5 | 0 |
| 6 | Total number of volunteers (estimate if necessary) | 6 | 50 |
| 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0. |
| b | Net unrelated business taxable income from Form 990-T, line 38 | 7b | 0. |

| | | Prior Year | Current Year |
|---|---|---|---|
| 8 | Contributions and grants (Part VIII, line 1h) | 443,681. | 204,281. |
| 9 | Program service revenue (Part VIII, line 2g) | | |
| 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 11,699. | 6,076. |
| 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 163,099. | 74,317. |
| 12 | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 618,479. | 284,674. |
| 13 | Grants and similar amounts paid (Part IX, column (A), lines 1–3) | | |
| 14 | Benefits paid to or for members (Part IX, column (A), line 4) | | |
| 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | | |
| 16a | Professional fundraising fees (Part IX, column (A), line 11e) | | |
| b | Total fundraising expenses (Part IX, column (D), line 25) ▶ 0. | | |
| 17 | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | | |
| 18 | Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) | 284,016. | 382,616. |
| 19 | Revenue less expenses. Subtract line 18 from line 12 | 284,016. | 382,616. |
| | | 334,463. | -97,942. |

| | | Beginning of Current Year | End of Year |
|---|---|---|---|
| 20 | Total assets (Part X, line 16) | 2,304,855. | 2,179,209. |
| 21 | Total liabilities (Part X, line 26) | 230,404. | 202,700. |
| 22 | Net assets or fund balances. Subtract line 21 from line 20 | 2,074,451. | 1,976,509. |

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer — Date: 11/07/2019

Steve Grayson, President
Type or print name and title

**Paid Preparer Use Only**

| Print/Type preparer's name | Preparer's signature | Date | Check ☒ if self-employed | PTIN |
|---|---|---|---|---|
| C M Stevens | C M Stevens | 11/06/2019 | | P01066657 |

Firm's name ▶ C M Stevens Bookkeeping Service — Firm's EIN ▶ 54-1895550

Firm's address ▶ PO Box 1094, Madison, VA 22727-1094 — Phone no. (540) 718-0984

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☐

1 Briefly describe the organization's mission:

Volunteer Rescue Squad

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses $ 337,449. including grants of $ 0. ) (Revenue $ 257,504. )

This organization is a rural volunteer rescue squad. Operating funds are derived primarily from donations, grants and fund raising activities. All program service expenses result from the purchase of equipment, supplies, fuels, training, insurance, etc.

4b (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

4c (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

4d Other program services (Describe in Schedule O.)
(Expenses $ including grants of $ ) (Revenue $ )

4e Total program service expenses ▶ 337,449.

## Part IV Checklist of Required Schedules



| | | | Yes | No |
|---|---|---|---|---|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A* | 1 | X | |
| 2 | Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)? | 2 | | X |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I* | 3 | | X |
| 4 | **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II* | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III* | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I* | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II* | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III* | 8 | | X |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV* | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V* | 10 | | X |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | | |
| a | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI* | 11a | X | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII* | 11b | | X |
| c | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII* | 11c | | X |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX* | 11d | | X |
| e | Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X* | 11e | | X |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X* | 11f | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII* | 12a | | X |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional* | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E* | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV* | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV* | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV* | 16 | | X |
| 17 | Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions) | 17 | | X |
| 18 | Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II* | 18 | | X |
| 19 | Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III* | 19 | | X |
| 20 a | Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II* | 21 | | X |

## Part IV Checklist of Required Schedules *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| 22 | Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III* | 22 | | X |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J* | 23 | | X |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a* | 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | **Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I* | 25a | | X |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I* | 25b | | X |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II* | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III* | 27 | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| a | A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV* | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV* | 28b | | X |
| c | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV* | 28c | | X |
| 29 | Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M* | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M* | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I* | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II* | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I* | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1* | 34 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* | 35b | | X |
| 36 | **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2* | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI* | 37 | | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O. | 38 | X | |

## Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

| | | | | Yes | No |
|---|---|---|---|---|---|
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | 0 | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | 0 | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | | | X |

**Part V Statements Regarding Other IRS Filings and Tax Compliance** *(continued)*



| | | | Yes | No |
|---|---|---|---|---|
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | 2a 0 | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions) | 2b | | |
| 3a | Did the organization have unrelated business gross income of $1,000 or more during the year? | 3a | | X |
| b | If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | X |
| b | If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | X |
| c | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | |
| 7 | **Organizations that may receive deductible contributions under section 170(c).** | | | |
| a | Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year 7d | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | X |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 8 | **Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | 8 | | X |
| 9 | **Sponsoring organizations maintaining donor advised funds.** | | | |
| a | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | X |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | X |
| 10 | **Section 501(c)(7) organizations.** Enter: | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | |
| 11 | **Section 501(c)(12) organizations.** Enter: | | | |
| a | Gross income from members or shareholders 11a | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b | | | |
| 12a | **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | | |
| 13 | **Section 501(c)(29) qualified nonprofit health insurance issuers.** | | | |
| a | Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O. | 13a | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b | | | |
| c | Enter the amount of reserves on hand 13c | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | X |
| b | If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* | 14b | | |
| 15 | Is the organization 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? If "Yes," see instructions and file Form 4720, Schedule N. | 15 | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. | 16 | | |

**Part VI** **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI . . . . . ☒

## Section A. Governing Body and Management

| | | | Yes | No |
|---|---|---|---|---|
| 1a | Enter the number of voting members of the governing body at the end of the tax year . . | 1a 50 | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent . | 1b 0 | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . . | 2 | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? . | 5 | | X |
| 6 | Did the organization have members or stockholders? . . . . . | 6 | | X |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . . | 7a | | X |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . . | 7b | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| a | The governing body? . . . . . | 8a | X | |
| b | Each committee with authority to act on behalf of the governing body? . . . . . | 8b | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* . . . . | 9 | | X |

## Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

| | | | Yes | No |
|---|---|---|---|---|
| 10a | Did the organization have local chapters, branches, or affiliates? . . . . . | 10a | | X |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | X | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a | Did the organization have a written conflict of interest policy? *If "No," go to line 13* . . . . . | 12a | | X |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* . . . . . | 12c | | |
| 13 | Did the organization have a written whistleblower policy? . . . . . | 13 | | X |
| 14 | Did the organization have a written document retention and destruction policy? . . . . . | 14 | | X |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| a | The organization's CEO, Executive Director, or top management official . . . . . | 15a | | X |
| b | Other officers or key employees of the organization . . . . . | 15b | | X |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . . | 16a | | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . | 16b | | |

## Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

bookkeeper, 1473 N Main St, Madison, VA 22727 (540)948-5353

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . . ☐

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) Steve Grayson<br>President | 2.00 | | | X | | | | 0. | 0. | 0. |
| (2) Steve Dodson<br>Captain | 5.00 | | | X | | | | 0. | 0. | 0. |
| (3) Judy Knighting<br>Treasurer | 2.00 | | | X | | | | 0. | 0. | 0. |
| (4) Linda Bazzle<br>Secretary/Historian | 1.00 | | | X | | | | 0. | 0. | 0. |
| (5) Owen Yoder<br>Chaplin | 0.25 | | | X | | | | 0. | 0. | 0. |
| (6) Diann Kelliher<br>Public Relations | 2.00 | | | X | | | | 0. | 0. | 0. |
| (7) Wayne Jones<br>Vice President | 2.00 | | | X | | | | 0. | 0. | 0. |
| (8) | | | | | | | | | | |
| (9) | | | | | | | | | | |
| (10) | | | | | | | | | | |
| (11) | | | | | | | | | | |
| (12) | | | | | | | | | | |
| (13) | | | | | | | | | | |
| (14) | | | | | | | | | | |

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (15) | | | | | | | | | | |
| (16) | | | | | | | | | | |
| (17) | | | | | | | | | | |
| (18) | | | | | | | | | | |
| (19) | | | | | | | | | | |
| (20) | | | | | | | | | | |
| (21) | | | | | | | | | | |
| (22) | | | | | | | | | | |
| (23) | | | | | | | | | | |
| (24) | | | | | | | | | | |
| (25) | | | | | | | | | | |
| 1b Sub-total ▶ | | | | | | | | 0. | 0. | 0. |
| c Total from continuation sheets to Part VII, Section A ▶ | | | | | | | | | | |
| d Total (add lines 1b and 1c) ▶ | | | | | | | | 0. | 0. | 0. |

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶

| | | | Yes | No |
|---|---|---|---|---|
| 3 | Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual* | 3 | | X |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual* | 4 | | X |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person* | 5 | | X |

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶

**Part VIII Statement of Revenue** 

Check if Schedule O contains a response or note to any line in this Part VIII . . . . . ☐

| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512–514 |
|---|---|---|---|---|---|---|---|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a Federated campaigns | 1a | | | | | |
| | b Membership dues | 1b | | | | | |
| | c Fundraising events | 1c | | | | | |
| | d Related organizations | 1d | | | | | |
| | e Government grants (contributions) | 1e | 114,802. | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f | 89,479. | | | | |
| | g Noncash contributions included in lines 1a–1f: $ | | | | | | |
| | h Total. Add lines 1a–1f ▶ | | | 204,281. | | | |
| Program Service Revenue | | Business Code | | | | | |
| | 2a | | | | | | |
| | b | | | | | | |
| | c | | | | | | |
| | d | | | | | | |
| | e | | | | | | |
| | f All other program service revenue | | | | | | |
| | g Total. Add lines 2a–2f ▶ | | | | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) ▶ | | | 6,076. | 6,076. | 0. | 0. |
| | 4 Income from investment of tax-exempt bond proceeds ▶ | | | | | | |
| | 5 Royalties ▶ | | | | | | |
| | | (i) Real | (ii) Personal | | | | |
| | 6a Gross rents | 1,920. | | | | | |
| | b Less: rental expenses | | | | | | |
| | c Rental income or (loss) | 1,920. | | | | | |
| | d Net rental income or (loss) ▶ | | | 1,920. | 1,920. | 0. | 0. |
| | | (i) Securities | (ii) Other | | | | |
| | 7a Gross amount from sales of assets other than inventory | | | | | | |
| | b Less: cost or other basis and sales expenses | | | | | | |
| | c Gain or (loss) | | | | | | |
| | d Net gain or (loss) ▶ | | | | | | |
| | 8a Gross income from fundraising events (not including $ 87,420. of contributions reported on line 1c). See Part IV, line 18 a | | 87,420. | | | | |
| | b Less: direct expenses b | | 15,023. | | | | |
| | c Net income or (loss) from fundraising events ▶ | | | 72,397. | | 0. | 72,397. |
| | 9a Gross income from gaming activities. See Part IV, line 19 a | | | | | | |
| | b Less: direct expenses b | | | | | | |
| | c Net income or (loss) from gaming activities ▶ | | | | | | |
| | 10a Gross sales of inventory, less returns and allowances a | | | | | | |
| | b Less: cost of goods sold b | | | | | | |
| | c Net income or (loss) from sales of inventory ▶ | | | | | | |
| | Miscellaneous Revenue | Business Code | | | | | |
| | 11a Claims/Refunds | 900003 | | 0. | 0. | 0. | 0. |
| | b Reimbursements | 900003 | | 0. | 0. | 0. | 0. |
| | c Misc | 900003 | | 0. | 0. | 0. | 0. |
| | d All other revenue | | | | | | |
| | e Total. Add lines 11a–11d ▶ | | | 0. | | | |
| | 12 Total revenue. See instructions ▶ | | | 284,674. | 7,996. | 0. | 72,397. |

## Part IX Statement of Functional Expenses

*Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).*

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☐

| ***Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.*** | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|---|---|---|---|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | | | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | | | | |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | | | | |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 Other employee benefits | | | | |
| 10 Payroll taxes | | | | |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | | | | |
| c Accounting | 3,335. | 0. | 3,335. | 0. |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) | | | | |
| 12 Advertising and promotion | | | | |
| 13 Office expenses | 2,838. | 0. | 2,838. | 0. |
| 14 Information technology | 1,715. | 1,715. | 0. | 0. |
| 15 Royalties | | | | |
| 16 Occupancy | 23,970. | 0. | 23,970. | 0. |
| 17 Travel | 107. | 107. | 0. | 0. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 3,401. | 3,401. | 0. | 0. |
| 20 Interest | 2,363. | 2,363. | 0. | 0. |
| 21 Payments to affiliates | 15,618. | 15,000. | 618. | 0. |
| 22 Depreciation, depletion, and amortization | 189,892. | 189,892. | 0. | 0. |
| 23 Insurance | 43,641. | 43,641. | 0. | 0. |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a HazMat | 285. | 285. | 0. | 0. |
| b Coveralls/Uniforms | 4,416. | 4,416. | 0. | 0. |
| c Training/Recruitment | 3,272. | 3,272. | 0. | 0. |
| d 1st Aid Supply/Oxygen | 15,823. | 15,823. | 0. | 0. |
| e All other expenses | 71,940. | 57,534. | 14,406. | 0. |
| 25 **Total functional expenses.** Add lines 1 through 24e | 382,616. | 337,449. | 45,167. | 0. |
| 26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) | | | | |

## Part X Balance Sheet



Check if Schedule O contains a response or note to any line in this Part X . . . . . ☐

| | | | (A) Beginning of year | | (B) End of year |
|---|---|---|---|---|---|
| Assets | 1 | Cash—non-interest-bearing | 414,721. | 1 | 97,496. |
| | 2 | Savings and temporary cash investments | 1,528,662. | 2 | 1,761,546. |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | 306. | 4 | 306. |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L | | 6 | |
| | 7 | Notes and loans receivable, net | | 7 | |
| | 8 | Inventories for sale or use | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 1,886,098. | | | |
| | b | Less: accumulated depreciation — 10b: 1,566,237. | 361,166. | 10c | 319,861. |
| | 11 | Investments—publicly traded securities | | 11 | |
| | 12 | Investments—other securities. See Part IV, line 11 | | 12 | |
| | 13 | Investments—program-related. See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | 15 | |
| | 16 | **Total assets.** Add lines 1 through 15 (must equal line 34) | 2,304,855. | 16 | 2,179,209. |
| Liabilities | 17 | Accounts payable and accrued expenses | 230,404. | 17 | 202,700. |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D | | 25 | |
| | 26 | **Total liabilities.** Add lines 17 through 25 | 230,404. | 26 | 202,700. |
| Net Assets or Fund Balances | | **Organizations that follow SFAS 117 (ASC 958), check here ▶ ☒ and complete lines 27 through 29, and lines 33 and 34.** | | | |
| | 27 | Unrestricted net assets | 414,721. | 27 | 513,269. |
| | 28 | Temporarily restricted net assets | 1,659,730. | 28 | 1,463,240. |
| | 29 | Permanently restricted net assets | | 29 | |
| | | **Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.** | | | |
| | 30 | Capital stock or trust principal, or current funds | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| | 33 | Total net assets or fund balances | 2,074,451. | 33 | 1,976,509. |
| | 34 | Total liabilities and net assets/fund balances | 2,304,855. | 34 | 2,179,209. |

## Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . . ☒

| | | | |
|---|---|---|---|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 284,674. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 382,616. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -97,942. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 2,074,451. |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 1,976,509. |

## Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . . ☐

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| b | Were the organization's financial statements audited by an independent accountant? | 2b | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | 2c | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a | | X |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. | 3b | | |

**SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

# Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

**2018**

Open to Public Inspection

**Name of the organization**

Madison County Rescue Squad, Inc.

**Employer identification number**

51-0250532

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 ☐ An organization that normally receives: (1) more than 33⅓% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33⅓% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . .

g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1–10 above (see instructions)) | (iv) Is the organization listed in your governing document? Yes | (iv) No | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|---|---|---|---|---|---|---|
| (A) | | | | | | |
| (B) | | | | | | |
| (C) | | | | | | |
| (D) | | | | | | |
| (E) | | | | | | |
| Total | | | | | | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ▶ | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 421,857. | 273,190. | 470,464. | 443,681. | 204,281. | 1,813,473. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | 421,857. | 273,190. | 470,464. | 443,681. | 204,281. | 1,813,473. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 Public support. Subtract line 5 from line 4 | | | | | | 1,813,473. |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ▶ | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 7 Amounts from line 4 | 421,857. | 273,190. | 470,464. | 443,681. | 204,281. | 1,813,473. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 9,133. | 10,187. | 11,074. | 11,699. | 6,076. | 48,169. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 11 Total support. Add lines 7 through 10 | | | | | | 1,861,642. |

12 Gross receipts from related activities, etc. (see instructions) 12

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐

**Section C. Computation of Public Support Percentage**

| | | |
|---|---|---|
| 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) | 14 | 97.41 % |
| 15 Public support percentage from 2017 Schedule A, Part II, line 14 | 15 | 96.89 % |

16a **33⅓% support test—2018.** If the organization did not check the box on line 13, and line 14 is 33⅓% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33⅓% support test—2017.** If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

## Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

### Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 **Total.** Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 **Public support.** (Subtract line 7c from line 6.) | | | | | | |

### Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 **Total support.** (Add lines 9, 10c, 11, and 12.) | | | | | | |

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

### Section C. Computation of Public Support Percentage

| | | |
|---|---|---|
| 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2017 Schedule A, Part III, line 15 | 16 | % |

### Section D. Computation of Investment Income Percentage

| | | |
|---|---|---|
| 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2017 Schedule A, Part III, line 17 | 18 | % |

19a **33 1/3% support tests—2018.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

## Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.* | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).* | 2 | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.* | 3a | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination.* | 3b | | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* **Part VI** *what controls the organization put in place to ensure such use.* | 3c | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.* | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.* | 4b | | |
| c | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.* | 4c | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in* **Part VI**, *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).* | 5a | | |
| b | **Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | | |
| c | **Substitutions only.** Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.** | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).* | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).* | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.** | 9a | | |
| b | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.** | 9b | | |
| c | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.** | 9c | | |
| 10a | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.* | 10a | | |
| b | Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)* | 10b | | |

## Part IV Supporting Organizations *(continued)*



| | | | Yes | No |
|---|---|---|---|---|
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| a | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described in (a) above? | 11b | | |
| c | A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.* | 11c | | |

## Section B. Type I Supporting Organizations

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.* | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.* | 2 | | |

## Section C. Type II Supporting Organizations

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).* | 1 | | |

## Section D. All Type III Supporting Organizations

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).* | 2 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.* | 3 | | |

## Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).*

a ☐ The organization satisfied the Activities Test. *Complete line 2 below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete line 3 below.*

c ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

2 Activities Test. ***Answer (a) and (b) below.***

| | | | Yes | No |
|---|---|---|---|---|
| a | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.* | 2a | | |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.* | 2b | | |

3 Parent of Supported Organizations. ***Answer (a) and (b) below.***

| | | | Yes | No |
|---|---|---|---|---|
| a | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.* | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.* | 3b | | |

## Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| Section A—Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
|---|---|---|---|
| 1 Net short-term capital gain | 1 | | |
| 2 Recoveries of prior-year distributions | 2 | | |
| 3 Other gross income (see instructions) | 3 | | |
| 4 Add lines 1 through 3. | 4 | | |
| 5 Depreciation and depletion | 5 | | |
| 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 Other expenses (see instructions) | 7 | | |
| 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | |

| Section B—Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
|---|---|---|---|
| 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | | |
| a Average monthly value of securities | 1a | | |
| b Average monthly cash balances | 1b | | |
| c Fair market value of other non-exempt-use assets | 1c | | |
| d Total (add lines 1a, 1b, and 1c) | 1d | | |
| e Discount claimed for blockage or other factors (explain in detail in Part VI): | | | |
| 2 Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 Subtract line 2 from line 1d. | 3 | | |
| 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). | 4 | | |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 Multiply line 5 by .035. | 6 | | |
| 7 Recoveries of prior-year distributions | 7 | | |
| 8 Minimum Asset Amount (add line 7 to line 6) | 8 | | |

| Section C—Distributable Amount | | Current Year |
|---|---|---|
| 1 Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | |
| 2 Enter 85% of line 1. | 2 | |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | |
| 4 Enter greater of line 2 or line 3. | 4 | |
| 5 Income tax imposed in prior year | 5 | |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | 6 | |

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

**Part V** **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*



**Section D—Distributions**

| | | Current Year |
|---|---|---|
| 1 | Amounts paid to supported organizations to accomplish exempt purposes | |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | |
| 4 | Amounts paid to acquire exempt-use assets | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | |
| 6 | Other distributions (describe in Part VI). See instructions. | |
| 7 | **Total annual distributions.** Add lines 1 through 6. | |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. | |
| 9 | Distributable amount for 2018 from Section C, line 6 | |
| 10 | Line 8 amount divided by line 9 amount | |

| **Section E—Distribution Allocations** (see instructions) | | (i) Excess Distributions | (ii) Underdistributions Pre-2018 | (iii) Distributable Amount for 2018 |
|---|---|---|---|---|
| 1 | Distributable amount for 2018 from Section C, line 6 | | | |
| 2 | Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions. | | | |
| 3 | Excess distributions carryover, if any, to 2018 | | | |
| a | From 2013 | | | |
| b | From 2014 | | | |
| c | From 2015 | | | |
| d | From 2016 | | | |
| e | From 2017 | | | |
| f | **Total** of lines 3a through e | | | |
| g | Applied to underdistributions of prior years | | | |
| h | Applied to 2018 distributable amount | | | |
| i | Carryover from 2013 not applied (see instructions) | | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| 4 | Distributions for 2018 from Section D, line 7: $ | | | |
| a | Applied to underdistributions of prior years | | | |
| b | Applied to 2018 distributable amount | | | |
| c | Remainder. Subtract lines 4a and 4b from 4. | | | |
| 5 | Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. | | | |
| 6 | Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. | | | |
| 7 | **Excess distributions carryover to 2019.** Add lines 3j and 4c. | | | |
| 8 | Breakdown of line 7: | | | |
| a | Excess from 2014 | | | |
| b | Excess from 2015 | | | |
| c | Excess from 2016 | | | |
| d | Excess from 2017 | | | |
| e | Excess from 2018 | | | |

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**SCHEDULE D (Form 990)**

Department of the Treasury
Internal Revenue Service

# Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

**2018**

Open to Public Inspection

**Name of the organization**

Madison County Rescue Squad, Inc.

**Employer identification number**

51-0250532

## Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

| | | (a) Donor advised funds | (b) Funds and other accounts |
|---|---|---|---|
| 1 | Total number at end of year | | |
| 2 | Aggregate value of contributions to (during year) | | |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year | | |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

## Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | | Held at the End of the Tax Year |
|---|---|---|
| a | Total number of conservation easements | 2a |
| b | Total acreage restricted by conservation easements | 2b |
| c | Number of conservation easements on a certified historic structure included in (a) | 2c |
| d | Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register | 2d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

## Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____
(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____
b Assets included in Form 990, Part X ▶ $ _____

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

| | Amount |
|---|---|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII . . . ☐

**Part V Endowment Funds.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|---|---|---|---|---|
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Temporarily restricted endowment ▶ _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

| | Yes | No |
|---|---|---|
| 3a(i) (i) unrelated organizations | | |
| 3a(ii) (ii) related organizations | | |
| 3b b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|---|---|---|---|
| 1a Land | 200,500. | | | 200,500. |
| b Buildings | 10,343. | | 10,343. | 0. |
| c Leasehold improvements | | | | |
| d Equipment | 1,496,268. | | 1,436,969. | 59,299. |
| e Other | 178,987. | | 118,925. | 60,062. |
| **Total.** Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶ | | | | 319,861. |

## Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|---|---|
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other | | |
| (A) | | |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶ | | |

## Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|---|---|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶ | | |

## Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|---|
| (1) | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ | |

## Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1. (a) Description of liability | (b) Book value |
|---|---|
| (1) Federal income taxes | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ | |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | | | |
|---|---|---|---|---|---|
| 1 | Total revenue, gains, and other support per audited financial statements | | | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | | |
| a | Net unrealized gains (losses) on investments | 2a | | | |
| b | Donated services and use of facilities | 2b | | | |
| c | Recoveries of prior year grants | 2c | | | |
| d | Other (Describe in Part XIII.) | 2d | | | |
| e | Add lines 2a through 2d | | | 2e | |
| 3 | Subtract line 2e from line 1 | | | 3 | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIII.) | 4b | | | |
| c | Add lines 4a and 4b | | | 4c | |
| 5 | Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)* | | | 5 | |

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | | | |
|---|---|---|---|---|---|
| 1 | Total expenses and losses per audited financial statements | | | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | | |
| a | Donated services and use of facilities | 2a | | | |
| b | Prior year adjustments | 2b | | | |
| c | Other losses | 2c | | | |
| d | Other (Describe in Part XIII.) | 2d | | | |
| e | Add lines 2a through 2d | | | 2e | |
| 3 | Subtract line 2e from line 1 | | | 3 | |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIII.) | 4b | | | |
| c | Add lines 4a and 4b | | | 4c | |
| 5 | Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)* | | | 5 | |

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

## Part XIII Supplemental Information *(continued)*

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization

Madison County Rescue Squad, Inc.

Employer identification number

51-0250532

Pt VI, Line 18: Senior officers have reviewed 990

Pt XI: cash purchase of assets

Pt VI, Line 11b: Senior officers have reviewed 990

Pt IX, Line 24e:

Description: Ambulance/Vehicle Rprs

Total: $53,664

Program services: $53,664

Management and general: $0

Fundraising: $0

Description: Public Relations

Total: $3,090

Program services: $0

Management and general: $3,090

Fundraising: $0

Description: Equip Maint:Rescue/ALS/Comm

Total: $3,273

Program services: $3,273

Management and general: $0

Fundraising: $0

Description: Cellulars/Landline

Total: $0

Program services: $0

Management and general: $0

Fundraising: $0

Description: Revenue Recovery

Name of the organization: Madison County Rescue Squad, Inc.

Employer identification number: 51-0250532

Total: $0

Program services: $0

Management and general: $0

Fundraising: $0

Description: Bank/CC Charges

Total: $2,120

Program services: $0

Management and general: $2,120

Fundraising: $0

Description: Sm Equip:Ext/ALS/Comm/Bldg

Total: $3,252

Program services: $0

Management and general: $3,252

Fundraising: $0

Description: Freight In

Total: $597

Program services: $597

Management and general: $0

Fundraising: $0

Description: misc

Total: $45

Program services: $0

Management and general: $45

Fundraising: $0

Description: Recruitment & Retention

Total: $2,324

Program services: $0

Management and general: $2,324

Fundraising: $0

Description: Site Expansion

Total: $0

Program services: $0

Management and general: $0

Fundraising: $0

Description: Installation Banquet

Total: $3,575

Program services: $0

Management and general: $3,575

Fundraising: $0

Form 990
Part IX, Line 24e

# All Other Expenses

2018

Name
Madison County Rescue Squad, Inc.

Employer Identification No.
51-0250532

| Description | (A) Total | (B) Program services | (C) Management and general | (D) Fundraising |
|---|---|---|---|---|
| Ambulance/Vehicle Rprs | 53,664. | 53,664. | 0. | 0. |
| Public Relations | 3,090. | 0. | 3,090. | 0. |
| Equip Maint:Rescue/ALS/Comm | 3,273. | 3,273. | 0. | 0. |
| Cellulars/Landline | 0. | 0. | 0. | 0. |
| Revenue Recovery | 0. | 0. | 0. | 0. |
| Bank/CC Charges | 2,120. | 0. | 2,120. | 0. |
| Sm Equip:Ext/ALS/Comm/Bldg | 3,252. | 0. | 3,252. | 0. |
| Freight In | 597. | 597. | 0. | 0. |
| misc | 45. | 0. | 45. | 0. |
| Recruitment & Retention | 2,324. | 0. | 2,324. | 0. |
| Site Expansion | 0. | 0. | 0. | 0. |
| Installation Banquet | 3,575. | 0. | 3,575. | 0. |
| **Total to Form 990, Part IX, line 24e** | 71,940. | 57,534. | 14,406. | 0. |

# Additional information from your 2018 Federal Exempt Tax Return

**Form 990: Return of Organization Exempt from Income Tax**
**Government Grants**

Itemization Statement

| Description | Amount |
|---|---|
| BOS | 100,000. |
| 6 4 life | 14,802. |
| Total | 114,802. |

**Form 990: Return of Organization Exempt from Income Tax**
**Other amt. not included**

Itemization Statement

| Description | Amount |
|---|---|
| Donations | 30,314. |
| Estates | 10,125. |
| grants | 39,040. |
| MCRSA | 10,000. |
| Total | 89,479. |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 3 Column B**

Itemization Statement

| Description | Amount |
|---|---|
| | 329. |
| | 5,747. |
| Total | 6,076. |

**Form 990: Return of Organization Exempt from Income Tax**
**Gross Income from Line 1C**

Itemization Statement

| Description | Amount |
|---|---|
| fund drive | 34,635. |
| brunches, dinners | 28,233. |
| GML, fair | 3,129. |
| A fund drive | 21,423. |
| Total | 87,420. |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 8b Direct Expenses**

Itemization Statement

| Description | Amount |
|---|---|
| fund drive | 2,482. |
| brunches, dinners | 4,654. |
| A expenses | 7,887. |
| Total | 15,023. |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 14 col (B)**

**Itemization Statement**

| Description | Amount |
|---|---|
| cell phones | 540. |
| website | 1,175. |
| **Total** | **1,715.** |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 16 col (C)**

**Itemization Statement**

| Description | Amount |
|---|---|
| utilities | 12,490. |
| maintenance | 11,480. |
| **Total** | **23,970.** |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 21 col (B)**

**Itemization Statement**

| Description | Amount |
|---|---|
| MCRSA | 10,000. |
| OMD | 5,000. |
| **Total** | **15,000.** |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 21 col (C)**

**Itemization Statement**

| Description | Amount |
|---|---|
| dues, subscriptions, membership | 618. |
| **Total** | **618.** |

**Form 990: Return of Organization Exempt from Income Tax**
**Part IX Line 24 (continued) (4)**
**Line 24 col (B)**

**Itemization Statement**

| Description | Amount |
|---|---|
| 1st Aid | 10,801. |
| Oxygen | 5,022. |
| **Total** | **15,823.** |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 1, column (A)**

**Itemization Statement**

| Description | Amount |
|---|---|
| Checking | 4,096. |
| Savings | 23,112. |
| Memorials | 17,082. |
| Old Save Building | 232,460. |
| Revenue Recovery | 125,150. |
| A Checking | 12,821. |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 1, column (A)**

Itemization Statement

| Description | Amount |
|---|---|
| Total | 414,721. |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 1, column (B)**

Itemization Statement

| Description | Amount |
|---|---|
| checking | 7,219. |
| savings | 20,637. |
| memorials | 4,206. |
| revenue recovery | 49,078. |
| A checking | 16,356. |
| Total | 97,496. |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 2, column (A)**

Itemization Statement

| Description | Amount |
|---|---|
| 09625 | 151,033. |
| 21624 | 43,396. |
| 29921 | 38,029. |
| 30121 | 167,326. |
| 33746 | 45,039. |
| 34574 | 64,349. |
| 49207 | 38,550. |
| 51050 | 97,586. |
| 51735 | 5,795. |
| 51998 | 31,448. |
| 52064 | 30,998. |
| 55461 | 51,389. |
| 55473 | 154,167. |
| 97323 | 151,985. |
| interest added | 10,971. |
| interest added | 524. |
| cashed out | -175,288. |
| Building Fund | 621,365. |
| Total | 1,528,662. |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 2, column (B)**

Itemization Statement

| Description | Amount |
|---|---|
| building fund | 1,019,104. |
| investments | 192,287. |
| CD | 40,000. |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 2, column (B)** **Itemization Statement**

| Description | Amount |
|---|---|
| CD | 54,528. |
| building fund 13520-1 | 40,000. |
| 13520-2 | 160,000. |
| 13520-5 | 44,136. |
| 13520-8 | 50,000. |
| 13520-9 | 150,000. |
| | 11,491. |
| **Total** | **1,761,546.** |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 17, column (A)** **Itemization Statement**

| Description | Amount |
|---|---|
| truck loan | 55,404. |
| building fund | 175,000. |
| **Total** | **230,404.** |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 17, column (B)** **Itemization Statement**

| Description | Amount |
|---|---|
| truck loan | 27,700. |
| building fund | 175,000. |
| **Total** | **202,700.** |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 27, column (A)** **Itemization Statement**

| Description | Amount |
|---|---|
| total ckg/savings | 1,036,086. |
| less restricted funds | -621,365. |
| **Total** | **414,721.** |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 27, column (B)** **Itemization Statement**

| Description | Amount |
|---|---|
| checking/savings | 81,140. |
| restricted funds | 420,638. |
| | 11,491. |
| **Total** | **513,269.** |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 28, column (A)**

Itemization Statement

| Description | Amount |
|---|---|
| building fund-restricted | 621,365. |
| CDs | 1,082,585. |
| | -44,220. |
| Total | 1,659,730. |

**Form 990: Return of Organization Exempt from Income Tax**
**Line 28, column (B)**

Itemization Statement

| Description | Amount |
|---|---|
| building fund restricted | 1,019,104. |
| CDs | 444,136. |
| Total | 1,463,240. |

**Schedule D: Supplemental Financial Statements**
**Equipment col (a)**

Itemization Statement

| Description | Amount |
|---|---|
| from 2017 | 1,349,792. |
| 2018 | 146,476. |
| Total | 1,496,268. |

**Schedule D: Supplemental Financial Statements**
**Equipment col (c)**

Itemization Statement

| Description | Amount |
|---|---|
| 2017 | 1,252,470. |
| 2018 new equip | 146,476. |
| 2018 | 38,023. |
| Total | 1,436,969. |

**Schedule D: Supplemental Financial Statements**
**Other col (a)**

Itemization Statement

| Description | Amount |
|---|---|
| from 2017 | 178,987. |
| Total | 178,987. |

**Schedule D: Supplemental Financial Statements**
**Other col (c)**

Itemization Statement

| Description | Amount |
|---|---|
| 2017 | 115,643. |
| 2018 | 3,282. |
| Total | 118,925. |

**All Other Expenses**
**Form 990, Page 10, Line 24e All Other Expenses (continued) (1)**
**Line 24e col (B)**

**Itemization Statement**

| Description | Amount |
|---|---|
| vehicle maint | 45,002. |
| 388 upgrade | 8,662. |
| **Total** | **53,664.** |

**All Other Expenses**
**Form 990, Page 10, Line 24e All Other Expenses (continued) (3)**
**Line 24e col (B)**

**Itemization Statement**

| Description | Amount |
|---|---|
| rescue | 2,336. |
| ALS | 446. |
| communications | 491. |
| **Total** | **3,273.** |

**All Other Expenses**
**Form 990, Page 10, Line 24e All Other Expenses (continued) (7)**
**Line 24e col (C)**

**Itemization Statement**

| Description | Amount |
|---|---|
| office | 3,252. |
| **Total** | **3,252.** |

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE:** January 13, 2020

| IDENTIFICATION | |
|---|---|
| *Organization/Agency Name:* | Thomas Jefferson EMS Council |
| *Street Name:* | 400 Martha Jefferson Dr., Ste 100 |
| *Mailing Address:* | 400 Martha Jefferson Drive, Ste. 100<br>Charlottesville, VA 22911 |
| *Agency Contact:* | Thomas Joyce, Executive Director |
| *Telephone Number:* | 434-295-6146 |
| *E-mail Address – Agency Contact* | tjoyce@vaems.org |
| *Agency's Web Address:* | Tjems.org |
| *Federal Tax ID#:* | 54-1897455 |
| *Audit:* | ☒ Yes ☐ No |

| PURPOSE/NARRATIVE |
|---|
| *Missions and Goals:*<br><br>The Thomas Jefferson EMS Council is an integral part of the EMS system whose function is to assess, identify, coordinate, plan and implement an efficient and effective regional EMS delivery system in partnership with the Virginia Office of EMS and the Virginia EMS Advisory Board. |
| *Experience and Accomplishments:*<br>TJEMS has a performance based contract with VAOEMS to provide planning and program services. The contract has incorporated several new deliverables that will remain in place for future contracts including the development of the continuity of operations plan, an EMS and Trauma performance improvement program and a hospital diversion plan. Continued funding |

is necessary to meet the existing obligations to VAOEMS, these new deliverables and the services currently provided to the potential and existing EMS personnel in the region. If funding is not provided, it will be necessary to reduce our extensive continuing education offerings to EMS personnel. Currently, EMS personnel in Virginia are required to complete continuing education in order to maintain their certification and authorization to provide emergency care. Because of your support, our continuing education program is offered at a no out of pocket cost to the EMS providers, convenient and accessible means to fulfill their training and certification mandates. This accessibility contributes to recruitment and retention of EMS provider, the ability to staff fire/rescue agencies and to respond to citizen requests for assistance.

*Benefits of Funding:*

TJEMS teaches 20 Continuing Education classes per year for Madison County Rescue Squad. In FY18/19 TJEMS taught EMS Providers for a total of 40 CE credits. This will allow each provider the hours needed to recertify as an EMT to assist the citizens and visitors of Madison County. TJEMS also held an EMT Program consisting of 204 teaching hours. Forty hours was given for continuing education during the course.

TJEMS has continued to address the needs of the region by maintaining a Performance Improvement Committee (PI), Trauma Performance Committee (TPI), STEMI Committee and Stroke Committee. Each agency must maintain a PI/TPI program in order to address Quality Assurance and Quality Improvement measures to maintain an EMS license. These programs maintain the requirement mandated by VAOEMS by the participation of the agencies submitting data for the committees to review.

TJEMS continues to update and distribute protocols, MCI plans and Hospital Diversion plans for the agencies of the region. This provides a template to the agencies to write their own plans or allows for them to use the plan as it was authored.

*Intention of Use:*

TJEMS offers a continuing education for EMS personnel that are unique to the Commonwealth. TJEMS personnel travel to EMS agencies to offer monthly, at no-cost to the volunteer EMS provider in their active response area. This is not only convenient for busy volunteers but also fulfills the training mandates required by VAOEMS for EMS personnel to be permitted to provide emergency care (maintain their certification). This has proven to help retain experienced EMS volunteers by facilitating their recertification and recruit new volunteers by stemming the fears of burdensome training and recertification requirements. In essence, TJEMS provides a turnkey training and recertification system for career personnel but especially for volunteers.

| FUNDING | |
|---|---|
| *Category of Funding* | [X] *Public Safety*<br>[ ] *Health*<br>[ ] *Arts/Culture*<br>[ ] *General Community/Civic*<br>[ ] *Human Services*<br>[ ] *Education*<br>[ ] *Environment*<br>[ ] *Recreation* |
| *Funding Request:* | $ 7743.00 |

**Signature:** [signature] **Title:** EXECUTIVE Director

**Printed Name:** THOMAS P. JOYCE **Date:** 12/18/19

INTERNAL REVENUE SERVICE
DISTRICT DIRECTOR
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: JUL 31 1998

THOMAS JEFFERSON EMERGENCY
MEDICAL SERVICES COUNCIL
425 B LEXINGTON AVENUE
CHARLOTTESVILLE, VA 22902

Employer Identification Number:
54-1897455
DLN:
17053182058038
Contact Person:
D. A. DOWNING
Contact Telephone Number:
(513) 241-5199
Accounting Period Ending:
June 30
Form 990 Required:
Yes
Addendum Applies:
No

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of $100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, if you are involved in an excess benefit transaction, that transaction might be subject to the excise taxes of section 4958. Additionally, you are not automatically exempt from other federal excise taxes. If you have any questions about excise, employment, or other federal taxes, please contact your key district office.

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(1) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(1) organization.

Letter 947 (DO/CG)

RECEIVED
DATE 8/3/98

| | 2018/2019 | 2019/2020 | 2020/2021 |
|---|---|---|---|
| | ***Actual*** | ***Budget*** | ***Projected*** |
| Albemarle County | | | |
| City of Charlottesville | | | |
| Fluvanna | 16,095 | 16,095 | 16,095 |
| Greene | 8,425 | 8,425 | 8,425 |
| Louisa | 17,965 | 17,965 | 17,965 |
| Nelson | 10,629 | 10,000 | 10,000 |
| State Funding | 194,000 | 194,000 | 194,000 |
| **TOTAL REVENUE** | 247,114 | 246,485 | 246,485 |

# THOMAS JEFFERSON EMERGENCY MEDICAL SERVICES COUNCIL

# CHARLOTTESVILLE, VA

## FINANCIAL REPORT
## YEARS ENDED JUNE 30, 2019 AND 2018

# THOMAS JEFFERSON EMERGENCY MEDICAL SERVICES COUNCIL

## CHARLOTTESVILLE, VA

## CONTENTS


Independent Auditors' Report....1
Statements of Financial Position....2
Statements of Activities and Net Assets....3
Statements of Functional Expenses....4
Statements of Cash Flows....5
Notes to Financial Statements....6

MONFALCONE & GARRIS
ACCOUNTANTS & CONSULTANTS

# INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Thomas Jefferson Emergency
Medical Services Council
Charlottesville, VA

We have audited the accompanying financial statements of the Thomas Jefferson Emergency Medical Services Council (a nonprofit organization), which comprise the statements of financial position as of June 30, 2019 and 2018, and the related statements of activities and net assets, functional expenses and cash flows for the years then ended, and the related notes to the financial statements.

**Management's Responsibility for the Financial Statements**

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

**Auditor's Responsibility**

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

**Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Thomas Jefferson Emergency Medical Services Council as of June 30, 2019 and 2018, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

**Change in Accounting Principle**

As discussed in the notes to the financial statements, in 2018 management adopted Accounting Standards Update (ASU-2016-14, *Not-for-Profit Entities (Topic 958) - Presentation of Financial Statements for Not-for-Profit Entities.* Our opinion is not modified with respect to this matter.

McGlone & Garvin PC

November 18, 2019

# THOMAS JEFFERSON EMERGENCY MEDICAL SERVICES COUNCIL
## STATEMENTS OF FINANCIAL POSITION
### JUNE 30, 2019 AND 2018

### ASSETS

| | 2019 | 2018 |
|---|---|---|
| **CURRENT ASSETS** | | |
| Cash and cash equivalents | $ 163,136 | $ 89,904 |
| Accounts Receivable | 48,588 | 38,982 |
| Total Current Assets | 211,724 | 128,886 |
| **PROPERTY AND EQUIPMENT** | | |
| Vehicles | 81,002 | 81,002 |
| Equipment and fixtures | 29,287 | 29,287 |
| Leasehold improvements | - | - |
| Accumulated depreciation | (108,659) | (105,400) |
| Net Property and Equipment | 1,630 | 4,889 |
| **OTHER ASSETS** | | |
| Due from EMS training funds | - | 65 |
| Security deposit | 243 | 243 |
| Total Other Assets | 243 | 308 |
| **TOTAL ASSETS** | $ 213,597 | $ 134,083 |

### LIABILITIES AND NET ASSETS

| | 2019 | 2018 |
|---|---|---|
| **CURRENT LIABILITIES** | | |
| Accounts payable | $ 6,905 | $ 1,493 |
| Accrued compensated absences | 10,158 | 9,480 |
| Payroll liabilities | 3,571 | 2,504 |
| Total Current Liabilities | 20,634 | 13,477 |
| **TOTAL LIABILITIES** | 20,634 | 13,477 |
| **NET ASSETS** | | |
| Without donor restrictions | 192,963 | 120,606 |
| **TOTAL NET ASSETS** | 192,963 | 120,606 |
| **TOTAL LIABILITIES AND NET ASSETS** | $ 213,597 | $ 134,083 |

See Accompanying Notes

# THOMAS JEFFERSON EMERGENCY MEDICAL SERVICES COUNCIL
## STATEMENTS OF ACTIVITIES AND NET ASSETS
### YEARS ENDED JUNE 30, 2019 AND 2018

| | 2019 | 2018 |
|---|---|---|
| **PUBLIC SUPPORT AND REVENUES** | | |
| Public support | | |
| Local support | $ 90,163 | $ 62,844 |
| Grants and donations | 8,000 | 49,880 |
| Total public support | 98,163 | 112,724 |
| Revenues | | |
| State contract | 194,353 | 242,941 |
| Training courses and materials | 44,530 | 29,660 |
| Interest | 32 | 59 |
| Total revenues | 238,915 | 272,660 |
| Total Support and Revenues | 337,078 | 385,384 |
| **EXPENSES** | | |
| Program services | 218,301 | 262,897 |
| Management and general | 46,420 | 58,092 |
| Total expenses | 264,721 | 320,989 |
| Total expenses and losses | 264,721 | 320,989 |
| **CHANGE IN NET ASSETS** | 72,357 | 64,395 |
| **NET ASSETS, BEGINNING OF YEAR** | 120,606 | 56,211 |
| **NET ASSETS, END OF YEAR** | $ 192,963 | $ 120,606 |

See Accompanying Notes

# THOMAS JEFFERSON EMERGENCY MEDICAL SERVICES COUNCIL
# STATEMENTS OF FUNCTIONAL EXPENSES
## YEARS ENDED JUNE 30, 2019 AND 2018

| | 2019 | | |
|---|---|---|---|
| | Program Services | Management and General | Total |
| Communications | $ 1,330 | $ 443 | $ 1,773 |
| Facility fees | 10,800 | 1,200 | 12,000 |
| Depreciation | 3,260 | - | 3,260 |
| Financial fees | 7,813 | 7,814 | 15,627 |
| Insurance | 1,080 | 360 | 1,440 |
| Office expenses | 7,739 | 2,558 | 10,297 |
| Vehicle | 7,935 | 80 | 8,015 |
| Program support costs | 10,699 | - | 10,699 |
| Staffing | 152,502 | 33,476 | 185,978 |
| Professional services | 14,593 | - | 14,593 |
| Miscellaneous | 368 | 368 | 736 |
| Travel | 182 | 121 | 303 |
| Total expenses | $ 218,301 | $ 46,420 | $ 264,721 |

| | 2018 | | |
|---|---|---|---|
| Communications | $ 2,028 | $ 676 | $ 2,704 |
| Facility fees | 44,215 | 5,465 | 49,680 |
| Depreciation | 3,301 | - | 3,301 |
| Financial fees | 11,464 | 11,464 | 22,929 |
| Insurance | 825 | 275 | 1,100 |
| Office expenses | 6,904 | 2,301 | 9,203 |
| Vehicle | 5,330 | 659 | 5,989 |
| Program support costs | 5,176 | - | 5,176 |
| Staffing | 168,905 | 37,076 | 205,981 |
| Professional services | 14,486 | - | 14,486 |
| Travel | 264 | 176 | 440 |
| Total expenses | $ 262,897 | $ 58,092 | $ 320,989 |

See Accompanying Notes

# THOMAS JEFFERSON EMERGENCY MEDICAL SERVICES COUNCIL
## NOTES TO FINANCIAL STATEMENTS

**Measure of operations**
The statements of activities reports all changes in net assets, including changes in net assets from operating and nonoperating activities. Operating activities consist of those items attributable to Thomas Jefferson Emergency Medical Services Council's ongoing services and interest and dividends earned on investments. Nonoperating activities are limitied to resources that generate return from investments and other activities considered to be of a more unusual or nonrecurring nature.

**Income Taxes**
The Council is exempt from regular federal income taxes under Section 501(c)(3) of the Internal Revenue Code. Accordingly, no provision for income taxes has been presented in these financial statements.

The Council accounts for uncertainty in income tax positions as required by the Income Taxes Topic of the Financial Accounts Standards Board (FASB) Accounting Standards Codification; however, management does not believe it is exposed to any such positions as they are defined in this guidance. The Council files form 990, Return of Organization Exempt from Income Tax, annually.

**Use of Estimates**
The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Accordingly, actual results could differ from those estimates.

**Property and Equipment**
Depreciation is computed on the straight-line method over the assets' useful lives. Equipment purchased is capitalized at cost; the estimated fair values of any donated assets are similarly capitalized. Donated assets are capitalized at the estimated fair value. When assets are retired, the assets and accumulated depreciation are removed from the respective accounts and any profit or loss on disposition is added to or charged against income. Maintenance and repairs are charged to expenses and betterments are capitalized.

**Donated Services**
Donated materials and equipment are reflected as contributions at the estimated fair value when received. Rent of $8,000 was donated in the first part of the year. Some volunteers donate time in the Council's program services. No amounts have been recognized in the accompanying statements of activities because the criteria for recognition of such volunteer efforts has not been satisfied.

**Functional Expenses**
The cost of providing various programs and other activities are summarized on a functional basis and presented in the statements of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

## SIMPLE RETIREMENT PLAN

The Council has adopted a SIMPLE IRA plan for employees. Eligible employees can make pre-tax salary contributions to the plan with up to a 3% company matching provision. The Council expensed approximately $5,650 and $5,623 during fiscal years 2019 and 2018, respectively.

## ECONOMIC DEPENDENCE

The Council receives a significant portion of its revenue and support each year from OEMS under various contracts and grants. In addition, the Council receives significant support from local government jurisdictions.

## CONTINGENCY

Expenditures of grant funds received by the Council are subject to review by the granting agencies. Such subsequent reviews could result in the Council having to refund grants previously received or having such adjustments withheld for future grants. Management believes all grant funds have been expended in accordance with the requirements of the grants and that any such future adjustments would be immaterial. Therefore, no provision for refundable grants has been made as of June 30, 2019 and 2018.

## OPERATING LEASES

In May of 2012, the Council amended an existing lease for office space that expired on May 31, 2016. As part of the amended lease, the Council built out the space in fiscal year 2013 at a cost of $50,200, which was recorded in the statements of financial position as leasehold improvements. The leasehold improvements were disposed of during fiscal year 2017.

In January 2014, the Council further amended the existing lease for additional space at a monthly rate of $1,000. This additional space was leased on a month to month basis. This lease terminated February 28, 2017.

In February 2017, the Council entered into a lease for office space that will expire on February 28, 2023, with two renewal options to extend the lease term for a five year period each.

Total lease payments for fiscal years 2019 and 2018, were $4,000 and $49,680, respectively.

| | | |
|---|---|---|
| June 30, 2020 | $ | 16,000 |
| 2021 | | 28,000 |
| 2022 | | 36,000 |
| 2023 | | 24,000 |

# THOMAS JEFFERSON EMERGENCY MEDICAL SERVICES COUNCIL
## NOTES TO FINANCIAL STATEMENTS

### CONCENTRATIONS OF CREDIT RISK

The Council maintains its cash accounts with major, well established financial institutions and the Council has suffered no losses. The balances are insured by the U.S. Federal Deposit Insurance Corporation up to $250,000. At June 30, 2019, and 2018 there was no excess at any institution. The balance in the account may exceed the limit from time to time during the year.

### NEW ACCOUNTING PRONOUNCEMENT

On August 18, 2016, FASB issues ASU 2016-14, Not-for-Profit Entities ( Topic 958) - *Presentation of Financial Statements of Not-for-Profit Entities.* The update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return. Thomas Jefferson Emergency Medical Services Council has adjusted the presentation of these statements accordingly. The ASU has been applied retrospectively to all periods presented.

**Availability and Liquidity**

The following represents Thomas Jefferson Emergency Medical Servixes Council financial assets at June 30, 2019:

| | | |
|---|---|---|
| Financial assets at year end: | | |
| Cash and cash equivalent | $ | 163,136 |

### SUBSEQUENT EVENTS

Management has evaluated subsequent events through November 18, 2019, which is the date the financial statements were available to be issued.

FY2021 Draft Budget/Estimates

# Central Virginia Regional Jail

| | |
|---|---|
| Total Draft Budget: | $ 16,725,971 |
| Increase: | $ 783,744 |
| % Change: | 4.92% |

Per the Jail Authority Agreement, the Authority Board is to provide to the five participating Jurisdictions by December 31, what the anticipated contribution amounts will be for the next fiscal year. A draft budget has been prepared in order to submit such estimates. The attachment gives a recap of the draft budget and how the estimates were achieved. The draft budget summary reflects an overall increase of 4.92%, which impacts numerous departments.

Expenditures:

- COLA increase of 2% to staff
- Health Insurance increase of 10%
- VRS increase of 1.53%
- Increase for Bilingual Interpreters
- Increase for ADA Compliance Training
- Increase for IT improvements and replacement
- Increase in Medical and Food Services due to population increase and standard increases to daily operational costs.
- Increase to Re-Entry Program to cover additional programs/educational services that have been added this fiscal year.

- Increase in Buildings and Grounds due to standard increases to daily operational costs.

Revenues:

- CVRJ Sources – The increase is from boarding fees under the Work Release/HEM Program and Refunds that are netted against expenditures.

- Local Share – The Authority Board agreed to an overall increase of $400, 000, to be added to the total amount contributed by the Jurisdictions. Contributable amounts for each Jurisdiction is based on the average prisoners per day for the preceding three fiscal years.

- Commonwealth – There is only a slight increase. Salaries and Fringes were adjusted to reflect the 3% raise given in FY2020. However, due to the decline in State Responsible Inmates, revenues was decreased for housing.

- Federal – Federal revenue was held at $600,000. The Cooperative Agreement with the US Marshal Service expired in January, 2017. This Agreement required that the Jail hold a specific number of Federal inmates, which was part of the agreed upon terms when the Federal Government funded two historical building projects. When the Agreement termed, the Jail was no longer under any obligation to hold a specific number of Federal inmates, but the indefinite agreement for housing at $50.00 per day remained in force. After the completion of the most recent expansion to the Jail, a new federal exemption was established by the Commonwealth of 94 inmates. This basically means that in order to not lose State funding the Jail can hold no more than 94 Federal inmates per day. History demonstrated that the Federal inmate population had dropped considerably and could not be justified in budgeting for revenue. At the time the CAP Agreement expired, the Federal population had decreased to as low as 20 inmates per day. However, through a verbal agreement with current US Marshal

Administration, housing Federal inmates has increased to approximately 80 inmates per day. Attentiveness is given in not projecting revenue beyond $600,000 since there is uncertainty of the population remaining steady.

- Fund Balance – A total of $1,672,771 in fund balance is being used to balance the budget. With the combination of vacancy savings, investment returns, accurate procurement and Federal revenue, the Jail has an adequate fund balance to balance its budget.

Also, to further pass along savings to the Jurisdictions, the following is proposed:

- No true-up is required to the Reserve Account; use of approximately $90,155 in fund balance.

Due to the fact that estimates are required so early to the Jurisdictions, many of the line items pertaining to benefits (Health Insurance, VRS, and Worker's Compensation Insurance) are estimated and actual numbers will not be received until February/March. The draft budget will be discussed in detail at the Authority Board's meeting on January 9, 2020.

**CENTRAL VIRGINIA REGIONAL JAIL**

**FY2021 DRAFT BUDGET**

# DRAFT BUDGET SUMMARY

| E X P E N D I T U R E S | | | | | | |
|---|---|---|---|---|---|---|
| **DEPARTMENTS** | **FY2018 ACTUALS** | **FY2019 ACTUALS** | **FY2020 ADOPTED** | **FY2021 DRAFT** | **DIFFERENCE +/-** | **% CHANGE** |
| Salaries | $ 8,971,066 | $ 9,617,898 | $ 10,815,566 | $ 11,758,453 | $ 942,887 | 8.72% |
| Administration | 224,663 | 244,644 | 321,250 | 351,200 | 29,950 | 9.32% |
| Information Technology | 80,003 | 100,687 | 89,864 | 188,387 | 98,523 | 109.64% |
| Training | 138,772 | 133,678 | 227,540 | 223,540 | (4,000) | -1.76% |
| Transportation | 42,208 | 56,329 | 57,450 | 57,450 | - | 0.00% |
| Security | 171,575 | 138,251 | 220,625 | 210,425 | (10,200) | -4.62% |
| Medical | 1,340,226 | 1,492,542 | 1,473,100 | 1,702,200 | 229,100 | 15.55% |
| Food Services | 679,681 | 771,837 | 769,425 | 985,000 | 215,575 | 28.02% |
| Re-Entry Programs | 4,560 | 6,582 | 23,977 | 65,516 | 41,539 | 173.25% |
| Buildings and Grounds | 584,994 | 635,001 | 750,230 | 823,900 | 73,670 | 9.82% |
| Non-Departmental | 200 | 10,200 | 65,500 | 65,500 | - | 0.00% |
| Capital | 566,728 | 447,852 | 1,127,700 | 294,400 | (833,300) | -73.89% |
| **Total Expenditures** | **$ 12,804,676** | **$ 13,655,501** | **$ 15,942,227** | **$ 16,725,971** | **$ 783,744** | **4.92%** |

| R E V E N U E S | | | | | | |
|---|---|---|---|---|---|---|
| **REVENUE SOURCE** | **FY2018 ACTUALS** | **FY2019 ACTUALS** | **FY2020 ADOPTED** | **FY2021 DRAFT** | **DIFFERENCE +/-** | **% CHANGE** |
| CVRJ Sources | $ 261,616 | $ 316,761 | $ 251,290 | $ 395,983 | $ 144,693 | 57.58% |
| Local Share | 9,022,168 | 8,422,703 | 8,422,704 | 8,822,704 | 400,000 | 4.75% |
| Local Share - Medical Recovery | 87,906 | 382,405 | - | - | - | 0.00% |
| Other Revenue | - | 25,000 | - | - | - | 0.00% |
| Commonwealth | 5,322,631 | 5,088,438 | 5,192,280 | 5,234,513 | 42,233 | 0.81% |
| Federal | 667,325 | 1,249,600 | 600,000 | 600,000 | - | 0.00% |
| CVRJ Reserves | - | - | 1,475,953 | 1,672,771 | 196,818 | 13.33% |
| **Total Revenues** | **$ 15,361,646** | **$ 15,484,907** | **$ 15,942,227** | **$ 16,725,971** | **$ 783,744** | **4.92%** |

# CENTRAL VIRGINIA REGIONAL JAIL

JURISDICTIONS OPERATIONAL BUDGET ESTIMATES

FY 2021

## JURISDICTION POPULATION

| *Fiscal Year* | *Fluvanna* | *Greene* | *Louisa* | *Madison* | *Orange* | |
|---|---|---|---|---|---|---|
| 2016-2017 | 19,031 | 17,428 | 32,738 | 12,061 | 31,802 | |
| 2017-2018 | 17,742 | 20,619 | 35,008 | 13,596 | 29,295 | |
| 2018-2019 | 13,327 | 21,641 | 37,865 | 12,118 | 29,333 | |
| Total Population - 3 Fiscal Years | 50,100 | 59,688 | 105,611 | 37,775 | 90,430 | |
| Average Population | 16,700 | 19,896 | 35,204 | 12,592 | 30,143 | 114,535 |
| Percentage Allocation | 14.58% | 17.37% | 30.74% | 10.99% | 26.32% | 100.00% |
| PERCENTAGE ALLOCATION FY2021 | 14.58% | 17.37% | 30.74% | 10.99% | 26.32% | |

## BUDGET ESTIMATES

| | | |
|---|---|---|
| Adopted FY2020 Budget | $ | 15,942,227 |
| *4.92% Increase* | | 783,744 |
| **ESTIMATED FY2021 BUDGET** | **$** | **16,725,971** |

## FUNDING SOURCE

| | | |
|---|---|---|
| *State* | | |
| Salaries/Fringe & Housing | $ | 5,234,513 |
| *Federal* | | |
| Federal Per Diem | | 600,000 |
| *CVRJ* | | |
| Other Revenues | | 395,983 |
| Fund Balance | | 1,672,771 |
| *Local* | | |
| Total Local Funding | | 8,822,704 |
| **TOTAL FUNDING SOURCE** | **$** | **16,725,971** |

| *Jurisdictions' Allocations* | | | |
|---|---|---|---|
| *Fluvanna* | *$* | *1,286,350* | *14.58%* |
| *Greene* | | *1,532,504* | *17.37%* |
| *Louisa* | | *2,712,099* | *30.74%* |
| *Madison* | | *969,615* | *10.99%* |
| *Orange* | | *2,322,136* | *26.32%* |
| | *$* | *8,822,704* | *100.00%* |

# CENTRAL VIRGINIA REGIONAL JAIL

JURISDICTIONS OPERATIONAL BUDGET ESTIMATES

FY 2021

## JURISDICTION IMPACT

| JURISDICTION | FY 2020 ADOPTED BUDGET | FY 2021 ESTIMATES | DIFF +/- |
|---|---|---|---|
| *Fluvanna* | 1,242,349 | 1,286,350 | 44,001 |
| *Greene* | 1,328,261 | 1,532,504 | 204,243 |
| *Louisa* | 2,760,962 | 2,712,099 | (48,863) |
| *Madison* | 838,059 | 969,615 | 131,556 |
| *Orange* | 2,253,073 | 2,322,136 | 69,063 |
| ***TOTALS*** | **8,422,704** | **8,822,704** | **400,000** |

# CENTRAL VIRGINIA REGIONAL JAIL

JURISDICTIONS OPERATIONAL RESERVE ACCOUNT ESTIMATES

FY 2021

## OPERATING RESERVE ACCOUNT

| | |
|---|---|
| 16% (60 Days of Operations) FY 2021 Budget Estimates | 2,676,155 |
| Estimated Balance of Operating Reserve Account | 2,586,000 |
| **Total True-Up to Operating Reserve Account** | **90,155** |

## JURISDICTIONS' ALLOCATION TO OPERATING RESERVE ACCOUNT

| | *Allocation Percentage* | |
|---|---|---|
| Fluvanna | 14.58% | 0 |
| Greene | 17.37% | 0 |
| Louisa | 30.74% | 0 |
| Madison | 10.99% | 0 |
| Orange | 26.32% | 0 |
| **Total** | **100.00%** | **0** |

***No true-up to Jurisdictions - Use of Fund Balance***

**RAPPAHANNOCK JUVENILE CENTER**
**Draft Revenue Source - FY 2020 - 2021**

| | | |
|---|---|---|
| **Budget Expenses** | | **$ 7,953,241** |
| **Sources of Revenue:** | | |
| DJJ Block Grant | $ 1,587,900 | |
| Net DJJ Block Grant | | $ 1,587,900 |
| **Misc. Revenue/Other Funding Sources:** | | |
| USDA Fund Transfer | | $ 75,000 |
| Community Placement Program | | $ 1,400,000 |
| Estimated Interest | | $ 40,000 |
| Estimated Per Diem - Non Jurisdictional | | $ 24,000 |
| Total Misc. Rev./Other Funding Sources: | | $ 1,539,000 |
| **Use of RJC Fund Balance:** | | |
| Capital Equipment Repair/Replacement | $ 420,000 | |
| Bonus/Incentive | $ 65,000 | |
| Contingency | $ 300,000 | |
| Total RJC Funding | | $ 785,000 |
| Sub-Total | | $ 3,911,900 |
| **Locality Revenues:** | | |
| Grand Total Revenue less DJJ, RJC | $ 4,041,341 | |
| Total Locality Revenues | | $ 4,041,341 |
| **Grand Total Revenue** | | **$ 7,953,241** |

| | | | |
|---|---|---|---|
| **FREDERICKSBURG - CCD = 2485** | | | |
| Appropriations | 10.578% | $ | 427,493 |
| | | $ | - |
| TOTAL | | $ | 427,493 |
| **KING GEORGE - CCD = 1425** | | | |
| Appropriations | 6.066% | $ | 245,148 |
| | | $ | - |
| TOTAL | | $ | 245,148 |
| **LOUISA - CCD = 961** | | | |
| Appropriations | 4.091% | $ | 165,331 |
| | | $ | - |
| TOTAL | | $ | 165,331 |
| **MADISON - CCD = 610** | | | |
| Appropriations | 2.597% | $ | 104,954 |
| | | $ | - |
| TOTAL | | $ | 104,954 |
| **ORANGE - CCD = 1334** | | | |
| Appropriations | 5.679% | $ | 229,508 |
| | | $ | - |
| TOTAL | | $ | 229,508 |
| **SPOTSYLVANIA - CCD = 7601** | | | |
| Appropriations | 32.356% | $ | 1,307,616 |
| | | $ | - |
| TOTAL | | $ | 1,307,616 |
| **STAFFORD - CCD = 9076** | | | |
| Appropriations | 38.633% | $ | 1,561,291 |
| | | $ | - |
| TOTAL | | $ | 1,561,291 |
| Grand Total | 100.000% | **$** | **4,041,341** |

**RAPPAHANNOCK JUVENILE CENTER**

**DRAFT BUDGET WORKSHEET - FY 2020-2021**

| | | EXPENSE CATEGORY | FY 2016 - 2017 BUDGET | FY 2016 - 2017 ACTUAL | FY 2017 - 2018 BUDGET | FY 2017 - 2018 ACTUAL | FY 2018 - 2019 BUDGET | FY 2018 - 2019 ACTUAL | FY 2019 - 2020 BUDGET | FY 2019 - 2020 ACTUAL 12/31/19 | Budget FY 2020- 2021 | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | A | ***SALARY & BENEFITS*** | | | | | | | | | | |
| 10-5105 | 1 | ***Salaries*** | $ 3,435,465 | $ 3,371,111 | $ 3,643,555 | $ 3,422,311 | $ 3,718,916 | $ 3,798,614 | $ 4,162,116 | $ 2,069,473 | $ 4,305,009 | 2.5% COLA -2 positions |
| | | | | | | | | | | | | 1.3% Compression |
| | 2 | ***Additional Wages*** | | | | | | | | | | 1.5 Bonus 65000.00 |
| 10-5111 | | a. Overtime | $ 40,000 | $ 15,980 | $ 40,000 | $ 28,122 | $ 30,000 | $ 56,826 | $ 40,000 | $ 19,211 | $ 40,000 | |
| 10-5115 | | b. Part Time | $ 10,000 | $ 60,441 | $ 25,000 | $ 39,913 | $ 50,000 | $ 64,534 | $ 30,000 | $ 28,014 | $ 50,000 | |
| 10-5120 | | c. Holiday | $ - | | | | | | | | | |
| 10-5121 | | d. Termination | $ - | $ 10,148 | | $ 27,714 | | $ 34,629 | | $ 18,141 | | |
| 10-5125 | | e. Opt Out Health Ins | $ 34,000 | $ 23,500 | $ 32,000 | $ 24,750 | $ 26,000 | $ 28,250 | $ 28,000 | $ 13,375 | $ 28,000 | |
| | | SUBTOTAL WAGES | $ 3,519,465 | $ 3,481,180 | **$ 3,740,555** | **$ 3,542,810** | **$ 3,824,916** | **$ 3,982,853** | **$ 4,260,116.00** | **$ 2,148,214** | **$ 4,423,009.00** | |
| | 3 | ***Benefits*** | | | | | | | | | | |
| 10-5136 | | PCORI FEE | | $ 200 | | | $ 300 | $ 215 | $ 300 | $ 300 | $ 300 | |
| 10-5145 | | a. FICA | $ 218,207 | $ 211,411 | $ 231,914 | $ 215,863 | $ 237,145 | $ 243,199 | $ 264,127 | $ 133,189 | $ 274,227 | |
| 10-5147 | | b. Medicare | $ 51,032 | $ 49,443 | $ 54,238 | $ 50,484 | $ 55,461 | $ 56,878 | $ 61,772 | $ 31,149 | $ 64,134 | |
| 10-5150 | | c. VRS Retirement | $ 178,988 | $ 172,023 | $ 189,829 | $ 174,804 | $ 156,566 | $ 157,895 | $ 175,225 | $ 111,922 | $ 216,111 | |
| 10-5153 | | d. VRS Health Credit | $ 6,184 | $ 6,935 | $ 7,651 | $ 7,052 | $ 7,810 | $ 8,879 | $ 9,989 | $ 5,156 | $ 12,054 | |
| 10-5155 | | e. VRS Group Life | $ 45,005 | $ 43,261 | $ 47,731 | $ 44,040 | $ 48,718 | $ 48,618 | $ 54,524 | $ 28,142 | $ 57,687 | |
| 10-5158 | | f. VRS / ING - 457b Match | $ 16,000 | $ 15,887 | $ 16,000 | $ 15,988 | $ 16,000 | $ 15,864 | $ 16,000 | $ 7,430 | $ 16,000 | |
| 10-5160 | | g. Health Insurance | $ 560,000 | $ 520,064 | $ 600,000 | $ 541,084 | $ 575,000 | $ 661,612 | $ 705,000 | $ 338,698 | $ 720,000 | +5% cannot confirm til Feb |
| 10-5165 | | h. Workers' Compensation | $ 80,000 | $ 75,148 | $ 90,000 | $ 70,450 | $ 80,000 | $ 63,208 | $ 75,000 | $ 80,556 | $ 95,000 | |
| 10-5167 | | i. Retiree Health Care | $ 19,000 | $ 8,418 | $ 19,000 | $ 9,105 | $ 10,000 | $ 9,660 | $ 10,000 | $ 4,830 | $ 11,000 | |
| 10-5169 | | j. VA Corp Hybrid Short Term Disability | $ 4,000 | $ 5,656 | $ 8,000 | $ 6,155 | $ 8,000 | $ 8,102 | $ 8,000.00 | $ 4,223 | $ 8,500.00 | |
| 10-5170 | | k. Employee Physicals & Background | $ 500 | $ 100 | $ 500 | $ 150 | $ 500 | $ 350 | $ 200 | $ 100 | $ 300 | |
| 10-5180 | | l. VEC Unemployment Reimbursement | | | | $ 2,136 | | $ 4,136 | | | | |
| | | SUBTOTAL BENEFITS | $ 1,178,916 | $ 1,108,546 | $ 1,264,864 | $ 1,137,311 | $ 1,195,500 | $ 1,278,401 | $ 1,380,137 | $ 745,395 | $ 1,475,313 | |
| | | **TOTAL SALARY EXPENSE** | **$ 4,698,381** | **$ 4,589,726** | **$ 5,005,419** | **$ 4,680,121** | **$ 5,020,416** | **$ 5,261,254** | **$ 5,640,253** | **$ 2,893,609** | **$ 5,898,322** | |
| | B | ***OPERATING EXPENSES*** | | | | | | | | | | |
| | 1 | ***Commission*** | | | | | | | | | | |
| 10-5305 | | a. Legal | $ 22,500 | $ 21,000 | $ 25,235 | $ 21,000 | $ 25,235 | $ 24,000 | $ 25,000 | $ 12,000 | $ 25,625 | 2.5 % increase |
| 10-5310 | | b. Misc. Expenses | $ 1,000 | $ 668 | $ 1,000 | $ 926 | $ 1,000 | $ 1,042 | $ 1,000 | $ 963 | $ 1,000 | |
| | 2 | ***Cost of Operations*** | | | | | | | | | | |
| 10-5355 | | a. Property Lease - Regional Jail | $ 6,000 | $ 6,000 | $ 6,000 | $ 6,000 | $ 6,000 | $ 6,000 | $ 6,000 | $ 6,000 | $ 6,000 | |
| 10-5360 | | b. Admin. Fee - Regional Jail | $ 8,000 | $ 8,029 | $ 13,700 | $ 8,110 | $ 13,700 | $ 8,227 | $ 10,000 | $ 3,305 | $ 9,000 | |
| 10-5365 | | c. Host Fee - Stafford County | $ 40,000 | $ 40,000 | $ 40,000 | $ 40,000 | $ 40,000 | $ 40,000 | $ 40,000 | $ 20,000 | $ 40,000 | |
| | 3 | ***Equipment*** | | | | | | | | | | |
| 10-5410 | | Furn, Fix,Sm Equip.Purchase/replace | $ 22,500 | $ 27,363 | $ 24,000 | $ 37,713 | $ 24,000 | $ 22,623 | $ 30,000 | $ 17,918 | $ 30,000 | |
| | 4 | ***Food Service*** | | | | | | | | | | |
| 10-5455 | | a. Meals - Regional Jail | $ 245,000 | $ 201,078 | $ 155,600 | $ 140,899 | $ 159,490 | $ 149,178 | $ 216,646 | $ 44,657 | $ 200,000 | |
| | | b. Meals, Snacks, Incentives | | | $ 90,000 | $ 57,040 | $ 70,000 | $ 68,355 | $ 70,000 | $ 65,613 | $ 80,000 | |
| 10-5460 | | c. Kitchen Supplies - In House | $ 2,000 | $ 2,408 | $ 2,000 | $ 4,431 | $ 2,000 | $ 5,726 | $ 2,000 | $ 3,381 | $ 3,000 | |
| | 5 | ***Insurance*** | | | | | | | | | | |
| 10-5505 | | a. Bldg/Auto/Bonding/VML | $ 21,000 | $ 15,092 | $ 21,000 | $ 15,494 | $ 19,000 | $ 17,064 | $ 20,000 | $ 18,908 | $ 20,000 | |
| 10-5515 | | b. Va. Risk - General Liability | $ 5,000 | $ 4,003 | $ 5,000 | $ 4,003 | $ 5,000 | $ 4,003 | $ 5,000 | $ 4,003 | $ 5,000 | |
| 10-5550 | 6 | ***Janitorial Supplies*** | $ 45,000 | $ 37,672 | $ 45,000 | $ 38,276 | $ 40,000 | $ 42,857 | $ 45,000 | $ 19,392 | $ 45,000 | |
| | 7 | ***Laundry*** | | | | | | | | | | |
| 10-5605 | | a. Services - Regional Jail | $ 7,800 | $ 7,896 | $ 8,100 | $ 7,658 | $ 8,303 | $ 1,781 | $ 8,000 | $ - | $ 2,500 | |
| 10-5610 | | b. Supplies - In House | $ 2,000 | $ 236 | $ 2,000 | $ 990 | $ 1,700 | $ 1,427 | $ 6,000 | $ 623 | $ 2,500 | |

**RAPPAHANNOCK JUVENILE CENTER**

**DRAFT BUDGET WORKSHEET - FY 2020-2021**

| | | EXPENSE CATEGORY | FY 2016 - 2017 BUDGET | FY 2016 - 2017 ACTUAL | FY 2017 - 2018 BUDGET | FY 2017 - 2018 ACTUAL | FY 2018 - 2019 BUDGET | FY 2018 - 2019 ACTUAL | FY 2019 - 2020 BUDGET | FY 2019 - 2020 ACTUAL 12/31/19 | Budget FY 2020- 2021 | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 8 | ***Maintenance Building/Grounds*** | | | | | | | | | | |
| 10-5655 | | a. Service Agreements/Inspections | $ 45,000 | $ 41,276 | $ 54,000 | $ 52,888 | $ 58,000 | $ 54,691 | $ 58,000 | $ 35,905 | $ 62,000 | |
| 10-5660 | | b. Maintenance (Grounds) | $ 5,000 | $ 4,002 | $ 7,600 | $ 4,742 | $ 5,000 | $ 5,641 | $ 5,000 | | $ 5,000 | |
| 10-5665 | | c. Trash Removal | $ 7,000 | $ 4,997 | $ 5,580 | $ 5,133 | $ 5,700 | $ 5,136 | $ 5,700 | $ 2,646 | $ 5,500 | |
| 10-5670 | | d. Supplies | $ 20,000 | $ 20,628 | $ 20,000 | $ 14,014 | $ 20,000 | $ 20,159 | $ 20,000 | $ 3,986 | $ 20,000 | |
| | 9 | ***Medical Service*** | | | | | | | | | | |
| 10-5705 | | a. Professional Fees - Physician | $ 54,739 | $ 53,009 | $ 56,000 | $ 54,069 | $ 56,000 | $ 54,070 | $ 56,000 | $ 22,529 | $ 55,000 | |
| 10-5720 | | b. Medicines & Supplies | $ 6,000 | $ 4,245 | $ 5,000 | $ 4,881 | $ 5,000 | $ 4,259 | $ 5,000 | $ 2,346 | $ 5,000 | |
| 10-5725 | | c. Referrals/Hospital/Labs | $ 3,500 | $ 2,362 | $ 2,000 | $ 8,832 | $ 3,500 | $ 10,703 | $ 6,000 | $ 7,172 | $ 6,000 | |
| 10-5755 | 10 | ***Miscellaneous*** | $ 3,000 | $ 3,576 | $ 3,500 | $ 1,820 | $ 3,000 | $ 3,920 | $ 3,000 | $ 2,979 | $ 3,000 | |
| | 11 | ***Office Supplies*** | | | | | | | | | | |
| 10-5805 | | a. Contracts & Services Office Equip. | $ 9,000 | $ 10,253 | $ 11,000 | $ 13,554 | $ 12,000 | $ 12,823 | $ 14,000 | $ 4,057 | $ 14,000 | |
| 10-5820 | | b. Accounting Fees & Contracts | $ 24,500 | $ 24,310 | $ 24,000 | $ 25,681 | $ 24,000 | $ 23,127 | $ 27,000 | $ 22,009 | $ 27,000 | |
| 10-5825 | | c. Supplies | $ 18,000 | $ 17,596 | $ 18,000 | $ 18,135 | $ 18,000 | $ 20,408 | $ 18,000 | $ 9,103 | $ 18,000 | |
| 10-5826 | | d. Fiscal Software Support | $ 9,200 | $ 8,792 | $ 9,200 | $ 8,875 | $ 12,000 | $ 15,163 | $ 12,000 | | $ 15,200 | |
| | 12 | ***Residential Programs*** | | | | | | | | | | |
| 10-5855 | | a. Education | $ - | $ 413 | | | | | | | | |
| 10-5860 | | b. Post Dispositional Program | $ 2,000 | $ 905 | $ 2,000 | $ 1,174 | $ 2,000 | $ 306 | $ 2,000 | $ 289 | $ 1,000 | |
| 10-5864 | | d. CPP Program | $ 5,000 | $ 6,304 | $ 8,000 | $ 10,871 | $ 10,000 | $ 17,989 | $ 12,000 | $ 3,907 | $ 15,000 | |
| 10-5865 | | e. Recreation | $ 2,000 | $ 2,000 | $ 2,500 | $ 2,500 | $ 2,500 | $ 2,500 | $ 2,500 | $ 2,557 | $ 2,500 | |
| 10-5870 | | f. Mental Health Services | $ 43,000 | $ 41,112 | $ 44,290 | $ 41,960 | $ 45,600 | $ 41,940 | $ 45,618 | $ 17,475 | $ 45,000 | 3% COLA |
| 10-5875 | | g. Volunteers | $ 100 | $ 110 | | $ 80 | | $ 100 | | | | |
| | 13 | ***Human Resources*** | | | | | | | | | | |
| 10-5880 | | a. Employee Incentives | $ 750 | $ 2,162 | $ 750 | $ 981 | $ 1,000 | $ 980 | $ 750 | | $ 1,000 | |
| 10-5881 | | b. Recruitment | $ 2,000 | $ 82 | $ 1,500 | $ 2,407 | $ 1,000 | $ 5,754 | $ 2,500 | $ 1,578 | $ 2,500 | |
| 10-5882 | | c. Acknowledgements | $ 500 | $ 670 | $ 500 | $ 330 | $ 500 | $ 1,539 | $ 500 | $ 136 | $ 500 | |
| | 14 | ***Staff Development*** | | | | | | | | | | |
| 10-5905 | | a. Training Expenses/Fees & Tuition | $ 12,000 | $ 7,095 | $ 12,000 | $ 26,861 | $ 12,000 | $ 12,201 | $ 15,000 | $ 10,394 | $ 13,000 | |
| 10-5908 | | b. P.O.V. Mileage | $ 3,000 | $ 944 | $ 3,000 | $ 1,179 | $ 3,000 | $ 1,416 | $ 2,000 | $ 512 | $ 2,000 | |
| 10-5910 | | c. Travel Per Diems & Lodging | $ 12,000 | $ 14,399 | $ 12,000 | $ 22,099 | $ 12,000 | $ 24,547 | $ 20,000 | $ 15,765 | $ 27,000 | |
| | 15 | ***Information Systems/Tech Support*** | | | | | | | | | | |
| 10-5950 | | a. Equipment & Software Upgrades | $ 3,000 | $ 2,339 | $ 5,000 | $ 5,363 | $ 5,000 | $ 4,969 | $ 5,000 | $ 487 | $ 5,000 | |
| 10-5960 | | b. Onsite I.T. Services | $ 20,000 | $ 20,272 | $ 25,000 | $ 21,204 | $ 25,000 | $ 23,169 | $ 24,000 | $ 9,558 | $ 28,000 | 2.5 % COLA |
| | 16 | ***Transportation*** | | | | | | | | | | |
| 10-6005 | | a. Resident Transport - Regional Jail | $ 265,000 | $ 259,725 | $ 266,000 | $ 262,674 | $ 272,650 | $ 272,458 | $ 281,137 | $ 110,253 | $ 277,094 | |
| 10-6010 | | b. Vehicle Maintenance and Operation | $ 5,000 | $ 6,939 | $ 5,000 | $ 8,670 | $ 5,000 | $ 11,149 | $ 6,000 | $ 4,641 | $ 7,500 | |
| | 17 | ***Hygiene & Clothing*** | | | | | | | | | | |
| 10-6055 | | a. Resident Clothing | $ 8,000 | $ 2,511 | $ 8,000 | $ 7,731 | $ 8,000 | $ 3,378 | $ 10,000 | $ 1,670 | $ 8,000 | |
| 10-6060 | | b. Staff Uniforms | $ 8,000 | $ 12,990 | $ 8,000 | $ 11,127 | $ 12,000 | $ 16,665 | $ 15,000 | $ 5,922 | $ 20,000 | Pants included in uniform |
| 10-6065 | | c. Resident Hygiene | $ 8,000 | $ 7,909 | $ 8,500 | $ 12,004 | $ 8,500 | $ 15,962 | $ 12,000 | $ 6,131 | $ 15,000 | |
| | 18 | ***Utilities*** | | | | | | | | | | |
| 10-6105 | | a. Electric | $ 80,000 | $ 73,159 | $ 80,000 | $ 72,501 | $ 75,000 | $ 71,735 | $ 76,000 | $ 37,267 | $ 75,000 | |
| 10-6110 | | b. Natural Gas | $ 32,000 | $ 26,850 | $ 32,000 | $ 27,068 | $ 29,000 | $ 24,723 | $ 30,000 | $ 5,840 | $ 26,500 | |
| 10-6115 | | c. Water/Sewer | $ 15,000 | $ 14,064 | $ 15,000 | $ 15,762 | $ 14,500 | $ 18,976 | $ 17,000 | $ 9,294 | $ 18,000 | |
| 10-6120 | | e. Fuel Oil | $ 2,000 | | $ 2,000 | $ 1,874 | $ 1,000 | | $ 2,000 | | $ 2,000 | |
| 10-6125 | | f. Telecom/Sat. TV/email | $ 33,500 | $ 22,910 | $ 33,500 | $ 35,556 | $ 26,000 | $ 32,923 | $ 35,000 | $ 14,880 | $ 38,000 | Price increases Phone/TV |
| | | ***TOTAL OPERATING EXPENSES*** | **$ 1,194,589** | **$ 1,092,355** | **$ 1,229,055** | **$ 1,187,140** | **$ 1,208,878** | **$ 1,227,762** | **$ 1,330,351.00** | **$ 588,048** | **$ 1,334,919.00** | |

**RAPPAHANNOCK JUVENILE CENTER**

**DRAFT BUDGET WORKSHEET - FY 2020-2021**

| | | EXPENSE CATEGORY | FY 2016 - 2017 BUDGET | FY 2016 - 2017 ACTUAL | FY 2017 - 2018 BUDGET | FY 2017 - 2018 ACTUAL | FY 2018 - 2019 BUDGET | FY 2018 - 2019 ACTUAL | FY 2019 - 2020 BUDGET | FY 2019 - 2020 ACTUAL 12/31/19 | Budget FY 2020- 2021 |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | 19 | ***Capital Outlay*** | | | | | | | | | |
| 15-XXXX | | Capital Projects | $ 190,000 | $ 197,613 | $ 250,000 | $ 155,704 | $ 445,000 | $ 143,179 | $ 380,000 | $ 60,084 | $ 420,000 |
| | | ***TOTAL CAPITAL EXPENSES*** | **$ 190,000** | **$ 197,613** | **$ 250,000** | **$ 155,704** | **$ 445,000** | **$ 143,179** | **$ 380,000.00** | **$ 60,084** | **$ 420,000.00** |
| | 20 | | | | | | | | | | |
| 40-XXXX | | OPEB | | | | $ 148,000 | $ 200,000 | $ 200,000 | | | $ - |
| 40-XXXX | | Contingency | $ 200,000 | $ 20,433 | $ 200,000 | $ 7,271 | $ 200,000 | | $ 200,000 | $ 3,750 | $ 300,000 |
| | | ***TOTAL DEBT SERVICE EXPENSE*** | **$ 200,000** | **$ 20,433** | **$ 200,000** | **$ 155,271** | **$ 400,000** | **$ -** | **$ 200,000.00** | **$ 3,750** | **$ 300,000.00** |
| | 21 | ***Long-Term Debt*** | | | | | | | | | |
| 40-XXXX | | Debt Service | $ 624,928 | $ 624,927 | $ 626,029 | $ 625,959 | $ 625,505 | | $ - | | $ - |
| | | ***TOTAL DEBT SERVICE EXPENSE*** | **$ 624,928** | **$ 624,927** | **$ 626,029** | **$ 625,959** | **$ 625,505** | **$ -** | **$ -** | **$ -** | **$ -** |
| | | | | | | | | | | | |
| | | ***GRAND TOTAL OPERATING BUDGET*** | **$ 6,907,898** | **$ 6,525,054** | **$ 7,310,503** | **$ 6,804,195** | **$ 7,699,799** | **$ 6,632,195** | **$ 7,550,604** | **$ 3,545,491** | **$ 7,953,241** |

OAR

JEFFERSON AREA COMMUNITY CORRECTIONS

750 Harris Street, Suite 207
Charlottesville, VA 22903
(434) 296-2441
FAX (434) 979-4038

December 17, 2019

Madison County Finance Department
Attn: Mary Jane Costello
302 Thrift Road
P.O. Box 705
Madison, Virginia 22727

Re: FY2021 Madison County Budget

Dear Ms. Costello,

Attached please find the OAR/Jefferson Area Community Corrections budget application for FY2021. Included in our application is the supplemental information, IRS letter and FY19 audit. We value our partnership with Madison County and hope the support continues. **Our request is for a total of $7,978 for OAR Local Probation services and $3,485 for the Criminal Justice Planner.**

OAR is requesting funding to provide services to address Madison County's anticipated increase for Public Safety Costs due to population growth, capital costs and other County economic indicators. Local probation services directly impact public safety, improved the lives of those involved with the criminal justice system and will reduce costly jail expenditures. Comprehensive regional criminal justice planning also impacts public safety, jail cost expenditures and provides for enhanced collaboration, integration and innovation. Investment in these programs returns tax dollar savings, increased public safety and opportunity for the citizens of Madison County.

I look forward to support for both OAR and the Criminal Justice Planner from Madison County. If you need additional information please contact me at the above number or you can reach me by email at rcarew@oar-jacc.org Thank you for your consideration of our request.

Respectfully,

W. R. Carew III
Executive Director

Support United way

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE: January 13, 2020**

| IDENTIFICATION | |
|---|---|
| *Organization/Agency Name:* | OAR-Jefferson Area Community Corrections |
| *Street Name:* | 750 Harris Street Suite 207 Charlottesville Va 22903 |
| *Mailing Address:* | 750 Harris Street Suite 207 Charlottesville Va 22903 |
| *Agency Contact:* | Ross Carew |
| *Telephone Number:* | 434 296 2441 ext 108 |
| *E-mail Address – Agency Contact* | rcarew@oar-jacc.org |
| *Agency's Web Address:* | www.oar-jacc.org |
| *Federal Tax ID#:* | 23-7382389 |
| *Audit:* | X Yes ☐ No |

**PURPOSE/NARRATIVE**

*Missions and Goals:*

To assist individuals who are arrested, imprisoned or released from incarceration to gain and retain self-respecting, self-sustaining and crime-free lifestyles.

- By providing sentencing alternatives to reduce the rate of incarceration
- By encouraging offenders to become responsible member of the community
- By reducing the negative impact of incarceration
- By supporting offender's transition back into the community
- By informing and promoting a more effective criminal justice system

*Experience and Accomplishments:*

# Local probation

The OAR local probation program addresses the community need to safely and effectively manage and supervise local responsible offenders in the community as an alternative to incarceration. Through the effective and efficient diversion of local responsible probationers, the localities save approximately $5,894 per probationer in avoided jail costs per diversion to OAR. Additionally, through the use of effective evidence based supervision strategies, OAR Local Probation reduces the likelihood of probationer re-offending.

**Addressing community need**

The OAR local probation program addresses the community need to safely and effectively manage and supervise local responsible offenders in the community as an alternative to incarceration. Through the effective and efficient diversion of local responsible probationers, the localities save approximately $5,894 per probationer in avoided jail costs. Additionally, through the use of effective evidence based supervision strategies, OAR Local Probation reduces the likelihood of probationer re-offending. During FY19, OAR local probation provided probation supervision to 1697 clients (including carry-over probation placements). Of that population, **113 (7.26%) were referred from Madison County Courts.** The program's rate of successful completion of probation for FY19 was 71% exceeding the projected rate of 70%. The most recent three year recidivism evaluation of OAR local probation clients by the National Center of State Courts[i] indicated a recidivism rate of 25%, an 18% improvement versus the national average of 43%.[ii] For the OAR local probation population, during FY 2019, the highest percentage of the population fell within the following four offense categories: Assault (31%), Narcotics (29%), Alcohol (9%) and Fraud/Larceny (10%). The remaining probation clients are convicted of a wide range of other class 1 misdemeanors or class 5 or 6 felonies. The majority of the population were white (56%), male (71%), single (88%) and were employed (60%). The average age of the population is 30 years old. Using a validated recidivism risk assessment, the program determined that the FY2019 recidivism risk profile of the population was 66% low risk, 30% medium risk and 4% high risk for recidivism. As demonstrated by the offense and risk/need profile of the population, probation clients need supervision and intervention to address intimate partner and family relationship dysfunction, antisocial attitudes and belief systems, negative peers, and substance abuse to reduce the risk and expense of further criminal behavior.

These services benefit all citizens of Madison and have significant fiscal impact for Madison County. OAR is dedicated to improving the lives of our clients and improving the quality of life for the residents of Madison County. Each successful placement equals lives that have been changed for the better. Families kept together, restitution debts paid, taxes paid, and victims made whole are all benefits for Madison County through the successful completion of supervision.

**FY19 Outcomes**

**70.7%** of 964 probationers successfully complete the terms of probation as measured by program and court records.

**(75% crime-free)** In FY16, The National Center for State Courts determined an overall program three year recidivism rate of 25% for cases closed from 2012.

## Criminal Justice Planning

The Criminal Justice Coordinator/Planner for the Thomas Jefferson Area Community Criminal Justice Board (CCJB) is co-located with OAR. The Coordinator/Planner serves as a liaison to the nine localities represented on the CCJB. Those include the same localities that OAR serves: Charlottesville, Albemarle, Louisa, Fluvanna, Greene, Goochland, Madison, Nelson and Orange. The purpose of the CCJB and the Coordinator/Planner is to enable the participating localities to work together to develop and support an effective and comprehensive range of services that promote public safety and offender accountability and rehabilitation. The Planner coordinates the work of the Thomas Jefferson Area Community Criminal Justice Board, which supports the implementation of evidence-based strategies among nine participating jurisdictions. The Planner provides the Board with jurisdictional and regional-level data, identifies primary cost drivers, and recommends evidence-based approaches to enhance public safety regionally and in each jurisdiction specifically. The long term goal is to develop a comprehensive system to analyze and promote programs and services that enhance public safety, offender accountability, rehabilitation, better informed decision making, better use of resources, and more effective remedial efforts. The Planner works to address jail overcrowding through effective data management and analysis, probation violation reduction, reduction in pretrial defendants held in jail, and strategies for addressing cost savings and recidivism reduction.

**Addressing Community Need**

The Planner addresses the needs of the region by: (1) Writing grants, (2) Developing and providing staff support to new efficient criminal justice programs/projects, (3) Facilitating Board and Committee meetings. (4) Conducting research on regional and jurisdictional crime trends, (5) Studying jail and court utilization, length of stay, return to custody and associated costs, and proposing more effective, less costly alternatives to incarceration wherever consistent with public safety interests. The long term goal is to develop a comprehensive system to analyze and promote programs and services that enhance public safety, offender accountability, rehabilitation, better-informed decision making, better use of resources, and more effective remedial efforts. The Planner works to address jail overcrowding through effective data management and analysis, probation violation reduction strategies, reduction in the number of pretrial defendants held in jail, and strategies for addressing cost savings and recidivism/return-to-custody reduction.

*Benefits of Funding:*

## Local Probation Program

The local probation program provides significant financial benefit to the localities as an alternative to the high cost of incarceration and as an adult recidivism reducing program. Incarceration has been identified by research to be the least effective and most costly response to crime, subject to diminishing returns. The cost to incarcerate an individual at the local Central Virginia Regional Jail is $95.26 per day according to the FY17 Virginia Compensation Board.

The average length of stay at the Central Virginia Regional Jail (2012-2015) was 68 days. The projected cost to incarcerate an individual is $6,477. The total average cost per client supervised by local probation in lieu of incarceration is approximately $583. Thus, the resultant savings for community supervision versus jail is $5,894 per individual. The OAR local probation program supervised 113 individuals from Madison County. **The total jail cost savings for Madison County due to OAR local probation supervision is $666,022.**

Additionally, by providing evidence based interventions, the program significantly impacts recidivism. The program's three year recidivism rate of 25% (vi) betters the national average of 43%. Thus, participants are less likely to re-offend post-completion. **This 18% difference yields an approximate $129,668 in avoided jail costs for 22 participants for Madison County.**

The local probation program also collected over $18,303 in restitution that was returned to crime victims. The program facilitated the completion of over 14,709 hours of community service to the localities served. Over $220,635 in unpaid labor was realized by the program's collaboration with community service partners. **Between the collection of restitution and community service, over $238,938 was returned directly to the community during FY 2019.**

## Criminal Justice Planning

Utilizing a $50,000 grant from the Virginia Department of Criminal Justice Services (written by the Planner), the CCJB engaged in a lengthy strategic planning process during FY19, culminating in the adoption of a new three-year strategic plan in January 2019. The Planner facilitated this process from start to finish, first by assisting the Albemarle County Procurement Office (as the fiscal agent) in crafting a Request for Quote to identify a qualified outside consultant to work with the CCJB in the planning process. The Planner then helped Albemarle County qualify responses to the RFQ, which led to the hiring of the Center for Effective Public Policy (CEPP) to provide strategic planning consulting services. CEPP worked extensively with CCJB member jurisdictions to elicit input from stakeholders in the development of the new strategic plan. The Planner served as point of contact with CEPP, facilitated community meetings, and assisted in the development of a stakeholder survey to guide the development of the plan. The new plan was adopted by unanimous vote at the December 2018 CCJB meeting.

The new strategic plan requires that the Planner "provide CCJB members with jurisdiction-specific data and information that can inform local criminal justice decision making". The Planner has fulfilled this element of the strategic plan by undertaking a number of different analyses.

The Planner completed a first-of-its-kind study of the Circuit Courts in each of the nine CCJB jurisdictions, charting ten-year trends in hearing volume, sentencing volume, charge types, sentence length, and jail/prison bed days encumbered. This analysis has allowed the CCJB to have data-driven discussions regarding the trends in each jurisdiction, and broader trends impacting the cost of running the Albemarle-Charlottesville and Central Virginia Regional Jails. The Planner also conducted a comparative study of long-term booking trends at both of the regional jails from 2011 to 2018. This study revealed a number of differences between the two

jails' booking patterns, prevalent charge types, and frequency of probation violations that have significant implications for future population growth at each jail.

The Planner assembled ten years of reported crime data for each CCJB jurisdiction to help board members better understand trends in crime rates in their communities, how crime patterns are changing over time, and where criminal justice resources might be best invested.

The Planner worked with the University Of Virginia Department Of Systems Engineering to measure the preponderance of serious mental illness at both regional jails, which led to recommendations to improve screening practices and linkage to community mental health agencies following release. Among other findings, this research has revealed that rural communities face significant challenges in facilitating treatment linkage and retention, impacted by a lack of sufficient treatment resources, proximity to treatment and limited transportation options.

*Intention of Use:*

## Local Probation Program

To provide evidence based local probation supervision in lieu of incarceration for 900 adults who have been found guilty of misdemeanor and felony offenses during FY 2020-21.

a. Provide supervision to local responsible offenders in the community in lieu of jail ensuring compliance with court orders
b. Address risk management and provide program services and referrals to address reduction in recidivism.

**FY21 Proposed Outcomes**

- **68%** of 900 participants with avoidance of or mitigation of risk factors by successful completion of terms of probation as measured by standardized program and court records
- **65%** of 900 program participants who do not reoffend with jailable offenses for three years post release from supervision as measured by statistically valid representative sampling of program records and state police records
  Note: the three year time frame is the national and state benchmark for recidivism evaluation.

**Evidence based strategies:**

Over the last twelve years, the local probation program has been a Virginia Department of Criminal Justice Services (DCJS) site for the implementation of six evidence based strategies to reduce recidivism and reduce probation failure. Through the participation in the OAR local probation program, offenders are (1)assessed for risk, (2)Purpose Driven communication techniques are utilized by staff to increase offender motivation, (3)differential supervision strategies based upon risk level, (4)offender interventions are responsive to risk, (5)positive reinforcement strategies and community supports are developed, and (6)evaluation of effectiveness is conducted. All local probation officers are state certified in Purpose Driven

Communication, evidence based practices proven to enhance intrinsic motivation in the offender population. Officers are state trained and utilize validated risk instruments to assess all offenders risk and needs. Through the risk assessment process utilizing validated recidivism risk assessment tools (M-OST and OST), the local program focuses on providing interventions related to the most significant dynamic risk predictors identified by research in reducing recidivism. The officers are state trained in case planning in which low risk offenders are screened out and medium and high risk offenders, in partnership with staff, build individualized case plans to address criminogenic risk/needs factors. Medium and high risk clients are provided differential supervision based on their individual risk for recidivating. The goal of this process is to provide supervision related to the identified risk level of the offender. High risk offenders receive more frequent supervision and intervention. Conversely, lower risk offenders receive the least restrictive supervision. Research has indicated that over-supervising and inter-mingling the low and high risk population has negative impact on recidivism reduction by raising the risk level of the low risk offender. Through the use of motivational interviewing, risk assessment and the case planning process, staff and the offenders develop positive reinforcement strategies and support networks to strengthen pro-social activity and community bonds. Finally, risk assessment information, training information, probation success and recidivism is being reported quarterly and evaluated annually by the Program and the Department of Criminal Justice Services as a continuous quality improvement strategy. All strategies are supported by national research and are identified by the National Institute of Corrections, the American Probation and Parole Association and the Center for Effective Public Policy as Evidence Based Practices (EBP) in reducing recidivism.

## Criminal Justice Planner

The Criminal Justice Planner supports the use of evidence-based decision-making in all phases of the criminal justice process and facilitates a cohesive approach among member jurisdictions, informed by research. The Planner serves as an information hub between jurisdictions, supporting coordinated strategies to address common cross-jurisdictional problems.

**FY21 Proposed outcomes**

- Provide criminal justice stakeholders (Community Criminal Justice Board, Evidence Based Decision Making Board and Reentry Council) with jurisdiction-specific data and information that can inform local criminal justice decision making as identified by the 3 year CCJB Strategic Plan
- Develop a common data metric dashboard/scorecard for CCJB member jurisdictions and the various jail catchment areas to enhance data driven decision –making to identify unique criminal justice gaps and challenges
- Meet with locality (within the CCJB, EBDM Board and Reentry Council) to present and discuss jurisdiction-specific criminal justice data, implications, and solutions.
- Develop and disseminate an annual "state of the region" report highlighting the efforts of CCJB, EBDM and Reentry Council to address identified gaps, current strategies implemented and key criminal justice indicators of member jurisdictions.

**To accomplish these goals, the Planner engages in the following work:**

- Calls quarterly meetings of the Thomas Jefferson Area Community Criminal Justice Board, and supports the work of the Board.
- Conducts a variety of research for jurisdictions in support of recidivism and cost reduction.
- Writes grants to secure funding for CCJB initiatives, including a $50,000 grant for technical support in creating the new Strategic Plan.
- Works with state and local probation departments to measure and improve outcomes.
- Works with criminal justice and behavioral health agencies to improve collaboration and service provision to those with substance abuse and mental health issues.
- Provides data support for Reentry Councils serving Louisa, Albemarle and Charlottesville.
- Works with both regional jails (CVRJ and ACRJ) to better understand long-term booking trends, average length of stay by crime type, the demographics of the average daily jail population, and the expenditure of jail bed days by crime type/severity.

| **FUNDING** | |
|---|---|
| *Category of Funding* | X *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>☐ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | Local probation = $7,978<br>Criminal Justice Planner = $3,485<br>$ 11,463 |

Signature: _____ Title: Executive Director

Printed Name: W. R. Carew III Date: December 16, 2019

[i] National Center for State Courts, Virginia Local Community Based Probation Recidivism Results FY12, Sept 2016
[ii] The Pew Center on the States, State of Recidivism; April 2010

## OAR FY21 Madison County Additional Information

1) **FY19 Audit – submitted**
2) **IRS letter of Exemption – submitted**
3) **Financial Analysis- Agency budget submitted**

# Local Probation Funding

OAR has made an effort to share the cost of the Probation services across all the localities. A formula was developed for requesting funds from each locality served. The total cost has been decreased due to charging fees for services. **The request for OAR Local Probation Services for Madison is $7978**.

**Budget Summary for Local Probation**

| | FY19 Actual | FY20 Budget | FY21 Projected | % change |
|---|---|---|---|---|
| Personnel | $427,786 | $465,541 | $512,095 | 10% |
| Occupancy | $32,312 | $32,240 | $33,000 | 2.36% |
| Operational | $56,074 | $71,912 | $70,879 | -1.44% |
| Total | $516,172 | $569,693 | $615,974 | 8.12% |
| | | | | |
| Full time Positions | 9 | 9 | 9 | 0 |
| Part time positions | 0 | 0 | 0 | 0 |

**Local Probation source funding from all localities**

| | FY19 requested | FY19 awarded | FY20 requested | FY20 awarded | FY21 requested |
|---|---|---|---|---|---|
| Albemarle | $6,222 | $6,222 | $6,409 | $6,409 | $20,687 |
| Charlottesville | $21,539 | $21,539 | $21,539 | $21,539 | $32,973 |
| Fluvanna | $9,365 | $7,374 | $9,646 | $7,600 | $9,884 |
| Goochland | $4,869 | $4,869 | $5,015 | $5,015 | $8,543 |
| Greene | $5,392 | $5,362 | $5,554 | $5,362 | $5,154 |
| Louisa | $8,783 | $0 | $9,046 | $0 | $13,062 |
| Madison | $4,915 | $4,915 | $5,062 | $5,062 | $7,978 |
| Nelson | $3,415 | $3,352 | $3,517 | $2,809 | $3,459 |
| Orange | $7,000 | $7,000 | $7,210 | $7,000 | $8,190 |
| Total | $71,245 | $60,633 | $72,998 | $60,796 | $109,930 |

The local probation program also receives funding in the amount of $486,807 from the Department of Criminal Justice Services. Additional the program receives approximately $6,500 in client fees.

# Criminal Justice Planner Funding

In an effort to equitably share the cost of the Planner across all the localities served, a formula was developed for requesting funds from each locality served, based on their population size. (2015 UVA Weldon Cooper Center) **The request for Criminal Justice Coordination and Planning for Madison is $3,485.** This is a 5% increase from last year's request.

**Budget Summary for the Criminal Justice Planner**

| | FY19 Actual | FY20 Budget | FY21 Projected | % change |
|---|---|---|---|---|
| **Personnel** | $65,470 | $67,097 | $69,745 | **3.95%** |
| **Occupancy** | $3,200 | $5,450 | $5,450 | **0%** |
| **Operational** | $109,725 | $88,483 | $88,331 | **-.17%** |
| **Total** | $178,395 | $161,030 | $163,526 | **1.55%** |
| | | | | |
| **Full time Positions** | **1** | **1** | **1** | **0** |
| **Part time positions** | **0** | **0** | **0** | **0** |

## Changes to Budget:

In FY19-20, the Planner (OAR) will be the fiscal agent for the three year ($84,475) CACF Mental Health Treatment Navigation grant. This grant is in partnership with Region Ten and Partners for Mental Health for the provision of direct service.

## Criminal Justice Planner source funding from all localities based on population

| CJ Planner | FY19 requested | FY19 awarded | FY20 requested | FY20 awarded | FY21 requested |
|---|---|---|---|---|---|
| **Albemarle** | $20,790 | $20,790 | $21,414 | $21,414 | **$22,485** |
| **Charlottesville** | $10,398 | $10,398 | $10,398 | $10,398 | **$10,918** |
| **Fluvanna** | $6,474 | $6,126 | $6,668 | $6,150 | **$7,001** |
| **Greene** | $4,773 | $4,010 | $4,916 | $4,010 | **$5,162** |
| **Louisa** | $8,528 | $8.852 | $8,784 | $8,852 | **$9,223** |
| **Madison** | $3,222 | $3,222 | $3,319 | $3,222 | **$3,485** |
| **Nelson** | $3,664 | $1,500 | $3,774 | $2,253 | **$3,963** |
| **Orange** | $8,756 | $8,756 | $9,019 | $8,756 | **$9,470** |
| **Total** | $66,605 | $63,654 | $68,603 | $65,055 | **$72,033** |

4) **Clients served**

| | FY19 Actual | FY20 proj | FY21 proj |
|---|---|---|---|
| Albemarle | 766 | 775 | 775 |
| Charlottesville | 1306 | 1325 | 1325 |
| Fluvanna | 269 | 270 | 270 |
| Goochland | 134 | 135 | 135 |
| Greene | 222 | 225 | 225 |
| Louisa | 441 | 450 | 450 |
| Madison | 179 | 180 | 180 |
| Nelson | 109 | 110 | 110 |
| Orange | 337 | 340 | 340 |
| Other | 551 | 555 | 555 |
| Total | 4313 | 4365 | 4365 |

We define clients served as face to face contact with residents of that locality. Please note that we serve Madison residents in programs for which we do not request local funds such as pretrial services and reentry services.

## Total Agency
***Revenue and Expense Report***

**Agency: OAR Jefferson Area Community Corrections**

| | Prior Yr. 2018/2019 | Current Yr. 2019/2020 | Proposed Yr. 2020/2021 | | | |
|---|---|---|---|---|---|---|
| ***Revenue:*** | *Actual* | *Budget* | *Projected* | $ Diff. | % Chg. | % Agency Total |
| 1. Albemarle County | 214,034 | 218,806 | 247,746 | 28,940 | 13.2% | 9.5% |
| 2. City of Charlottesville | 336,564 | 347,804 | 376,392 | 28,588 | 8.2% | 14.4% |
| 3. Fluvanna | 13,500 | 13,750 | 16,885 | 3,135 | 22.8% | 0.6% |
| 4 Goochland | 4,869 | 5,015 | 8,543 | 3,528 | 70.3% | 0.3% |
| 5 Greene | 9,372 | 9,372 | 10,316 | 944 | 10.1% | 0.4% |
| 6 Louisa | 8,852 | 8,852 | 22,285 | 13,433 | 151.8% | 0.9% |
| 7 Madison | 4,915 | 5,062 | 7,978 | 2,916 | 57.6% | 0.3% |
| 9 Nelson | 4,852 | 5,062 | 9,422 | 4,360 | 86.1% | 0.4% |
| 10 Orange | 7,000 | 7,000 | 8,190 | 1,190 | 17.0% | 0.3% |
| 11 United Way -Thomas Jeff. Area | 24,000 | 16,500 | 25,000 | 8,500 | 51.5% | 1.0% |
| 12 State Funding | 1,344,928 | 1,378,895 | 1,333,895 | -45,000 | -3.3% | 50.9% |
| 13 Federal Funding | 226,827 | 286,902 | 286,902 | 0 | 0.0% | 11.0% |
| 14 Grants: Foundation and Corp. | 49,738 | 84,000 | 84,000 | 0 | 0.0% | 3.2% |
| 15 Fees: Program Service Fees | 84,807 | 107,033 | 107,000 | -33 | 0.0% | 4.1% |
| 16 Fees: Government | 75,000 | 75,000 | 75,000 | 0 | 0.0% | 2.9% |
| 17 Fundraising/Gifts and Bequests | 3,299 | 0 | 0 | 0 | 0.0% | 0.0% |
| 18 Investment Income/Transactions | 180 | 0 | 0 | 0 | 0.0% | 0.0% |
| 19 Miscellaneous Revenue | 13,380 | | | 0 | 0.0% | 0.0% |
| **TOTAL REVENUE** | 2,426,117 | 2,569,053 | 2,619,554 | 50,501 | 2.0% | |
| ***Expenses:*** | | | | | | |
| 20. Personnel (Salaries/Fringes) | 1,453,133 | 1,613,827 | 1,678,380 | 64,553 | 4.0% | 64.1% |
| 21. Professional Fees (Consultants) | 0 | 0 | 0 | 0 | 0.0% | 0.0% |
| 22. Occupancy | 132,578 | 135,300 | 139,359 | 4,059 | 3.0% | 5.3% |
| 23. Supplies | 25,420 | 25,795 | 27,084 | 1,289 | 5.0% | 1.0% |
| 24. Equipment | 71,705 | 45,100 | 47,000 | 1,900 | 4.2% | 1.8% |
| 25. Miscellaneous | 690,031 | 749,031 | 727,731 | -21,300 | -2.8% | 27.8% |
| **TOTAL EXPENSES** | 2,372,867 | 2,569,053 | 2,619,554 | 50,501 | 2.0% | |
| 40. Surplus/(Deficit) * | 53,250 | 0 | 0 | 0 | 0.0% | |

* Explain any Surplus or Deficit: FY19 surplus was a result of the staff vacancy for 9 months due to Executive Director retirement and subsequent hiring of both a new Executive Director and Assistant Director.

# OFFENDER AID AND RESTORATION OF CHARLOTTESVILLE AND ALBEMARLE, INC.

CHARLOTTESVILLE, VIRGINIA

FINANCIAL REPORT
YEAR ENDED JUNE 30, 2019

HANTZMON WIEBEL LLP
CPA and Advisory Services

# OFFENDER AID AND RESTORATION OF CHARLOTTESVILLE AND ALBEMARLE, INC.

## CONTENTS


| | PAGE |
|---|---|
| Report of independent auditors | 1 |
| Financial statements: | |
| Statements of financial position | 3 |
| Statements of activities | 4 |
| Statements of cash flows | 5 |
| Statement of functional expenses 2019 | 6 |
| Statement of functional expenses 2018 | 7 |
| Notes to financial statements | 8 |

HANTZMON WIEBEL LLP
CPA and Advisory Services

# REPORT OF INDEPENDENT AUDITORS

To the Board of Directors
Offender Aid and Restoration of
Charlottesville and Albemarle, Inc.
Charlottesville, Virginia

We have audited the accompanying financial statements of OFFENDER AID AND RESTORATION OF CHARLOTTESVILLE AND ALBEMARLE, INC. (a nonprofit organization), which comprise the statements of financial position as of June 30, 2019 and 2018, and the related statements of activities, cash flows, and functional expenses for the years then ended, and the related notes to the financial statements.

***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

***Auditor's Responsibility***

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

To the Board of Directors
Offender Aid and Restoration of
Charlottesville and Albemarle, Inc.

## REPORT OF INDEPENDENT AUDITORS

### *Opinion*

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of OFFENDER AID AND RESTORATION OF CHARLOTTESVILLE AND ALBEMARLE, INC. as of June 30, 2019 and 2018, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Huntington Weibel LLP

Charlottesville, Virginia
October 11, 2019

# OFFENDER AID AND RESTORATION OF CHARLOTTESVILLE AND ALBEMARLE, INC.

## STATEMENTS OF FINANCIAL POSITION
## JUNE 30, 2019 AND 2018

### ASSETS

| | 2019 | 2018 |
|---|---|---|
| Cash and cash equivalents | $ 197,900 | $ 390,222 |
| Cash held for others | 8,627 | 8,627 |
| Accounts receivable | 25,686 | 15,153 |
| Grants receivable | 313,678 | 82,875 |
| Prepaid expenses | 2,754 | 6,758 |
| Property and equipment, less accumulated depreciation of $18,633 and $16,833 for 2019 and 2018, respectively | 6,862 | 8,662 |
| Total assets | $ 555,507 | $ 512,297 |

### LIABILITIES AND NET ASSETS

| | | |
|---|---|---|
| **LIABILITIES** | | |
| Accounts payable and accrued expenses | $ 25,399 | $ 13,239 |
| Restitution payable | 8,441 | 8,441 |
| Accrued leave | 48,562 | 50,933 |
| Deferred revenue | 232,966 | 234,378 |
| Total liabilities | 315,368 | 306,991 |
| **NET ASSETS** | | |
| Without donor restrictions | 240,139 | 205,306 |
| Total net assets | 240,139 | 205,306 |
| Total liabilities and net assets | $ 555,507 | $ 512,297 |

(The accompanying notes are an integral part of these financial statements)

# OFFENDER AID AND RESTORATION OF CHARLOTTESVILLE AND ALBEMARLE, INC.

## STATEMENTS OF ACTIVITIES
## FOR THE YEARS ENDED JUNE 30, 2019 AND 2018

| | 2019 | | | 2018 | | |
|---|---|---|---|---|---|---|
| | WITHOUT DONOR RESTRICTIONS | WITH DONOR RESTRICTIONS | TOTAL | WITHOUT DONOR RESTRICTIONS | WITH DONOR RESTRICTIONS | TOTAL |
| **REVENUE, GAINS, AND OTHER SUPPORT** | | | | | | |
| Government grants and appropriations | $ 37,834 | $ 2,184,369 | $ 2,222,203 | $ 31,994 | $ 1,908,070 | $ 1,940,064 |
| Contributions and other grants | 4,662 | 53,071 | 57,733 | 8,936 | 20,000 | 28,936 |
| United Way | .... | 24,256 | 24,256 | .... | 30,596 | 30,596 |
| Contract revenue | 45,360 | .... | 45,360 | 18,205 | .... | 18,205 |
| Client fees | 57,907 | .... | 57,907 | 70,098 | .... | 70,098 |
| Other | 181 | .... | 181 | 205 | .... | 205 |
| Net assets released from restrictions: | | | | | | |
| Satisfaction of program restrictions | 2,261,696 | ( 2,261,696) | .... | 1,958,666 | ( 1,958,666) | .... |
| Total revenue, gains, and other support | 2,407,640 | .... | 2,407,640 | 2,088,104 | .... | 2,088,104 |
| **EXPENSES** | | | | | | |
| Program services: | | | | | | |
| Local probation | 516,172 | .... | 516,172 | 519,324 | .... | 519,324 |
| Reentry program | 284,577 | .... | 284,577 | 302,732 | .... | 302,732 |
| Pretrial services | 622,434 | .... | 622,434 | 633,947 | .... | 633,947 |
| Drug court | 567,404 | .... | 567,404 | 447,792 | .... | 447,792 |
| Criminal justice coordinator | 154,483 | .... | 154,483 | 99,011 | .... | 99,011 |
| Mental health docket | 136,309 | .... | 136,309 | .... | .... | .... |
| Total program services | 2,281,379 | .... | 2,281,379 | 2,002,806 | .... | 2,002,806 |
| Management and general | 91,428 | .... | 91,428 | 107,907 | .... | 107,907 |
| Total expenses | 2,372,807 | .... | 2,372,807 | 2,110,713 | .... | 2,110,713 |
| **CHANGE IN NET ASSETS** | 34,833 | .... | 34,833 | ( 22,609) | .... | ( 22,609) |
| **NET ASSETS AT BEGINNING OF YEAR** | 205,306 | .... | 205,306 | 227,915 | .... | 227,915 |
| **NET ASSETS AT END OF YEAR** | $ 240,139 | $ .... | $ 240,139 | $ 205,306 | $ .... | $ 205,306 |

(The accompanying notes are an integral part of these financial statements)

# OFFENDER AID AND RESTORATION OF CHARLOTTESVILLE AND ALBEMARLE, INC.

## STATEMENTS OF CASH FLOWS
## FOR THE YEARS ENDED JUNE 30, 2019 AND 2018

| | 2019 | 2018 |
|---|---|---|
| **CASH FLOWS FROM OPERATING ACTIVITIES** | | |
| Change in net assets | $ 34,833 | ($ 22,609) |
| Adjustments to reconcile change in net assets to net cash used in operating activities: | | |
| Depreciation | 1,800 | 1,799 |
| (Increase) decrease in operating assets: | | |
| Accounts receivable | ( 10,533) | ( 8,093) |
| Grants receivable | ( 230,803) | ( 61,401) |
| Prepaid expenses | 4,004 | 6,455 |
| Increase (decrease) in operating liabilities: | | |
| Accounts payable and accrued expenses | 12,160 | ( 12,091) |
| Accrued payroll and accrued leave | ( 2,371) | 5,168 |
| Deferred revenue | ( 1,412) | 70,420 |
| Net cash used in operating activities | ( 192,322) | ( 20,352) |
| **CASH FLOWS FROM INVESTING ACTIVITIES** | .... | .... |
| **CASH FLOWS FROM FINANCING ACTIVITIES** | .... | .... |
| **NET DECREASE IN CASH AND CASH EQUIVALENTS** | ( 192,322) | ( 20,352) |
| **CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR** | 390,222 | 410,574 |
| **CASH AND CASH EQUIVALENTS AT END OF YEAR** | $ 197,900 | $ 390,222 |

(The accompanying notes are an integral part of these financial statements)

# OFFENDER AID AND RESTORATION OF CHARLOTTESVILLE AND ALBEMARLE, INC.

## STATEMENT OF FUNCTIONAL EXPENSES
## FOR THE YEAR ENDED JUNE 30, 2019

| | Local Probation | Reentry Program | Pretrial Services | Drug Court | Criminal Justice Coordinator | Mental Health Docket | Management & General | 2019 Total |
|---|---|---|---|---|---|---|---|---|
| Salaries | $ 347,034 | $ 172,577 | $ 385,582 | $ 161,052 | $ 53,792 | $ 26,923 | $ 25,544 | $ 1,172,504 |
| Employee benefits | 53,303 | 30,567 | 64,752 | 26,446 | 7,575 | 4,761 | 3,203 | 190,607 |
| Payroll taxes | 27,449 | 12,891 | 29,329 | 11,544 | 4,103 | 1,859 | 2,847 | 90,022 |
| Total salaries and related expenses | 427,786 | 216,035 | 479,663 | 199,042 | 65,470 | 33,543 | 31,594 | 1,453,133 |
| Client assistance | .... | 13,811 | .... | 879 | .... | .... | .... | 14,690 |
| Client incentives | .... | 11,870 | .... | 4,512 | .... | 511 | .... | 16,893 |
| Drug tests | 5,344 | .... | 10,341 | 39,945 | .... | .... | .... | 55,630 |
| Treatment | .... | .... | .... | 196,890 | .... | .... | .... | 196,890 |
| Professional contracts | .... | .... | .... | 62,952 | 79,502 | 101,387 | .... | 243,841 |
| Facilitator fees | 8,741 | .... | .... | 5,869 | .... | .... | .... | 14,610 |
| Mentoring services | .... | 23,505 | .... | .... | .... | .... | .... | 23,505 |
| Occupancy | 21,522 | 8,970 | 53,815 | 16,350 | 3,000 | 400 | 28,519 | 132,576 |
| Telephone | 1,000 | 1,250 | 5,034 | 1,500 | 200 | 219 | 161 | 9,364 |
| Supplies | 7,439 | 529 | 10,394 | 5,405 | 23 | 249 | 1,381 | 25,420 |
| Postage | 750 | 50 | 792 | 50 | .... | .... | 135 | 1,777 |
| Printing | 1,978 | 348 | 1,205 | 237 | .... | .... | 178 | 3,946 |
| Professional fees | 4,097 | 1,206 | 6,204 | 3,548 | .... | .... | 17,626 | 32,681 |
| Insurance | 1,272 | .... | 5,136 | .... | .... | .... | 3,000 | 9,408 |
| Training, conferences, and meetings | 4,329 | 874 | 6,783 | 17,726 | 324 | .... | 51 | 30,087 |
| Travel | 7,594 | 912 | 7,163 | 2,338 | 944 | .... | 143 | 19,094 |
| Dues and subscriptions | 185 | .... | 160 | 359 | 20 | .... | 520 | 1,244 |
| Affiliation fees | .... | .... | .... | .... | .... | .... | 125 | 125 |
| Equipment maintenance | 8,518 | 5,000 | 15,113 | 1,922 | .... | .... | 434 | 30,987 |
| Equipment purchase | 15,117 | 82 | 19,951 | 5,568 | .... | .... | .... | 40,718 |
| Miscellaneous | 500 | 135 | 680 | 2,312 | .... | .... | 5,761 | 9,388 |
| Evaluation fees | .... | .... | .... | .... | 5,000 | .... | .... | 5,000 |
| Depreciation | .... | .... | .... | .... | .... | .... | 1,800 | 1,800 |
| Total expenses | $ 516,172 | $ 284,577 | $ 622,434 | $ 567,404 | $ 154,483 | $ 136,309 | $ 91,428 | $ 2,372,807 |

(The accompanying notes are an integral part of this financial statement)

# OFFENDER AID AND RESTORATION OF CHARLOTTESVILLE AND ALBEMARLE, INC.

## STATEMENT OF FUNCTIONAL EXPENSES
## FOR THE YEAR ENDED JUNE 30, 2018

| | Local Probation | Reentry Program | Pretrial Services | Drug Court | Criminal Justice Coordinator | Management & General | 2018 Total |
|---|---|---|---|---|---|---|---|
| Salaries | $ 373,273 | $ 192,295 | $ 401,596 | $ 157,213 | $ 53,018 | $ 36,612 | $ 1,214,007 |
| Employee benefits | 45,040 | 37,242 | 58,128 | 24,819 | 7,247 | 8,994 | 181,470 |
| Payroll taxes | 28,125 | 14,304 | 33,722 | 11,743 | 4,044 | 2,033 | 93,971 |
| Total salaries and related expenses | 446,438 | 243,841 | 493,446 | 193,775 | 64,309 | 47,639 | 1,489,448 |
| Offender assistance | .... | 10,812 | .... | 490 | .... | .... | 11,302 |
| Drug tests | 3,950 | .... | 11,120 | 34,039 | .... | 43 | 49,152 |
| Treatment | .... | 4,954 | .... | 131,728 | .... | .... | 136,682 |
| Education | .... | .... | .... | 6,000 | .... | .... | 6,000 |
| Facilitator fees | 5,604 | .... | .... | 8,239 | .... | 50 | 13,893 |
| Mentoring services | .... | 13,236 | .... | .... | .... | .... | 13,236 |
| Occupancy | 21,200 | 10,560 | 50,602 | 16,350 | 3,000 | 25,939 | 127,651 |
| Telephone | 1,500 | 800 | 4,682 | 2,000 | 180 | 432 | 9,594 |
| Supplies | 4,392 | 1,431 | 7,580 | 791 | .... | 156 | 14,350 |
| Postage | 400 | 75 | 513 | 200 | .... | 568 | 1,756 |
| Printing | 1,745 | 302 | 1,923 | 132 | 199 | 118 | 4,419 |
| Professional fees | 9,055 | 4,800 | 7,205 | 23,578 | 30,000 | 11,623 | 86,261 |
| Insurance | 1,083 | .... | 1,325 | .... | .... | 6,860 | 9,268 |
| Training, conferences, and meetings | 4,310 | 91 | 11,190 | 15,532 | 432 | 1,384 | 32,939 |
| Travel | 5,721 | 2,383 | 12,820 | 4,467 | 866 | 176 | 26,433 |
| Dues and subscriptions | 200 | .... | 790 | 100 | 25 | 600 | 1,715 |
| Affiliation fees | .... | 203 | .... | .... | .... | 125 | 328 |
| Equipment maintenance | 5,345 | 6,250 | 14,005 | 3,988 | .... | 3,652 | 33,240 |
| Equipment purchase | 7,857 | 2,994 | 15,719 | 3,870 | .... | 5,771 | 36,211 |
| Miscellaneous | 524 | .... | 1,027 | 2,513 | .... | 972 | 5,036 |
| Depreciation | .... | .... | .... | .... | .... | 1,799 | 1,799 |
| Total expenses | $ 519,324 | $ 302,732 | $ 633,947 | $ 447,792 | $ 99,011 | $ 107,907 | $ 2,110,713 |

(The accompanying notes are an integral part of this financial statement)

# OFFENDER AID AND RESTORATION OF CHARLOTTESVILLE AND ALBEMARLE, INC.

## NOTES TO FINANCIAL STATEMENTS

### NATURE OF ACTIVITIES

Offender Aid and Restoration of Charlottesville and Albemarle, Inc. (OAR or the Organization) is a not-for-profit organization exempt under Section 501(c)(3) of the U. S. Internal Revenue Code. The agency has been classified as a publicly-supported organization that is not a private foundation under Section 509(a) of the Code.

The Organization provides the following programs for offenders to assist them in court and the transition period from incarceration to the community:

***Local Probation***

The local probation program provides probation supervision for offenders referred from the City of Charlottesville and the counties of Albemarle, Fluvanna, Goochland, Greene, Louisa, Madison, Nelson, and Orange. The primary focus of this program is to divert local responsible offenders (misdemeanors and Class 5 and 6 felons) from the local jails and require them to complete the following court-ordered requirements: community service, payment of restitution and/or court costs, and specific treatment interventions. Typical treatment interventions are substance abuse treatment and drug and alcohol screening, domestic violence intervention, substance abuse education, anger management, and mental health counseling. The local probation program is designed to ensure the offender's strict compliance with the court's order while assisting the offender to address specific issues with the goal of reducing recidivism.

***Reentry Program***

The reentry program was the first program offered at OAR in 1971. This program focuses on the reintegration of incarcerated adults into the community. The goal of this program is to provide a network of transitional and reentry services targeted to the offender population to reduce the barriers to successful reintegration into the community. Throughout this last year, the program continued to make strides to be on the forefront of community-based reentry programs in Virginia. As the program moves forward, the Organization looks to implement evidence-based practices and principles to reach the ultimate goal - ensuring clients have the opportunity for success. These practices revolve around 'what works' in helping to reduce recidivism. The program operates in two distinct areas in an attempt to provide reentry services that match the needs of the pre-release inmates and the post-release ex-offender population.

***Pretrial Services***

The pretrial program provides supervision of defendants from arrest to trial for the City of Charlottesville and the counties of Albemarle, Fluvanna, Greene, Louisa, Madison, Nelson, and Orange. The fundamental focus of this program is to reduce the number of defendants held in the local jails prior to their trial and to ensure that the system is equitable. By providing accurate and current background investigative information on a defendant, the pretrial program assists local judges in making more informed release and bond decisions. Services are primarily targeted for those arrested for non-violent crimes or those that receive a bail, but remain detained in the jail following an initial bond hearing. Pretrial services also provide community supervision to defendants released on bond in order to ensure compliance with specific court-ordered conditions.

## NOTES TO FINANCIAL STATEMENTS

### *Drug Court*

The drug court program provides drug treatment and intensive supervision to drug offenders and drug-related felony larceny offenders in the circuit courts of the City of Charlottesville and Albemarle County. It is designed to enhance public safety by focusing on the treatment needs of local, non-violent adults charged with drug-related offenses who are drug addicted. The goal is to stop the abuse of illegal drugs and alcohol, and the related criminal activity resulting from such abuse. The collaboration of numerous organizations provide these services.

### *Criminal Justice Coordinator*

The Criminal Justice Coordinator for the Thomas Jefferson Area Community Criminal Justice Board (CCJB) is co-located with OAR. The Coordinator serves as the liaison to the nine localities represented on the CCJB: Albemarle, Charlottesville, Fluvanna, Goochland, Greene, Louisa, Madison, Nelson, and Orange. The purpose of the CCJB and the Coordinator is to enable the participating localities to work together to develop and support an effective and comprehensive range of services for the purpose of promoting public safety and offender accountability and rehabilitation.

### *Mental Health Docket*

The Mental Health docket is a post plea docket serving Albemarle County and Charlottesville. The mission of the docket is to provide an evidence-based, judicially-supervised approach that addresses the needs of eligible defendants, for whom there is a likely connection between their mental illness and their criminal behavior. The docket will facilitate their identification and diversion from incarceration, and link participants to appropriate mental health treatment and community support.

## SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

### *Basis of Accounting*

The Organization utilizes grant accounting for governmental grants received for specific programs. This accounting recognizes grant revenue to the extent of grant expenditures paid. Grant revenues received but not expended are reported as deferred revenue.

### *Financial Statement Presentation*

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board (FASB) in its Accounting Standards Codification (ASC) No. 958, *Not-for-Profit Entities.*

In August 2016, the FASB issued Accounting Standards Update (ASU) 2016-14, *Presentation of Financial Statements for Not-for-Profit Entities.* Major components of this standard include disclosures regarding liquidity and availability of resources, presentation of expenses by their functional and natural classifications, and changes to net asset classifications. The pronouncement requires qualitative and quantitative information to be presented about management of liquidity resources and the availability of financial assets to meet cash needs within one year. In addition, net asset classifications are reduced from three classes (unrestricted, temporarily restricted, and permanently restricted) to two: net assets without donor restrictions, and net assets with donor restrictions, as follows:

**Without Donor Restrictions** - Net assets available for use in general operations and not subject to donor (or certain grantor) restrictions. At June 30, 2019 and 2018, the Organization had net assets without donor restrictions of $240,139 and $205,306, respectively.

**With Donor Restrictions** - Net assets subject to donor- (or certain grantor) imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Donor-imposed restrictions are released when a restriction expires; that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both. At June 30, 2019 and 2018, the Organization did not have any net assets with donor restrictions.

The standard is effective for years beginning after December 15, 2017. There was no impact on total net assets as a result of the adoption of ASU 2016-14.

***Accounting for Uncertain Tax Positions***

The Organization has reviewed and evaluated the relevant technical merits of each of its tax positions in accordance with guidance established by the Financial Accounting Standards Board (FASB) and determined that there are no uncertain tax positions that would have a material impact on the financial statements of the Organization.

***Restricted Resources - Donor Restricted***

Funding for programs may be from sources both with or without donor restrictions. In certain programs, donor restricted grants are received that must be either expended or refunded within a stipulated time period. Expenditures for programs with refundable grants are first applied to those grants, and then to any other funding sources. Donor restricted grants and grants without donor restrictions containing carryforward provisions are deferred to the extent that they are not fully expended in the fiscal year in which they are received.

***Contributions***

The Organization reports gifts of cash and other assets as restricted support if they are received with donor stipulations that limit the use of donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions.

The Organization reports gifts of land, buildings, and equipment as unrestricted support unless explicit donor stipulations specify how the donated assets are to be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long these long-lived assets must be maintained, the Organization reports expirations of donor restrictions when the donated or acquired long-lived assets are placed in service.

## NOTES TO FINANCIAL STATEMENTS

### *Donated Services*

A number of volunteers have donated significant amounts of their time to the Organization's programs. However, no amounts have been reflected in the financial statements for their services since there is no objective basis available to measure their value.

### *Use of Estimates*

The preparation of financial statements in conformity with U. S. generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

### *Subsequent Events*

Management has evaluated subsequent events through October 11, 2019, which is the date the financial statements were available to be issued.

### *Cash and Cash Equivalents*

For purposes of the statement of cash flows, the Organization considers highly-liquid investments available for current use with an initial maturity of three months or less to be cash equivalents. OAR maintains operating funds in a federally-insured bank. From time to time, the funds held in the account may exceed federally-insured limits.

### *Cash Held for Others*

The Organization collects funds from offenders who have been ordered by the Court to pay restitution, and disburses it to victims. At June 30, 2019 and 2018, the Organization held $8,627 for restitution by offenders. Such funds are held in a separate bank account, as required by law.

### *Accounts Receivable*

Accounts receivable consists of funds due to the Organization for operations. Accounts receivable are due when billed and are carried at their estimated collectible amounts. Management evaluates payment histories in establishing any potential allowance for uncollectible amounts. Management believes that all amounts are fully collectible; accordingly, no allowance for uncollectible accounts has been recorded in the accompanying financial statements. Accounts receivable were $25,686 and $15,153 at June 30, 2019 and 2018, respectively.

### *Grants Receivable*

Grants receivable consists of funding commitments made by government agencies for the fiscal year not yet received as of the year end. Grants receivable were $313,678 and $82,875 at June 30, 2019 and 2018, respectively. Management believes that such amounts are fully collectible; accordingly, no allowance for uncollectible accounts has been recorded in the accompanying financial statements.

## NOTES TO FINANCIAL STATEMENTS

### *Fixed Assets*

The Organization follows the practice of capitalizing all expenditures for fixed assets in excess of $2,500; donated fixed assets are capitalized at their fair market value at the date of donation. Depreciation is provided over the estimated useful lives of the assets, which generally approximates five years, using the straight-line method. Depreciation expense was $1,800 and $1,799 for the years ended June 30, 2019 and 2018, respectively.

The cost and accumulated depreciation of property and equipment are as follows:

| | JUNE 30, 2018 | ADDITIONS | DISPOSITIONS | JUNE 30, 2019 |
|---|---|---|---|---|
| Office equipment | $ 13,692 | $ .... | $ .... | $ 13,692 |
| Leasehold improvements | 11,803 | .... | .... | 11,803 |
| Total fixed assets | 25,495 | .... | .... | 25,495 |
| Accumulated depreciation | 16,833 | 1,800 | .... | 18,633 |
| Net fixed assets | $ 8,662 | ($ 1,800) | $ .... | $ 6,862 |

### *Deferred Revenue*

Deferred revenue generally represents funds received from government appropriations and government and other grants for specific programs, that have yet to be expended on those programs. The Organization is entitled to retain the funds until they are utilized for the purpose for which they were granted.

Deferred revenue consists of the following at June 30, 2019 and 2018:

| | 2019 | 2018 |
|---|---|---|
| Local Probation | $ 365 | $ 365 |
| Reentry II | 51,080 | 30,547 |
| Charlottesville Pretrial | 12,967 | 1,234 |
| Orange Pretrial | 28,115 | 28,115 |
| Drug Court | 120,925 | 119,117 |
| Criminal Justice Planner | 13,524 | .... |
| Mental Health Docket | 5,990 | 55,000 |
| Total | $232,966 | $234,378 |

### *Functional Allocation of Expenses*

The statements of functional expenses present the natural classification of expenses by function. Accordingly, certain costs have been allocated among the program and supporting services benefited.

## NOTES TO FINANCIAL STATEMENTS

The statement of functional expenses includes certain categories of expenses that are attributable to more than one program or supporting function. Therefore, these expenses require allocation on a reasonable basis that is consistently applied. The expenses that are allocated include salaries and wages, benefits, payroll taxes, occupancy, telephone, and office supplies. The expenses are allocated on the basis of time and effort spent on program and management and general activities.

### ACCRUED LEAVE

Employees earn vacation leave based on number of years of service. The Organization allows employees to carry over a maximum of 105 hours into the next year. At June 30, 2019 and 2018, the liability for accrued leave was $48,562 and $50,933, respectively.

### RESTRICTED ASSETS

Net assets were released from grantor restrictions by incurring expenditures satisfying the restricted purposes of the grants. Net assets released from restrictions for the years ended June 30, 2019 and 2018 are as follows:

| | 2019 | 2018 |
|---|---|---|
| Comprehensive Community Corrections | $ 514,567 | $ 514,054 |
| Reentry II | 245,818 | 277,389 |
| Orange Pretrial | 299,794 | 300,000 |
| Pretrial | 322,610 | 331,885 |
| Drug Court | 574,901 | 447,790 |
| Criminal Justice Coordinator | 149,996 | 87,548 |
| Mental Health Docket | 154,010 | .... |
| Total | $2,261,696 | $1,958,666 |

### LIQUIDITY AND AVAILABILITY OF FUNDS

The Organization's financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the statement of financial position date, are as follows at June 30, 2019 and 2018:

| | 2019 | 2018 |
|---|---|---|
| Cash and cash equivalents | $ 197,900 | $ 390,222 |
| Grant receivable | 313,678 | 82,875 |
| Other receivables - Operating fund | 25,686 | 15,153 |
| Total financial assets available for use within one year | $ 537,264 | $ 488,250 |

The Organization manages its cash available to meet general expenditures under the following guiding principles:

- Operating within a prudent range of financial soundness and stability
- Maintaining adequate liquid assets to fund near-term operating needs

# OFFENDER AID AND RESTORATION OF CHARLOTTESVILLE AND ALBEMARLE, INC.

## NOTES TO FINANCIAL STATEMENTS

### SIGNIFICANT FUNDING SOURCES

The Organization receives the majority of its annual funding in the form of grants and fees from various agencies of the Commonwealth of Virginia. Such funding is dependent upon annual appropriations made by the Commonwealth to its agencies.

The Organization received its primary funding from the following during the years ended June 30, 2019 and 2018:

| | 2019 | 2018 |
|---|---|---|
| County of Albemarle | $ 214,034 | $ 154,402 |
| City of Charlottesville | $ 297,403 | $ 235,343 |
| Commonwealth of Virginia | $1,332,213 | $1,281,128 |
| United States Government | $ 260,770 | $ .... |

Due to the current economic climate, the Commonwealth of Virginia and its localities have experienced significant revenue shortfalls, which may affect their ability to provide funding to the Organization at its current levels. If the Organization were to experience significant funding cuts from its primary grantors, it would be required to reduce both personnel and services provided to its clients.

### LEASE AGREEMENT

The Organization leases its Charlottesville office facilities pursuant to a lease agreement, which is through September 30, 2020. The lease requires annual increases of 2%. The Organization also leases office space in Orange County. This lease was renewed for an additional five years in October 2017 through September 2022, and was expanded to include additional office space.

Future minimum rental payments required under noncancellable lease agreements are as follows:

| FISCAL YEAR | AMOUNT |
|---|---|
| 2020 | $ 110,506 |
| 2021 | 42,139 |
| 2022 | 19,200 |
| 2023 | 4,800 |
| | $ 176,645 |

Rental expense for the years ended June 30, 2019 and 2018 was $109,588 and $106,200, respectively.

### EMPLOYEE BENEFIT PLAN

The Organization sponsors a defined contribution plan, which is available to all full-time personnel. Employees may contribute a portion of their salaries through a salary reduction plan. The Organization made contributions totaling $18,803 and $20,815 to the plan for the years ended June 30, 2019 and 2018, respectively. Employees participating in the plan are fully vested.

Internal Revenue Service
District Director

Department of the Treasury

Date: May 11, 1977

Our Letter Dated:
February 5, 1975
Person to Contact:
J. Bache
Contact Telephone Number:
(301) 962-4774

Offender Aid and Restoration of
Charlottesville-Albemarle, Inc.
414 Fourth Street, NE
Charlottesville, Virginia 22901

This modifies our letter of the above date in which we stated that you would be treated as an organization which is not a private foundation until the expiration of your advance ruling period.

Based on the information you submitted, we have determined that you are not a private foundation within the meaning of section 509(a) of the Internal Revenue Code, because you are an organization of the type described in section 170(b)(1)(A)(vi). Your exempt status under section 501(c)(3) of the code is still in effect.

Grantors and contributors may rely on this determination until the Internal Revenue Service publishes notice to the contrary. However, a grantor or a contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act that resulted in your loss of section 170(b)(1)(A)(vi) status, or acquired knowledge that the Internal Revenue Service had given notice that you would be removed from classification as a section 170(b)(1)(A)(vi) organization.

Because this letter could help resolve any questions about your private foundation status, please keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown above.

Sincerely yours,

District Director

cc: William J. Strickland
P.O. Box 1191
Charlottesville, Virginia 22902

Address any reply to: P.O. Box 538, Baltimore, Md. 21203

Department of the Treasury

District Director

**Internal Revenue Service**

Date: February 5, 1975

In reply refer to: Case #501392
EO:113:M. Klasman

Telephone: 301-962-4769

▷ Offender Aid and Restoration of
Charlottesville-Albemarle, Inc.
414 Fourth Street, N. E.
Charlottesville, Virginia 22901

Accounting Period Ending: September 30
Form 990 Required: ☒ Yes ☐ No
Advance Ruling Period Ends: September 30, 1976

Based on the information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably be expected to be a publicly supported organization of the type described in section 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, you will be treated as a publicly supported organization, and not as a private foundation, during an advance ruling period. This advance ruling period begins on the date of your inception and ends on the date shown above.

Within 90 days after the end of your advance ruling period, you must submit to us information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, you will be classified as a section 509(a)(1) or 509(a)(2) organization so long as you continue to meet the requirements of the applicable support test. If, however, you do not meet the public support requirements during the advance ruling period, you will be classified as a private foundation for future periods. Also, in the event you are classified as a private foundation, you will be treated as a private foundation from the date of your inception for purposes of sections 507(d) and 4940.

Grantors and donors may rely on the determination that you are not a private foundation until 90 days after the end of your advance ruling period. In addition, if you submit the required information

within the 90 days, grantors and donors may continue to rely on the advance determination until the Service makes a final determination of your foundation status. However, if notice that you will no longer be treated as a section 170(b)(1)(A)(vi) organization is published in the Internal Revenue Bulletin, grantors and donors may not rely on this determination after the date of such publication. Also, a grantor or donor may not rely on this determination if he was in part responsible for, or was aware of, the act or failure to act that resulted in your loss of section 170(b)(1)(A)(vi) status, or acquired knowledge that the Internal Revenue Service had given notice that you would be removed from classification as a section 170(b)(1)(A)(vi) organization.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

You are not liable for social security (FICA) taxes unless you file a waiver of exemption certificate as provided in the Federal Insurance Contributions Act. You are not liable for the taxes imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions concerning these taxes, please let us know.

If your sources of support, or your purposes, character, or method of operation is changed, you should let us know so we can consider the effect of the change on your status. Also, you should inform us of all changes in your name or address.

If the yes box at the top of this letter is checked, you are required to file Form 990, Return of Organization Exempt From Income Tax, only if your gross receipts each year are normally more than $5,000. The return is due by the 15th day of the fifth month after the end of your annual accounting period. The law imposes a penalty of $10 a day, up to a maximum of $5,000, for failure to file the return on time.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

cc: William J. Strickland
P. O. Box 1191
Charlottesville, Va. 22902

Sincerely yours,

District Director

Form L-391 (4-73)

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE: January 13, 2020**

| **IDENTIFICATION** | |
|---|---|
| *Organization/Agency Name*: | Services to Abused Families Inc (SAFE) |
| *Street Name:* | 501 East Piedmont Street, Culpeper VA 22701 |
| *Mailing Address:* | P.O. Box 402 Culpeper VA 22701 |
| *Agency Contact:* | Cindy Hedges |
| *Telephone Number:* | 540-825-8891 |
| *E-mail Address – Agency Contact* | director@safejourneys.org |
| *Agency's Web Address:* | www.safejourneys.org |
| *Federal Tax ID#:* | 52-1227834 |
| *Audit:* | ☒Yes ☐No |

| **PURPOSE/NARRATIVE** |
|---|
| *Missions and Goals:*<br><br>SAFE is a private, non-profit organization established in 1980. Our mission is to provide shelter, support and advocacy to survivors of domestic violence and/or sexual assault. Through community education and awareness programs, we strive to eliminate the negative effects and incidents of domestic violence and sexual assault. |
| *Experience and Accomplishments:* |

SAFE strives to assist those in need with new programs, employees and volunteers. SAFE provides 24-hour access to services, a hotline with access to TDD and language lines, emergency shelter, individual and group supportive counseling, community system advocacy and accompaniment (including rape victim companionship), support groups, and community awareness and education. All of our services are available to Madison residents. All services are free and confidential. In 2019, SAFE provided the following who identified as Madison residents:

56 hotline calls
Provided service to 18 people for a total of 209 advocacy hours This may include one on one supportive counseling, court accompaniment, and/or support group.
Provided shelter for 1 person.

SAFE has provided 24 trainings (138 hours) which reached 361 people.

SAFE has co-sponsored many Madison events such as Cocoa with a Cop, Light up the night Vigil, DV Volleyball game and Trauma Informed Community Training (which had over 100 attendees).

SAFE's Youth Program Coordinator also presented about healthy relationships in all 9th grade high school health classes.

SAFE hold cooperative agreements and networks with many community partners. SAFE's collaborative partnerships in Madison County include but not limited to:

Madison County Commonwealth Attorney's Office
Madison County Victim Witness
Madison County Sheriff's Office
Madison County Department of Human Services
Madison County Courts
Madison County Public Schools

*Benefits of Funding:*

SAFE is the only Domestic Violence and Sexual Assault agency serving Madison County. By investing in SAFE, Madison County will ensure that those fleeing or seeking services as a result of Domestic Violence and/or Sexual Assault will have a safe place to turn to. The health of a community can only be measured by the support provided to those most in need.

*Intention of Use:*

Funding from Madison will be used to cover things that our restricted funds from grants do not cover. This may include items such as medications, relocation expenses, gas, food, hygiene products and needed documents such a birth certificates, ID's, etc.

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>☒ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 1,000.00 |

Signature: Cindy Hedges Title Executive Director

Printed Name: Cindy Hedges Date: 12/19/19

# Services to Abused Families, Inc. (SAFE)

## BUDGET OVERVIEW: SAFE FY 21 - FY21 P&L

July 2020 - June 2021

| | TOTAL |
|---|---|
| Income | |
| 4000 Donor Restricted Donations | 20,000.00 |
| 4010 Donations | 109,335.00 |
| 4020 Grant Income | 644,425.00 |
| 4040 General Funds | 14,000.00 |
| 4080 In Kind Contributions | 123,485.00 |
| **Total Income** | **$911,245.00** |
| GROSS PROFIT | **$911,245.00** |
| Expenses | |
| 5051 CrCrd/Vendr/Bank-fees | 150.00 |
| 5090 Professional Fees | 30,690.00 |
| 5120 Insurance | 9,500.00 |
| 5180 Maintenance/Repair | 35,000.00 |
| 5224 Fundraising | 15,000.00 |
| 5226 Memberships | 2,800.00 |
| 5230 Public Awareness, Fairs, Shows, Events | 2,000.00 |
| 5280 Postage | 1,200.00 |
| 5370 Rent | 25,000.00 |
| 5400 Salaries/Payroll Expenses | 508,764.00 |
| 5420 Payroll Tax | 40,813.00 |
| 5430 Payroll Employee Benefits | 7,768.00 |
| 5440 Supplies | 13,400.00 |
| 5456 Software - Client Mngmnt | 1,750.00 |
| 5460 Utilities/Telephone | 15,000.00 |
| 5470 Utilities/Electric/water/sewer/ | 16,000.00 |
| 5480 Utilities/Cable/Internet | 5,000.00 |
| 5490 Utilities/Gas/Propane | 7,500.00 |
| 5495 Security Costs | 500.00 |
| 5500 Travel - Mileage Reimbursement | 20,000.00 |
| 5520 Travel - Food & Lodging costs | 2,500.00 |
| 5550 Staff Training Education Fees | 2,925.00 |
| 5560 Victim/Survivor Assistance | 4,500.00 |
| 5800 In Kind Donations | 123,485.00 |
| 6900 Restricted Fund Expenditures | 20,000.00 |
| **Total Expenses** | **$911,245.00** |
| NET OPERATING INCOME | **$0.00** |
| NET INCOME | **$0.00** |

# Services to Abused Families, Inc. (SAFE)

## BUDGET OVERVIEW: SAFE FY 20 - FY20 P&L

July 2019 - June 2020

| | TOTAL |
|---|---|
| Income | |
| 4000 Donor Restricted Donations | 20,000.00 |
| 4010 Donations | 109,335.00 |
| 4020 Grant Income | 644,425.00 |
| 4040 General Funds | 14,000.00 |
| 4080 In Kind Contributions | 123,485.00 |
| **Total Income** | **$911,245.00** |
| GROSS PROFIT | **$911,245.00** |
| Expenses | |
| 5051 CrCrd/Vendr/Bank-fees | 150.00 |
| 5090 Professional Fees | 30,690.00 |
| 5120 Insurance | 9,500.00 |
| 5180 Maintenance/Repair | 35,000.00 |
| 5224 Fundraising | 15,000.00 |
| 5226 Memberships | 2,800.00 |
| 5230 Public Awareness, Fairs, Shows, Events | 2,000.00 |
| 5280 Postage | 1,200.00 |
| 5370 Rent | 25,000.00 |
| 5400 Salaries/Payroll Expenses | 508,764.00 |
| 5420 Payroll Tax | 40,813.00 |
| 5430 Payroll Employee Benefits | 7,768.00 |
| 5440 Supplies | 13,400.00 |
| 5456 Software - Client Mngmnt | 1,750.00 |
| 5460 Utilities/Telephone | 15,000.00 |
| 5470 Utilities/Electric/water/sewer/ | 16,000.00 |
| 5480 Utilities/Cable/Internet | 5,000.00 |
| 5490 Utilities/Gas/Propane | 7,500.00 |
| 5495 Security Costs | 500.00 |
| 5500 Travel - Mileage Reimbursement | 20,000.00 |
| 5520 Travel - Food & Lodging costs | 2,500.00 |
| 5550 Staff Training Education Fees | 2,925.00 |
| 5560 Victim/Survivor Assistance | 4,500.00 |
| 5800 In Kind Donations | 123,485.00 |
| 6900 Restricted Fund Expenditures | 20,000.00 |
| **Total Expenses** | **$911,245.00** |
| NET OPERATING INCOME | **$0.00** |
| NET INCOME | **$0.00** |

# Services to Abused Families, Inc. (SAFE)

## YTD FY20 BUDGETED REVENUES & EXPENSES

July - December, 2019

| | TOTAL | | | |
|---|---|---|---|---|
| | ACTUAL | BUDGET | OVER BUDGET | % OF BUDGET |
| Income | | | | |
| 4000 Donor Restricted Donations | 557.00 | 10,000.02 | -9,443.02 | 5.57 % |
| 4010 Donations | 53,741.08 | 19,374.96 | 34,366.12 | 277.37 % |
| 4020 Grant Income | 303,897.40 | 322,212.54 | -18,315.14 | 94.32 % |
| 4040 General Funds | 5,087.30 | 5,000.00 | 87.30 | 101.75 % |
| 4080 In Kind Contributions | 5,945.00 | 61,742.52 | -55,797.52 | 9.63 % |
| **Total Income** | **$369,227.78** | **$418,330.04** | **$ -49,102.26** | **88.26 %** |
| GROSS PROFIT | **$369,227.78** | **$418,330.04** | **$ -49,102.26** | **88.26 %** |
| Expenses | | | | |
| 5051 CrCrd/Vendr/Bank-fees | 257.04 | 75.00 | 182.04 | 342.72 % |
| 5090 Professional Fees | 9,996.69 | 12,844.98 | -2,848.29 | 77.83 % |
| 5120 Insurance | 3,870.33 | 4,749.96 | -879.63 | 81.48 % |
| 5150 Interest Expense | 17.06 | | 17.06 | |
| 5180 Maintenance/Repair | 8,940.53 | 17,500.02 | -8,559.49 | 51.09 % |
| 5224 Fundraising | 4,369.54 | 0.00 | 4,369.54 | |
| 5226 Memberships | 400.00 | 1,399.98 | -999.98 | 28.57 % |
| 5230 Public Awareness, Fairs, Shows, Events | 119.16 | 1,000.02 | -880.86 | 11.92 % |
| 5280 Postage | 234.00 | 600.00 | -366.00 | 39.00 % |
| 5310 Printing | 2,623.79 | | 2,623.79 | |
| 5370 Rent | 20,585.00 | 25,000.00 | -4,415.00 | 82.34 % |
| 5400 Salaries/Payroll Expenses | 254,416.60 | 254,382.00 | 34.60 | 100.01 % |
| 5420 Payroll Tax | 19,656.81 | 20,406.48 | -749.67 | 96.33 % |
| 5430 Payroll Employee Benefits | 3,211.54 | 3,883.98 | -672.44 | 82.69 % |
| 5440 Supplies | 1,776.38 | 6,699.96 | -4,923.58 | 26.51 % |
| 5456 Software - Client Mngmnt | 1,188.00 | 874.98 | 313.02 | 135.77 % |
| 5460 Utilities/Telephone | 5,121.73 | 7,500.00 | -2,378.27 | 68.29 % |
| 5470 Utilities/Electric/water/sewer/ | 7,751.05 | 7,999.98 | -248.93 | 96.89 % |
| 5480 Utilities/Cable/Internet | 2,037.34 | 2,500.02 | -462.68 | 81.49 % |
| 5490 Utilities/Gas/Propane | 1,651.63 | 3,750.00 | -2,098.37 | 44.04 % |
| 5495 Security Costs | 380.40 | 250.02 | 130.38 | 152.15 % |
| 5500 | 94.05 | | 94.05 | |
| 5500 Travel - Mileage Reimbursement | 912.60 | 10,000.02 | -9,087.42 | 9.13 % |
| 5511 Travel Grant - Mileage Reimburs | 5,985.76 | | 5,985.76 | |
| 5520 Travel - Food & Lodging costs | 162.21 | 1,249.98 | -1,087.77 | 12.98 % |
| 5550 Staff Training Education Fees | 267.94 | 1,462.50 | -1,194.56 | 18.32 % |
| 5560 Victim/Survivor Assistance | 1,317.26 | 2,250.00 | -932.74 | 58.54 % |
| 5800 In Kind Donations | 5,945.00 | 61,742.52 | -55,797.52 | 9.63 % |
| 5900 Corporate taxes, penalties, etc | 1,280.30 | | 1,280.30 | |
| 6900 Restricted Fund Expenditures | 1,562.38 | 10,000.02 | -8,437.64 | 15.62 % |
| 8055 Depreciation Expense | 9,900.00 | | 9,900.00 | |
| Uncategorized Expense | 0.00 | | 0.00 | |
| **Total Expenses** | **$376,032.12** | **$458,122.42** | **$ -82,090.30** | **82.08 %** |

| | TOTAL | | | |
|---|---|---|---|---|
| | ACTUAL | BUDGET | OVER BUDGET | % OF BUDGET |
| NET OPERATING INCOME | **$ -6,804.34** | **$ -39,792.38** | **$32,988.04** | **17.10 %** |
| NET INCOME | **$ -6,804.34** | **$ -39,792.38** | **$32,988.04** | **17.10 %** |

# Services to Abused Families, Inc. (SAFE)

## BUDGET VS. ACTUALS: SAFE FY 19 - FY19 P&L

July 2018 - June 2019

| | TOTAL | | | |
|---|---|---|---|---|
| | ACTUAL | BUDGET | OVER BUDGET | % OF BUDGET |
| Income | | | | |
| 4000 Donor Restricted Donations | 22,522.00 | | 22,522.00 | |
| 4010 Donations | 112,342.50 | 84,000.00 | 28,342.50 | 133.74 % |
| 4020 Grant Income | 623,685.69 | 623,715.00 | -29.31 | 100.00 % |
| 4040 General Funds | 19,870.63 | 10,357.02 | 9,513.61 | 191.86 % |
| 4070 Misc Income - Non Categorized | | 3,152.00 | -3,152.00 | |
| 4080 In Kind Contributions | 122,498.24 | 100,500.00 | 21,998.24 | 121.89 % |
| **Total Income** | **$900,919.06** | **$821,724.02** | **$79,195.04** | **109.64 %** |
| GROSS PROFIT | **$900,919.06** | **$821,724.02** | **$79,195.04** | **109.64 %** |
| Expenses | | | | |
| 5051 CrCrd/Vendr/Bank-fees | 62.14 | | 62.14 | |
| 5090 Professional Fees | 24,785.09 | 40,050.00 | -15,264.91 | 61.89 % |
| 5120 Insurance | 8,671.13 | 9,500.00 | -828.87 | 91.28 % |
| 5180 Maintenance/Repair | 27,030.39 | 10,000.00 | 17,030.39 | 270.30 % |
| 5224 Fundraising | 19,483.55 | 15,000.00 | 4,483.55 | 129.89 % |
| 5226 Memberships | 2,580.00 | 2,800.00 | -220.00 | 92.14 % |
| 5230 Public Awareness, Fairs, Shows, Events | 1,593.58 | 2,220.00 | -626.42 | 71.78 % |
| 5280 Postage | 584.13 | 1,200.00 | -615.87 | 48.68 % |
| 5310 Printing | 2,581.56 | | 2,581.56 | |
| 5370 Rent | 60,243.00 | 60,000.00 | 243.00 | 100.41 % |
| 5400 Salaries/Payroll Expenses | 468,342.94 | 474,812.00 | -6,469.06 | 98.64 % |
| 5420 Payroll Tax | 37,917.63 | 39,275.00 | -1,357.37 | 96.54 % |
| 5430 Payroll Employee Benefits | 6,581.76 | 7,360.00 | -778.24 | 89.43 % |
| 5440 Supplies | 18,691.46 | 13,400.00 | 5,291.46 | 139.49 % |
| 5456 Software - Client Mngmnt | 1,734.85 | | 1,734.85 | |
| 5460 Utilities/Telephone | 11,475.20 | 8,500.00 | 2,975.20 | 135.00 % |
| 5470 Utilities/Electric/water/sewer/ | 11,890.09 | 8,500.00 | 3,390.09 | 139.88 % |
| 5480 Utilities/Cable/Internet | 2,440.36 | 2,250.00 | 190.36 | 108.46 % |
| 5490 Utilities/Gas/Propane | 1,735.00 | 1,850.00 | -115.00 | 93.78 % |
| 5495 Security Costs | 228.00 | 500.00 | -272.00 | 45.60 % |
| 5500 Travel - Mileage Reimbursement | 1,350.16 | 12,000.00 | -10,649.84 | 11.25 % |
| 5511 Travel Grant - Mileage Reimburs | 11,395.93 | | 11,395.93 | |
| 5520 Travel - Food & Lodging costs | | 2,500.00 | -2,500.00 | |
| 5550 Staff Training Education Fees | 1,466.69 | 2,925.00 | -1,458.31 | 50.14 % |
| 5560 Victim/Survivor Assistance | 2,727.55 | 1,200.00 | 1,527.55 | 227.30 % |
| 5800 In Kind Donations | 122,498.24 | 100,500.00 | 21,998.24 | 121.89 % |
| 5900 Corporate taxes, penalties, etc | 25.00 | 25.00 | 0.00 | 100.00 % |
| 6900 Restricted Fund Expenditures | 21,863.88 | | 21,863.88 | |
| 8055 Depreciation Expense | 19,800.00 | | 19,800.00 | |
| **Total Expenses** | **$889,779.31** | **$816,367.00** | **$73,412.31** | **108.99 %** |
| NET OPERATING INCOME | **$11,139.75** | **$5,357.02** | **$5,782.73** | **207.95 %** |
| Other Expenses | | | | |

| | TOTAL | | | |
|---|---|---|---|---|
| | ACTUAL | BUDGET | OVER BUDGET | % OF BUDGET |
| 9999 Fixed Asset Gift | -206,500.00 | | -206,500.00 | |
| **Total Other Expenses** | **$ -206,500.00** | **$0.00** | **$ -206,500.00** | **0.00%** |
| NET OTHER INCOME | **$206,500.00** | **$0.00** | **$206,500.00** | **0.00%** |
| NET INCOME | **$217,639.75** | **$5,357.02** | **$212,282.73** | **4,062.70 %** |

## Analysis of Clients

FY19 07/01/18 – 06/30/19 ACTUAL

**Clients served:**

| | | |
|---|---|---|
| Culpeper | 111 adults | 32 youth |
| Madison | 14 adults | 4 youth |
| Fauquier | 15 adults | 5 youth |
| Orange | 71 adults | 10 youth |
| Rappahannock | 9 adults | 0 youth |

**Hotline contacts (called 24-hour hotline)**

| | |
|---|---|
| Culpeper | 297 calls |
| Madison | 56 calls |
| Fauquier | 56 calls |
| Orange | 150 calls |
| Rappahannock | 16 calls |

**Clients in Emergency Shelter**

| | | |
|---|---|---|
| Culpeper | 16 adults | 26 youth |
| Madison | 1 adult | 0 youth |
| Rappahannock | 0 adults | 0 youth |
| Orange | 7 adults | 8 youth |
| Fauquier | 6 adults | 4 youth |
| Other | 8 adults | 6 youth |

**Madison Engagements**

Total number of educational programs 9
Number of total educational program participants 483
Total number of hours 48

## Analysis of Clients

FY20 07/01/19 – 06/30/20 Budgeted

**Clients Budgeted:**

| | | |
|---|---|---|
| Culpeper | 130 adults | 45 youth |
| Madison | 20 adults | 10 youth |
| Fauquier | 20 adults | 10 youth |
| Orange | 80 adults | 15 youth |
| Rappahannock | 10 adults | 2 youth |

**Hotline contacts (called 24-hour hotline)**

| | |
|---|---|
| Culpeper | 325 calls |
| Madison | 75 calls |
| Fauquier | 75 calls |
| Orange | 175 calls |
| Rappahannock | 25 calls |

**Clients in Emergency Shelter**

| | | |
|---|---|---|
| Culpeper | 25 adults | 35 youth |
| Madison | 5 adult | 3 youth |
| Rappahannock | 2 adults | 2 youth |
| Orange | 10 adults | 8 youth |
| Fauquier | 10 adults | 8 youth |
| Other | 5 adults | 8 youth |

**Madison Engagements**

Total number of educational programs 15
Number of total educational program participants 500
Total number of hours 55

## Analysis of Clients

FY21 07/01/20 – 06/30/21 Projected

**Clients Budgeted:**

| | | |
|---|---|---|
| Culpeper | 145 adults | 50 youth |
| Madison | 25 adults | 12 youth |
| Fauquier | 25 adults | 12 youth |
| Orange | 85 adults | 20 youth |
| Rappahannock | 12 adults | 4 youth |

**Hotline contacts (called 24-hour hotline)**

| | |
|---|---|
| Culpeper | 350 calls |
| Madison | 100 calls |
| Fauquier | 100 calls |
| Orange | 200 calls |
| Rappahannock | 30 calls |

**Clients in Emergency Shelter**

| | | |
|---|---|---|
| Culpeper | 30 adults | 40 youth |
| Madison | 6 adult | 4 youth |
| Rappahannock | 3 adults | 4 youth |
| Orange | 17 adults | 10 youth |
| Fauquier | 15 adults | 10 youth |
| Other | 7 adults | 10 youth |

**Madison Engagements**

Total number of educational programs 20
Number of total educational program participants 525
Total number of hours 75

Nicholas, Jones & Company

05/16/2019

Services to Abused Families, Inc.
PO Box 402
Culpeper, VA 22701

| | |
|---|---|
| Preparation of 2017 federal return of organization exempt, from income tax and related expenses for fiscal year ended June 30, 2018, includes Review Services. | $5,000.00 |
| | $5,000.00 |

**Please note - We are accepting credit card payments for your convenience!**

**Nicholas, Jones & Co., PLC**
Certified Public Accountants
301 South West Street · P.O. Box 1029
Culpeper, VA 22701
(540) 825-8005 · FAX (540) 825-4651
www.njcplc.com

Nicholas, Jones & Company

May 15, 2019

Services to Abused Families, Inc.
501 E. Piedmont Street
Culpeper, VA 22701

FEDERAL ID: 52-1227834

Dear Client:

Your Federal Return of Organization Exempt from Income Tax was acknowledged as accepted by the Internal Revenue Service on May 14, 2019. No tax is payable with the filing of this return. If you have questions about the return, please call ~~the IRS Tax Help number, 1-800-829-4933~~ MARK.

Please be sure to call if you have any questions.

Sincerely,

David M. Jones

**Nicholas, Jones & Co., PLC**
Certified Public Accountants
301 South West Street · P.O. Box 1029
Culpeper, VA 22701
(540) 825-8005 · FAX (540) 825-4651
www.njcplc.com

Form **990**

Department of the Treasury
Internal Revenue Service

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
► Do not enter social security numbers on this form as it may be made public.
► Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

**A** For the 2017 calendar year, or tax year beginning 7/01 , 2017, and ending 6/30 , 2018

**B** Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

**C**
SERVICES TO ABUSED FAMILIES, INC.
501 E. PIEDMONT STREET
CULPEPER, VA 22701

**D** Employer identification number: 52-1227834

**E** Telephone number: (540) 825-8876

**G** Gross receipts $ 757,932.

**F** Name and address of principal officer: JAMIE CLANCEY
SAME AS C ABOVE

**H(a)** Is this a group return for subordinates? ☐ Yes ☒ No

**H(b)** Are all subordinates included? ☐ Yes ☐ No
If 'No,' attach a list. (see instructions)

**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( )◄ (insert no.) ☐ 4947(a)(1) or ☐ 527

**J** Website: ► WWW.SAFEJOURNEYS.ORG

**H(c)** Group exemption number ►

**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ► **L** Year of formation: 1986 **M** State of legal domicile: VA

## Part I Summary

**Activities & Governance**

1 Briefly describe the organization's mission or most significant activities: THE ORGANIZATION PROVIDES SUPPORT SERVICES TO TREAT AND PREVENT DOMESTIC VIOLENCE.

2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

| | | | |
|---|---|---|---|
| 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 10 |
| 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 10 |
| 5 | Total number of individuals employed in calendar year 2017 (Part V, line 2a) | 5 | 0 |
| 6 | Total number of volunteers (estimate if necessary) | 6 | 70 |
| 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0. |
| b | Net unrelated business taxable income from Form 990-T, line 34 | 7b | 0. |

**Revenue**

| | | Prior Year | Current Year |
|---|---|---|---|
| 8 | Contributions and grants (Part VIII, line 1h) | | 749,282. |
| 9 | Program service revenue (Part VIII, line 2g) | | |
| 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | |
| 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | -15,295. |
| 12 | Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 733,987. |

**Expenses**

| | | | |
|---|---|---|---|
| 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | |
| 14 | Benefits paid to or for members (Part IX, column (A), line 4) | | |
| 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 520,868. |
| 16a | Professional fundraising fees (Part IX, column (A), line 11e) | | |
| b | Total fundraising expenses (Part IX, column (D), line 25) ► 8,135. | | |
| 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 221,213. |
| 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | | 742,081. |
| 19 | Revenue less expenses. Subtract line 18 from line 12 | | -8,094. |

**Net Assets or Fund Balances**

| | | Beginning of Current Year | End of Year |
|---|---|---|---|
| 20 | Total assets (Part X, line 16) | 439,690. | 379,783. |
| 21 | Total liabilities (Part X, line 26) | 92,448. | 40,635. |
| 22 | Net assets or fund balances. Subtract line 21 from line 20 | 347,242. | 339,148. |

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

▶ Signature of officer — Date

▶ CINDY HEDGES — Type or print name and title

CLIENT COPY

EXECUTIVE DIRECTOR

**Paid Preparer Use Only**

| Print/Type preparer's name | Preparer's signature | Date | Check ☐ if self-employed | PTIN |
|---|---|---|---|---|
| DAVID M. JONES | DAVID M. JONES | | | P00849655 |

Firm's name ► NICHOLAS, JONES & CO., PLC
Firm's address ► 301 S. WEST STREET, CULPEPER, VA 22701
Firm's EIN ► 45-3740381
Phone no. (540) 825-8005

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Client 45624 - Services to Abused Families, I EIN: 52-1227834
US (Ext.): Even Return.....$0
US: Even Return.....$0

Activity

Extension
US - ACCEPTED 11/14 (Current Status)
Previous Activity
- 11/14 Sent to the IRS
- 11/14 Received at Lacerte
- 11/14 Sent to Lacerte
- 11/14 Ready To Send
- 11/14 Passed Validation

US - ACCEPTED 05/14 (Current Status)
Previous Activity
- 05/14 Sent to Lacerte
- 05/14 Ready To Send
- 05/14 Passed Validation
- 05/14 Sent to the IRS
- 05/14 Received at Lacerte

Form **8879-EO**

Department of the Treasury
Internal Revenue Service

# IRS *e-file* Signature Authorization for an Exempt Organization

For calendar year 2017, or fiscal year beginning 7/01, 2017, and ending 6/30, 20 2018

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

► Go to *www.irs.gov/Form8879EO* for the latest information.

OMB No. 1545-1878

**2017**

Name of exempt organization

SERVICES TO ABUSED FAMILIES, INC.

Employer identification number

52-1227834

Name and title of officer

CINDY HEDGES EXECUTIVE DIRECTOR

## Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a,** or **5a,** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b,** or **5b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

| | | | |
|---|---|---|---|
| 1a Form 990 check here ► | [X] | **b Total revenue,** if any (Form 990, Part VIII, column (A), line 12) | 1b 733,987. |
| 2a Form 990-EZ check here ► | [ ] | **b Total revenue,** if any (Form 990-EZ, line 9) | 2b |
| 3a Form 1120-POL check here ► | [ ] | **b Total tax** (Form 1120-POL, line 22) | 3b |
| 4a Form 990-PF check here ► | [ ] | **b Tax based on investment income** (Form 990-PF, Part VI, line 5) | 4b |
| 5a Form 8868 check here ► | [ ] | **b Balance Due** (Form 8868, line 3c) | 5b |

## Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

**Officer's PIN: check one box only**

[X] I authorize NICHOLAS, JONES & CO., PLC (ERO firm name) to enter my PIN 27834 (Enter five numbers, but do not enter all zeros) as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ► Cindy Hedges Date ► 5.14.2019

## Part III Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN 54994365782 (Do not enter all zeros)

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature ► DAVID M. JONES Date ► 5-14-19

**ERO Must Retain This Form – See Instructions**
**Do Not Submit This Form to the IRS Unless Requested To Do So**

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . . X

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses $ 679,020. including grants of $ ) (Revenue $ )

TREAT, INTERVENE, AND PREVENT DOMESTIC VIOLENCE AND PROVIDE TEMPORARY AND TRANSITIONAL HOUSING FOR VICTIMS OF DOMESTIC VIOLENCE.

4b (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

4c (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

4d Other program services (Describe in Schedule O.)

(Expenses $ including grants of $ ) (Revenue $ )

4e Total program service expenses ► 679,020.

## Part IV Checklist of Required Schedules

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If 'Yes,' complete Schedule A* | 1 | X | |
| 2 | Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)? | 2 | X | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If 'Yes,' complete Schedule C, Part I* | 3 | | X |
| 4 | **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If 'Yes,' complete Schedule C, Part II* | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If 'Yes,' complete Schedule C, Part III* | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If 'Yes,' complete Schedule D, Part I* | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If 'Yes,' complete Schedule D, Part II* | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If 'Yes,' complete Schedule D, Part III* | 8 | | X |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If 'Yes,' complete Schedule D, Part IV* | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If 'Yes,' complete Schedule D, Part V* | 10 | | X |
| 11 | If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | | |
| a | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If 'Yes,' complete Schedule D, Part VI* | 11a | X | |
| b | Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VII* | 11b | | X |
| c | Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VIII* | 11c | | X |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part IX* | 11d | | X |
| e | Did the organization report an amount for other liabilities in Part X, line 25? *If 'Yes,' complete Schedule D, Part X* | 11e | | X |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If 'Yes,' complete Schedule D, Part X* | 11f | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? *If 'Yes,' complete Schedule D, Parts XI and XII* | 12a | | X |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? *If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional* | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? *If 'Yes,' complete Schedule E* | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If 'Yes,' complete Schedule F, Parts I and IV* | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If 'Yes,' complete Schedule F, Parts II and IV* | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If 'Yes,' complete Schedule F, Parts III and IV* | 16 | | X |
| 17 | Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If 'Yes,' complete Schedule G, Part I* (see instructions) | 17 | | X |
| 18 | Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If 'Yes,' complete Schedule G, Part II* | 18 | X | |
| 19 | Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If 'Yes,' complete Schedule G, Part III* | 19 | | X |

**Part IV Checklist of Required Schedules** *(continued)*

| | | Yes | No |
|---|---|---|---|
| **20a** Did the organization operate one or more hospital facilities? *If 'Yes,' complete Schedule H* | 20a | | X |
| **b** If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| **21** Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If 'Yes,' complete Schedule I, Parts I and II* | 21 | | X |
| **22** Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If 'Yes,' complete Schedule I, Parts I and III* | 22 | | X |
| **23** Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If 'Yes,' complete Schedule J* | 23 | | X |
| **24a** Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a* | 24a | | X |
| **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| **c** Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| **d** Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | 24d | | |
| **25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If 'Yes,' complete Schedule L, Part I* | 25a | | X |
| **b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If 'Yes,' complete Schedule L, Part I* | 25b | | X |
| **26** Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If 'Yes,' complete Schedule L, Part II* | 26 | | X |
| **27** Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If 'Yes,' complete Schedule L, Part III* | 27 | | X |
| **28** Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| **a** A current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV* | 28a | | X |
| **b** A family member of a current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV* | 28b | | X |
| **c** An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If 'Yes,' complete Schedule L, Part IV* | 28c | | X |
| **29** Did the organization receive more than $25,000 in non-cash contributions? *If 'Yes,' complete Schedule M* | 29 | X | |
| **30** Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If 'Yes,' complete Schedule M* | 30 | | X |
| **31** Did the organization liquidate, terminate, or dissolve and cease operations? *If 'Yes,' complete Schedule N, Part I* | 31 | | X |
| **32** Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If 'Yes,' complete Schedule N, Part II* | 32 | | X |
| **33** Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If 'Yes,' complete Schedule R, Part I* | 33 | | X |
| **34** Was the organization related to any tax-exempt or taxable entity? *If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1* | 34 | | X |
| **35a** Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| **b** If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If 'Yes,' complete Schedule R, Part V, line 2* | 35b | | |
| **36 Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If 'Yes,' complete Schedule R, Part V, line 2* | 36 | | X |
| **37** Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If 'Yes,' complete Schedule R, Part VI* | 37 | | X |
| **38** Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O. | 38 | X | |

## Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V. ☐

| | | | Yes | No |
|---|---|---|---|---|
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. | 1a: 1 | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b: 0 | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | X | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | 2a: 0 | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | | |
| | **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions) | | | |
| 3a | Did the organization have unrelated business gross income of $1,000 or more during the year? | 3a | | X |
| b | If 'Yes,' has it filed a Form 990-T for this year? *If 'No' to line 3b, provide an explanation in Schedule O* | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | X |
| b | If 'Yes,' enter the name of the foreign country: ► | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | X |
| c | If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | X |
| b | If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | |
| 7 | **Organizations that may receive deductible contributions under section 170(c).** | | | |
| a | Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | X |
| b | If 'Yes,' did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | X |
| d | If 'Yes,' indicate the number of Forms 8282 filed during the year | 7d | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | X |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 8 | **Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| 9 | **Sponsoring organizations maintaining donor advised funds.** | | | |
| a | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | **Section 501(c)(7) organizations.** Enter: | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | | |
| 11 | **Section 501(c)(12) organizations.** Enter: | | | |
| a | Gross income from members or shareholders. | 11a | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | 11b | | |
| 12a | **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| b | If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | 12b | | |
| 13 | **Section 501(c)(29) qualified nonprofit health insurance issuers.** | | | |
| a | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| | **Note.** See the instructions for additional information the organization must report on Schedule O. | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. | 13b | | |
| c | Enter the amount of reserves on hand | 13c | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | X |
| b | If 'Yes,' has it filed a Form 720 to report these payments? *If 'No,' provide an explanation in Schedule O* | 14b | | |

**Part VI** **Governance, Management, and Disclosure** *For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI ..... X

## Section A. Governing Body and Management

| | | | Yes | No |
|---|---|---|---|---|
| 1a | Enter the number of voting members of the governing body at the end of the tax year ..... 1a 10 | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent ..... 1b 10 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? ..... | 2 | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? ..... | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? ..... | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? ..... | 5 | | X |
| 6 | Did the organization have members or stockholders? ..... | 6 | | X |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? ..... | 7a | | X |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? ..... | 7b | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| a | The governing body? ..... | 8a | X | |
| b | Each committee with authority to act on behalf of the governing body? ..... | 8b | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If 'Yes,' provide the names and addresses in Schedule O* ..... | 9 | | X |

## Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

| | | | Yes | No |
|---|---|---|---|---|
| 10a | Did the organization have local chapters, branches, or affiliates? ..... | 10a | | X |
| b | If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? ..... | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? ..... | 11a | X | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O | | | |
| 12a | Did the organization have a written conflict of interest policy? *If 'No,' go to line 13* ..... | 12a | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? ..... | 12b | X | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this was done* ..... | 12c | | X |
| 13 | Did the organization have a written whistleblower policy? ..... | 13 | | X |
| 14 | Did the organization have a written document retention and destruction policy? ..... | 14 | | X |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| a | The organization's CEO, Executive Director, or top management official ..... | 15a | | X |
| b | Other officers or key employees of the organization ..... | 15b | | X |
| | If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? ..... | 16a | | X |
| b | If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? ..... | 16b | | |

## Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► NONE

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ►

ORGANIZATION OFFICE P.O. BOX 402 CULPEPER VA 22701 (540) 825-8876

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

Check if Schedule O contains a response or note to any line in this Part VII. ☐

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

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) JAMIE CLANCEY<br>PRESIDENT | 10<br>0 | X | | X | | | | 0. | 0. | 0. |
| (2) CHRIS SETTLE<br>VICE PRESIDENT | 5<br>0 | X | | X | | | | 0. | 0. | 0. |
| (3) CHERYL JACKSON<br>SECRETARY | 5<br>0 | X | | X | | | | 0. | 0. | 0. |
| (4) KIM MORRIS<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (5) AMY CAMPBELL<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (6) FRANK REAVES<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (7) MIMI MILLER<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (8) JAMES FENWICK<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (9) SHARON MURPHY<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (10) KILEY DOLL<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (11) KAREN BROWN<br>EXECUTIVE DIR. | 40<br>0 | | | X | | | | 60,500. | 0. | 0. |
| (12) | | | | | | | | | | |
| (13) | | | | | | | | | | |
| (14) | | | | | | | | | | |

**Part VII** **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

| (A) Name and title | (B) Average hours per week (list any hours for related organiza - tions below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (15) | | | | | | | | | | |
| (16) | | | | | | | | | | |
| (17) | | | | | | | | | | |
| (18) | | | | | | | | | | |
| (19) | | | | | | | | | | |
| (20) | | | | | | | | | | |
| (21) | | | | | | | | | | |
| (22) | | | | | | | | | | |
| (23) | | | | | | | | | | |
| (24) | | | | | | | | | | |
| (25) | | | | | | | | | | |
| 1 b Sub-total ► | | | | | | | | 60,500. | 0. | 0. |
| c Total from continuation sheets to Part VII, Section A ► | | | | | | | | 0. | 0. | 0. |
| d Total (add lines 1b and 1c) ► | | | | | | | | 60,500. | 0. | 0. |

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ► 0

| | | Yes | No |
|---|---|---|---|
| 3 | Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual* | | X |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If 'Yes,' complete Schedule J for such individual* | | X |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If 'Yes,' complete Schedule J for such person* | | X |

## Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ► 0

## Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
|---|---|---|---|---|---|---|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a Federated campaigns | 1a 13,110. | | | | |
| | b Membership dues | 1b | | | | |
| | c Fundraising events | 1c 21,641. | | | | |
| | d Related organizations | 1d | | | | |
| | e Government grants (contributions) | 1e 612,265. | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f 102,266. | | | | |
| | g Noncash contributions included in lines 1a-1f: $ 61,748. | | | | | |
| | h Total. Add lines 1a-1f | | 749,282. | | | |
| Program Service Revenue | | Business Code | | | | |
| | 2a | | | | | |
| | b | | | | | |
| | c | | | | | |
| | d | | | | | |
| | e | | | | | |
| | f All other program service revenue | | | | | |
| | g Total. Add lines 2a-2f | | | | | |
| Other Revenue | 3 Investment income (including dividends, interest and other similar amounts) | | | | | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | |
| | 5 Royalties | | | | | |
| | | (i) Real / (ii) Personal | | | | |
| | 6a Gross rents | | | | | |
| | b Less: rental expenses | | | | | |
| | c Rental income or (loss) | | | | | |
| | d Net rental income or (loss) | | | | | |
| | | (i) Securities / (ii) Other | | | | |
| | 7a Gross amount from sales of assets other than inventory | | | | | |
| | b Less: cost or other basis and sales expenses | | | | | |
| | c Gain or (loss) | | | | | |
| | d Net gain or (loss) | | | | | |
| | 8a Gross income from fundraising events (not including $ 21,641. of contributions reported on line 1c). See Part IV, line 18 | a 8,650. | | | | |
| | b Less: direct expenses | b 23,945. | | | | |
| | c Net income or (loss) from fundraising events | | -15,295. | | | -15,295. |
| | 9a Gross income from gaming activities. See Part IV, line 19 | a | | | | |
| | b Less: direct expenses | b | | | | |
| | c Net income or (loss) from gaming activities | | | | | |
| | 10a Gross sales of inventory, less returns and allowances | a | | | | |
| | b Less: cost of goods sold | b | | | | |
| | c Net income or (loss) from sales of inventory | | | | | |
| | Miscellaneous Revenue | Business Code | | | | |
| | 11a | | | | | |
| | b | | | | | |
| | c | | | | | |
| | d All other revenue | | | | | |
| | e Total. Add lines 11a-11d | | | | | |
| | 12 Total revenue. See instructions | | 733,987. | 0. | 0. | -15,295. |

## Part IX Statement of Functional Expenses

*Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).*

Check if Schedule O contains a response or note to any line in this Part IX. ☐

| *Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.* | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|---|---|---|---|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | | | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 60,500. | 30,250. | 30,250. | 0. |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0. | 0. | 0. | 0. |
| 7 Other salaries and wages | 413,073. | 398,629. | 8,098. | 6,346. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 Other employee benefits | 7,708. | 7,603. | 70. | 35. |
| 10 Payroll taxes | 39,587. | 38,629. | 622. | 336. |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | | | | |
| c Accounting | | | | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) | 13,814. | 5,810. | 7,014. | 990. |
| 12 Advertising and promotion | | | | |
| 13 Office expenses | | | | |
| 14 Information technology | | | | |
| 15 Royalties | | | | |
| 16 Occupancy | 71,420. | 71,295. | 125. | |
| 17 Travel | 15,594. | 15,175. | 419. | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | | | | |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 19,800. | 19,800. | | |
| 23 Insurance | 9,505. | 8,268. | 1,237. | |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a SUPPLIES | 64,137. | 61,954. | 1,755. | 428. |
| b REPAIRS AND MAINTENANCE | 11,895. | 7,591. | 4,304. | |
| c TELEPHONE | 7,797. | 7,440. | 357. | |
| d OTHER OPERATING EXPENSES | 7,251. | 6,576. | 675. | |
| e All other expenses | | | | |
| 25 Total functional expenses. Add lines 1 through 24e | 742,081. | 679,020. | 54,926. | 8,135. |
| 26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720) | | | | |

**Part X Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X ☐

| | | | (A) Beginning of year | | (B) End of year |
|---|---|---|---|---|---|
| Assets | 1 | Cash — non-interest-bearing | 70,330. | 1 | 77,146. |
| | 2 | Savings and temporary cash investments | | 2 | |
| | 3 | Pledges and grants receivable, net | 89,520. | 3 | 45,317. |
| | 4 | Accounts receivable, net | | 4 | |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L | | 6 | |
| | 7 | Notes and loans receivable, net | | 7 | |
| | 8 | Inventories for sale or use | | 8 | |
| | 9 | Prepaid expenses and deferred charges | 3,369. | 9 | 649. |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 763,883. | | | |
| | b | Less: accumulated depreciation — 10b: 507,212. | 276,471. | 10c | 256,671. |
| | 11 | Investments — publicly traded securities | | 11 | |
| | 12 | Investments — other securities. See Part IV, line 11 | | 12 | |
| | 13 | Investments — program-related. See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | 15 | |
| | 16 | **Total assets.** Add lines 1 through 15 (must equal line 34) | 439,690. | 16 | 379,783. |
| Liabilities | 17 | Accounts payable and accrued expenses | 92,448. | 17 | 40,635. |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | | 25 | |
| | 26 | **Total liabilities.** Add lines 17 through 25 | 92,448. | 26 | 40,635. |
| Net Assets or Fund Balances | | **Organizations that follow SFAS 117 (ASC 958), check here ► [X] and complete lines 27 through 29, and lines 33 and 34.** | | | |
| | 27 | Unrestricted net assets | 347,242. | 27 | 339,148. |
| | 28 | Temporarily restricted net assets | | 28 | |
| | 29 | Permanently restricted net assets | | 29 | |
| | | **Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.** | | | |
| | 30 | Capital stock or trust principal, or current funds | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| | 33 | Total net assets or fund balances | 347,242. | 33 | 339,148. |
| | 34 | Total liabilities and net assets/fund balances | 439,690. | 34 | 379,783. |

## Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI ☐

| | | | |
|---|---|---|---|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 733,987. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 742,081. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -8,094. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 347,242. |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 339,148. |

## Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☐

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ | | | |
| | If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | X | |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| b | Were the organization's financial statements audited by an independent accountant? | 2b | | X |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| c | If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | 2c | X | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a | | X |
| b | If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | 3b | | |

**SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

| Name of the organization | Employer identification number |
|---|---|
| SERVICES TO ABUSED FAMILIES, INC. | 52-1227834 |

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____

10 ☐ An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . ☐

g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) Is the organization listed in your governing document? Yes | (iv) No | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|---|---|---|---|---|---|---|
| (A) | | | | | | |
| (B) | | | | | | |
| (C) | | | | | | |
| (D) | | | | | | |
| (E) | | | | | | |
| Total | | | | | | |

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

## Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.') | 387,749. | 387,868. | 452,834. | 721,493. | 749,282. | 2,699,226. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | 0. |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0. |
| 4 **Total.** Add lines 1 through 3 | 387,749. | 387,868. | 452,834. | 721,493. | 749,282. | 2,699,226. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 0. |
| 6 **Public support.** Subtract line 5 from line 4 | | | | | | 2,699,226. |

## Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|---|---|---|---|---|---|---|
| 7 Amounts from line 4 | 387,749. | 387,868. | 452,834. | 721,493. | 749,282. | 2,699,226. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | 0. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | 0. |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI | | | 1,500. | | | 1,500. |
| 11 **Total support.** Add lines 7 through 10 | | | | | | 2,700,726. |

12 Gross receipts from related activities, etc. (see instructions) 12 0.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

## Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 99.94 %

15 Public support percentage from 2016 Schedule A, Part II, line 14 15 99.85 %

16a **33-1/3% support test–2017.** If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☒

b **33-1/3% support test–2016.** If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

17a **10%-facts-and-circumstances test–2017.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ► ☐

b **10%-facts-and-circumstances test–2016.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ► ☐

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

## Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

### Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.') | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 **Total.** Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 **Public support.** (Subtract line 7c from line 6.) | | | | | | |

### Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|---|---|---|---|---|---|---|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 **Total support.** (Add lines 9, 10c, 11, and 12.) | | | | | | |

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

### Section C. Computation of Public Support Percentage

| | | | |
|---|---|---|---|
| 15 | Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 | Public support percentage from 2016 Schedule A, Part III, line 15 | 16 | % |

### Section D. Computation of Investment Income Percentage

| | | | |
|---|---|---|---|
| 17 | Investment income percentage for **2017** (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 | Investment income percentage from **2016** Schedule A, Part III, line 17 | 18 | % |

19a **33-1/3% support tests—2017.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

b **33-1/3% support tests—2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

## Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

| | | Yes | No |
|---|---|---|---|
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? *If 'No,' describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.* | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If 'Yes,' explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).* | 2 | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If 'Yes,' answer (b) and (c) below.* | 3a | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If 'Yes,' describe in* ***Part VI*** *when and how the organization made the determination.* | 3b | | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If 'Yes,' explain in* ***Part VI*** *what controls the organization put in place to ensure such use.* | 3c | | |
| 4a | Was any supported organization not organized in the United States ('foreign supported organization')? *If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.* | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If 'Yes,' describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.* | 4b | | |
| c | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If 'Yes,' explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.* | 4c | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? *If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in* ***Part VI,*** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).* | 5a | | |
| b | **Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | | |
| c | **Substitutions only.** Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If 'Yes,' provide detail in* ***Part VI.*** | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).* | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).* | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If 'Yes,' provide detail in* ***Part VI.*** | 9a | | |
| b | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If 'Yes,' provide detail in* ***Part VI.*** | 9b | | |
| c | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If 'Yes,' provide detail in* ***Part VI.*** | 9c | | |
| 10a | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If 'Yes,' answer 10b below.* | 10a | | |
| b | Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)* | 10b | | |

**Part IV Supporting Organizations** *(continued)*

| | | Yes | No |
|---|---|---|---|
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | |
| a | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? | 11a | |
| b | A family member of a person described in (a) above? | 11b | |
| c | A 35% controlled entity of a person described in (a) or (b) above? *If 'Yes' to a, b, or c, provide detail in* ***Part VI.*** | 11c | |

## Section B. Type I Supporting Organizations

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If 'No,' describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax* year. | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If 'Yes,' explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.* | 2 | | |

## Section C. Type II Supporting Organizations

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If 'No,' describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).* | 1 | | |

## Section D. All Type III Supporting Organizations

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If 'No,' explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).* | 2 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If 'Yes,' describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.* | 3 | | |

## Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* ***(see instructions).***

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a government entity (see instructions).*

| | | | Yes | No |
|---|---|---|---|---|
| 2 | Activities Test. ***Answer (a) and (b) below.*** | | | |
| a | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If 'Yes,' then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.* | 2a | | |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If 'Yes,' explain in****Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.* | 2b | | |
| 3 | Parent of Supported Organizations. ***Answer (a) and (b) below.*** | | | |
| a | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.*** | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If 'Yes,' describe in* ***Part VI*** *the role played by the organization in this regard.* | 3b | | |

## Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

### Section A – Adjusted Net Income

| | | | (A) Prior Year | (B) Current Year (optional) |
|---|---|---|---|---|
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3. | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4). | 8 | | |

### Section B – Minimum Asset Amount

| | | | (A) Prior Year | (B) Current Year (optional) |
|---|---|---|---|---|
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | | |
| a | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| c | Fair market value of other non-exempt-use assets | 1c | | |
| d | **Total** (add lines 1a, 1b, and 1c) | 1d | | |
| e | **Discount** claimed for blockage or other factors (explain in detail in **Part VI**): | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d. | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by .035. | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | **Minimum Asset Amount** (add line 7 to line 6) | 8 | | |

### Section C – Distributable Amount

| | | | | Current Year |
|---|---|---|---|---|
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| 2 | Enter 85% of line 1. | 2 | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | |
| 4 | Enter greater of line 2 or line 3. | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | 6 | | |

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

| Section D – Distributions | Current Year |
|---|---|
| 1 Amounts paid to supported organizations to accomplish exempt purposes | |
| 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | |
| 3 Administrative expenses paid to accomplish exempt purposes of supported organizations | |
| 4 Amounts paid to acquire exempt-use assets | |
| 5 Qualified set-aside amounts (prior IRS approval required) | |
| 6 Other distributions (describe in **Part VI**). See instructions. | |
| 7 **Total annual distributions.** Add lines 1 through 6. | |
| 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions. | |
| 9 Distributable amount for 2017 from Section C, line 6 | |
| 10 Line 8 amount divided by line 9 amount | |

| Section E – Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2017 | (iii) Distributable Amount for 2017 |
|---|---|---|---|
| 1 Distributable amount for 2017 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2017 (reasonable cause required – explain in Part VI). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2017 | | | |
| a | | | |
| b From 2013. . . . . | | | |
| c From 2014. . . . . | | | |
| d From 2015. . . . . | | | |
| e From 2016. . . . . | | | |
| f **Total** of lines 3a through e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2017 distributable amount | | | |
| i Carryover from 2012 not applied (see instructions) | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| 4 Distributions for 2017 from Section D, line 7: $ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2017 distributable amount | | | |
| c Remainder. Subtract lines 4a and 4b from 4. | | | |
| 5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. | | | |
| 6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. | | | |
| 7 **Excess distributions carryover to 2018.** Add lines 3j and 4c. | | | |
| 8 Breakdown of line 7: | | | |
| a Excess from 2013 . . . . . | | | |
| b Excess from 2014 . . . . . | | | |
| c Excess from 2015 . . . . . | | | |
| d Excess from 2016 . . . . . | | | |
| e Excess from 2017 . . . . . | | | |

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

## PART II, LINE 10 - OTHER INCOME

| NATURE AND SOURCE | 2017 | 2016 | 2015 | 2014 | 2013 |
|---|---|---|---|---|---|
| MISCELLANEOUS EXEMPT-PURPOSE INCOME | | | $ 1,500. | | |
| TOTAL | $ 0. | $ 0. | $ 1,500. | $ 0. | $ 0. |

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

Department of the Treasury
Internal Revenue Service

# Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.
► Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

**2017**

**Name of the organization**
SERVICES TO ABUSED FAMILIES, INC.

**Employer identification number**
52-1227834

**Organization type** (check one):

| Filers of: | Section: |
|---|---|
| Form 990 or 990-EZ | [X] 501(c)( 3 ) (enter number) organization |
| | [ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation |
| | [ ] 527 political organization |
| Form 990-PF | [ ] 501(c)(3) exempt private foundation |
| | [ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | [ ] 501(c)(3) taxable private foundation |

Check if your organization is covered by the **General Rule** or a **Special Rule.**

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) $5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year ..... ► $ _____

**Caution.** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization: SERVICES TO ABUSED FAMILIES, INC.

Employer identification number: 52-1227834

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|---|---|---|---|
| 1 | VIRGINIA DEPT. OF SOCIAL SERVICES<br>601 E. MAIN STREET<br>RICHMOND, VA 23219 | $ 141,241. | Person [X]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| 2 | VA DEPT. OF CRIMINAL JUSTICE SERVIC<br>1100 BANK STREET<br>RICHMOND, VA 23219 | $ 463,337. | Person [X]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |

Name of organization: SERVICES TO ABUSED FAMILIES, INC.

Employer identification number: 52-1227834

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---|---|---|---|
| | N/A | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---|---|---|---|
| | | $ | |

Name of organization: SERVICES TO ABUSED FAMILIES, INC.

Employer identification number: 52-1227834

**Part III** ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) ► $ N/A

Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | N/A | | |

| (e) Transfer of gift | |
|---|---|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

| (e) Transfer of gift | |
|---|---|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

| (e) Transfer of gift | |
|---|---|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

| (e) Transfer of gift | |
|---|---|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

**SCHEDULE D (Form 990)**

Department of the Treasury
Internal Revenue Service

# Supplemental Financial Statements

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

Name of the organization

SERVICES TO ABUSED FAMILIES, INC.

Employer identification number

52-1227834

## Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.

| | | (a) Donor advised funds | (b) Funds and other accounts |
|---|---|---|---|
| 1 | Total number at end of year | | |
| 2 | Aggregate value of contributions to (during year) | | |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year | | |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

## Part II Conservation Easements.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of a historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | | Held at the End of the Tax Year |
|---|---|---|
| a Total number of conservation easements | 2a | |
| b Total acreage restricted by conservation easements | 2b | |
| c Number of conservation easements on a certified historic structure included in (a) | 2c | |
| d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register | 2d | |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

## Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ►$

(ii) Assets included in Form 990, Part X ►$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ►$

b Assets included in Form 990, Part X ►$

## Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

## Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII and complete the following table:

| | | Amount |
|---|---|---|
| c Beginning balance | 1c | |
| d Additions during the year | 1d | |
| e Distributions during the year | 1e | |
| f Ending balance | 1f | |

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

## Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|---|---|---|---|---|
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ► _____ %
b Permanent endowment ► _____ %
c Temporarily restricted endowment ► _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

| | | Yes | No |
|---|---|---|---|
| (i) unrelated organizations | 3a(i) | | |
| (ii) related organizations | 3a(ii) | | |
| b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | | |

4 Describe in Part XIII the intended uses of the organization's endowment funds.

## Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|---|---|---|---|
| 1a Land | | 62,072. | | 62,072. |
| b Buildings | | 455,035. | 298,307. | 156,728. |
| c Leasehold improvements | | 7,100. | 7,100. | 0. |
| d Equipment | | | | |
| e Other | | 239,676. | 201,805. | 37,871. |
| **Total.** Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ► | | | | 256,671. |

**Part VII Investments – Other Securities.** N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|---|---|
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other | | |
| (A) | | |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| (I) | | |
| Total. *(Column (b) must equal Form 990, Part X, column (B) line 12.)* ► | | |

**Part VIII Investments – Program Related.** N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|---|---|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| (10) | | |
| Total. *(Column (b) must equal Form 990, Part X, column (B) line 13.)* ► | | |

**Part IX Other Assets.** N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|---|
| (1) | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| (10) | |
| Total. *(Column (b) must equal Form 990, Part X, column (B) line 15.)* ► | |

**Part X Other Liabilities.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

| (a) Description of liability | (b) Book value |
|---|---|
| (1) Federal income taxes | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| (10) | |
| (11) | |
| Total. *(Column (b) must equal Form 990, Part X, column (B) line 25.)* ► | |

**2.** Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.** N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

| | | | | |
|---|---|---|---|---|
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| a | Net unrealized gains (losses) on investments | 2a | | |
| b | Donated services and use of facilities | 2b | | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines 2a through 2d | | 2e | |
| 3 | Subtract line 2e from line 1 | | 3 | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | | 4c | |
| 5 | Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)* | | 5 | |

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.** N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

| | | | | |
|---|---|---|---|---|
| 1 | Total expenses and losses per audited financial statements | | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a | Donated services and use of facilities | 2a | | |
| b | Prior year adjustments | 2b | | |
| c | Other losses | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines 2a through 2d | | 2e | |
| 3 | Subtract line 2e from line 1 | | 3 | |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | | 4c | |
| 5 | Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)* | | 5 | |

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

# Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Go to *www.irs.gov/Form990* for the latest instructions.

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

Name of the organization
SERVICES TO ABUSED FAMILIES, INC.

Employer identification number
52-1227834

**Part I** **Fundraising Activities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☒ Solicitation of government grants
g ☒ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☒ No

b If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

| | (i) Name and address of individual or entity (fundraiser) | (ii) Activity | (iii) Did fundraiser have custody or control of contributions? Yes | (iii) No | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in column (i) | (vi) Amount paid to (or retained by) organization |
|---|---|---|---|---|---|---|---|
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |
| 10 | | | | | | | |
| Total ► | | | | | | | 0. |

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

VA

**Part II Fundraising Events.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

| | | (a) Event #1 GOLF TOURNAMEN (event type) | (b) Event #2 (event type) | (c) Other events NONE (total number) | (d) Total events (add column (a) through column (c)) |
|---|---|---|---|---|---|
| REVENUE | 1 Gross receipts | 30,291. | | | 30,291. |
| | 2 Less: Contributions | 21,641. | | | 21,641. |
| | 3 Gross income (line 1 minus line 2) | 8,650. | | | 8,650. |
| DIRECT EXPENSES | 4 Cash prizes | | | | |
| | 5 Noncash prizes | 7,628. | | | 7,628. |
| | 6 Rent/facility costs | | | | |
| | 7 Food and beverages | | | | |
| | 8 Entertainment | | | | |
| | 9 Other direct expenses | 16,317. | | | 16,317. |
| | 10 Direct expense summary. Add lines 4 through 9 in column (d) ► | | | | 23,945. |
| | 11 Net income summary. Subtract line 10 from line 3, column (d) ► | | | | -15,295. |

**Part III Gaming.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

| | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add column (a) through column (c)) |
|---|---|---|---|---|---|
| REVENUE | 1 Gross revenue | | | | |
| DIRECT EXPENSES | 2 Cash prizes | | | | |
| | 3 Noncash prizes | | | | |
| | 4 Rent/facility costs | | | | |
| | 5 Other direct expenses | | | | |
| | 6 Volunteer labor | ☐ Yes ☐ No % | ☐ Yes ☐ No % | ☐ Yes ☐ No % | |
| | 7 Direct expense summary. Add lines 2 through 5 in column (d) ► | | | | |
| | 8 Net gaming income summary. Subtract line 7 from line 1, column (d) ► | | | | |

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If 'No,' explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If 'Yes,' explain:

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

| | | |
|---|---|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If 'Yes,' enter the amount of gaming revenue received by the organization ► $ _____ and the amount of gaming revenue retained by the third party ► $ _____

c If 'Yes,' enter name and address of the third party:

Name ►

Address ►

16 Gaming manager information:

Name ►

Gaming manager compensation ► $ _____.

Description of services provided ►

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► $

**Part IV** **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE M (Form 990)**

Department of the Treasury
Internal Revenue Service

# Noncash Contributions

- Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.
- Attach to Form 990.
- Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

Name of the organization

SERVICES TO ABUSED FAMILIES, INC.

Employer identification number

52-1227834

## Part I Types of Property

| | | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|---|---|---|---|---|---|
| 1 | Art – Works of art | | | | |
| 2 | Art – Historical treasures | | | | |
| 3 | Art – Fractional interests | | | | |
| 4 | Books and publications | | | | |
| 5 | Clothing and household goods | | | | |
| 6 | Cars and other vehicles | | | | |
| 7 | Boats and planes | | | | |
| 8 | Intellectual property | | | | |
| 9 | Securities – Publicly traded | | | | |
| 10 | Securities – Closely held stock | | | | |
| 11 | Securities – Partnership, LLC, or trust interests | | | | |
| 12 | Securities – Miscellaneous | | | | |
| 13 | Qualified conservation contribution – Historic structures | | | | |
| 14 | Qualified conservation contribution – Other | | | | |
| 15 | Real estate – Residential | | | | |
| 16 | Real estate – Commercial | | | | |
| 17 | Real estate – Other | | | | |
| 18 | Collectibles | | | | |
| 19 | Food inventory | | | | |
| 20 | Drugs and medical supplies | | | | |
| 21 | Taxidermy | | | | |
| 22 | Historical artifacts | | | | |
| 23 | Scientific specimens | | | | |
| 24 | Archeological artifacts | | | | |
| 25 | Other ► (SUPPLIES) | X | | 54,120. | FMV |
| 26 | Other ► (PRIZES) | X | | 7,628. | FMV |
| 27 | Other ► ( ) | | | | |
| 28 | Other ► ( ) | | | | |

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . 29

| | | | Yes | No |
|---|---|---|---|---|
| 30a | During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? | 30a | | X |
| b | If 'Yes,' describe the arrangement in Part II. | | | |
| 31 | Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? | 31 | | X |
| 32a | Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | 32a | | X |
| b | If 'Yes,' describe in Part II. | | | |
| 33 | If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. | | | |

**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

| SCHEDULE O (Form 990 or 990-EZ) | Supplemental Information to Form 990 or 990-EZ | OMB No. 1545-0047 |
|---|---|---|
| Department of the Treasury Internal Revenue Service | Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to *www.irs.gov/Form990* for the latest information. | 2017 Open to Public Inspection |

| Name of the organization | Employer identification number |
|---|---|
| SERVICES TO ABUSED FAMILIES, INC. | 52-1227834 |

**FORM 990, PART III, LINE 1 - ORGANIZATION MISSION**

TO PROVIDE SHELTER, SUPPORT, AND ADVOCACY TO VICTIMS OF DOMESTIC VIOLENCE AND SEXUAL ASSAULT IN THE VIRGINIA COUNTIES OF CULPEPER, ORANGE, MADISON, FAUQUIER, AND RAPPAHANNOCK. IN ADDITION TO ASSISTING VICTIMS, THE ORGANIZATION'S GOAL IS TO REDUCE THE INCIDENCES OF DOMESTIC VIOLENCE. THE ORGANIZATION'S SERVICES INCLUDE THE OPERATION OF A 24-HOUR HOTLINE, A TEMPORARY SHELTER, LEGAL ADVOCACY, SUPPORTIVE COUNSELING, AND YOUTH AND EDUCATIONAL PROGRAMS.

**FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS**

THE FORM 990 IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS PRIOR TO SUBMISSION.

**FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE**

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC ON REQUEST.

Internal Revenue Service

District Director — Delaware-Maryland District

Department of the Treasury

31 Hopkins Plaza, Baltimore, MD 21201

P.O. Box 13163, Room 817
Baltimore, MD 21203

Employer Identification Number:
52-1227834

Person to Contact:
EP/EO Tax Examiner

Telephone Number:
(410) 962-6058

NOVEMBER 4, 1997

SERVICES TO ABUSED FAMILIES, INC.
PO BOX 402
CULPEPPER, VA 22701

Dear Sir/Madam:

This is in response to your inquiry rec'd OCTOBER 30, 1997, requesting a copy of the letter which granted tax exempt status to the above named organization.

Our records show that the organization was granted exemption from Federal Income Tax under section 501(c)(3) of the Internal Revenue Code effective OCTOBER, 1981.

We have also determined that the organization is not a private foundation because it is described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you under section 170 of the Code.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of $100 or more you pay to each of your employees during the calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

You are required to file Form 990, Return of Organization Exempt from Income Tax, only if your gross receipts each year are normally more than $25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally $25,000 or less, and sign the return.

A copy of our letter certifying the status of the organization is not available, however, this letter may be used to verify your tax-exempt status.

Because this letter could help resolve any questions about your exempt status, it should be kept in your permanent records.

Sincerely yours,

Paul M. Harrington
District Director

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE:** **January 13, 2020**

| **IDENTIFICATION** | |
|---|---|
| *Organization/Agency Name*: | Foothills Child Advocacy Center |
| *Street Name:* | 1106 East High Street<br>Charlottesville, VA 22902 |
| *Mailing Address:* | 1106 East High Street<br>Charlottesville, VA 22902 |
| *Agency Contact:* | Cathee Johnson Phillips |
| *Telephone Number:* | 434-971-7233, ext. 4 |
| *E-mail Address – Agency Contact* | cjphillips@foothillscac.org |
| *Agency's Web Address:* | www.foothillscac.org |
| *Federal Tax ID#:* | 20-5182316 |
| *Audit:* | ☑ Yes ☐ No |

| **PURPOSE/NARRATIVE** |
|---|
| *Missions and Goals:*<br><br>Foothills Child Advocacy Center is a non-profit, accredited agency designed to provide a culturally sensitive, coordinated community response to child victims in a child-friendly setting. Our goals are to minimize trauma, promote healing, and ensure child safety. |
| *Experience and Accomplishments:*<br><br>Since 2006, Foothills has provided a culturally sensitive, coordinated system of effective response and intervention for alleged child victims of sexual or physical abuse, neglect, or violence and their nonoffending caregivers in a safe, child-friendly setting. Since its founding in 2006, the number of new children served annually has increased from 77 in FY 2007 to 360 in FY 2019. |

**Background Information: How We Serve Children and Families in Madison County**

Since FY 2012, Foothills has been providing courtesy services to assist the Madison County Commonwealth's Attorney, Madison County Law Enforcement, and Madison County Child Protective Services (CPS) in child abuse investigations and family support. The children and families are referred to Foothills by Madison County Law Enforcement or CPS. Besides providing courtesy services to these children and families, Foothills staff have assisted the Madison County child abuse Multidisciplinary Team (MDT) in the development of guidelines/protocols and participate regularly in the MDT case review meetings. The protocols are available for download at http://www.foothillscac.org/standards.html (scroll to the bottom of the webpage). From FY 2012 through FY 2016, Foothills served 27 children and their families from Madison County.

Until December 2016, the children and families had no choice but to travel to Foothills' facility in Charlottesville, which presented an obstacle for families due to lack of transportation as well as the amount of time needed to travel back and forth in addition to the time for the forensic interview. Thanks to Victims of Crime Act (VOCA) funding, Foothills was able to launch its Victim Outreach Expansion Program and hire a part-time forensic interviewer to travel to Madison County and other localities surrounding Charlottesville. The Madison Commonwealth's Attorney's Office prepared a child-friendly space for providing forensic interviews and other services. Foothills was able to use approximately $4,000 of grant money for furnishings for the space, including a couch, rugs, an easel, and sound-absorbing acoustic panels, and recording equipment, including a camera and a computer, that was permanently installed in the space.

Since July 2017, when the space was ready to use, Foothills staff have been able to bring services to the children and families of Madison County. During FY17, four children and families were served; during FY18, nine children and families were served. In FY19, 15 children and their families were served. To date in FY20, as of January 13, 2020, four children have been served. It should be noted that in FY19, due to water damage to the Madison County basement, where services to children are provided, 11 of the children and their families traveled to Foothills for services. Since the damage was repaired, most of the children and their families are again being served in Madison County and not having to travel to Charlottesville.

*Benefits of Funding:*

Foothills' data shows that most of the children served in FY 2019 had immediate and continuing needs for physical and psychological safety and security: 59 percent needed well-coordinated competent follow-up and intervention throughout the investigation and prosecution and access to additional resources.

According to national research, children who have adverse childhood experiences, including sexual and physical abuse, are at a significantly greater risk for post-traumatic stress, suicide, substance abuse, pregnancy at a young age, and other negative consequences, and they are more likely to become involved in crime, to perform poorly academically, and to have serious health problems as adults (https://www.cdc.gov/violenceprevention/acestudy/index.html). The earlier that the abuse is stopped and that child victims receive services, the more likely they are to avoid such consequences. Child abuse not only has costly consequences for its victims but also for society, not only in terms of quality of life and community safety but also financially.

The child advocacy center (CAC) model, based on trauma-informed care, is considered a best practice for allegations of criminal child maltreatment. The CAC model decreases trauma for child victims and

promotes healing, making it less likely that those children will become involved with the juvenile justice or foster care systems – at great expense to the taxpayers. In communities with a CAC, there are increased joint investigations by police and CPS, increased likelihood of mental health referrals for the child, increased caregiver satisfaction with services, and other positive impacts (Cross et al, 2008). Foothills has been a fully accredited child advocacy center since 2011.

Foothills' services help to reduce trauma for child victims from Madison County, to keep them safe, and to promote their healing. Madison County child victims and families benefit because:
-They can receive help where they live, which reduces or eliminates transportation and work barriers;
-They have greater access to resources, especially in non-caretaker cases; and
-Access to family support reduces the likelihood that a child must enter foster care.

Benefits to the Madison child abuse investigative team include:
-Investigators' time is maximized because investigators have less driving to Charlottesville and back, which also reduces mileage costs;
-Investigators receive more accurate information from the forensic interview that aids the investigators and the Commonwealth Attorney in making decisions on charging and prosecution in a timely manner; and
-Foothills assists in acquiring resources and referrals for children and families, especially in non-caretaker cases.

According to National Children's Advocacy Center researchers in Huntsville, Alabama, studies indicate that communities using the child advocacy center model versus communities using the traditional Child Protective Services-Law Enforcement response to child abuse saves $1,318 per child abuse case. The researchers also found that traditional investigations cost 45% more than investigations using the child advocacy center model.

*Intention of Use:*

Foothills is seeking funding from the five counties served by the Child Abuse Victim Outreach Expansion Program (Buckingham, Fluvanna, Greene, Madison, and Nelson). In FY19, Foothills served a total of 100 new children from these localities. **Fifteen of these children, or 16 percent, were referred by Madison County CPS or Law Enforcement.** (Foothills also served 12 non-offending caregivers of the children, for a total of 27 residents of Madison County served.) Foothills is projecting the expenses for FY21 based on FY19 actual costs.

The total annual cost for serving the five counties in FY19 was $64,418, including $35,916.00 for forensic interviewer services, $22,057.00 for ongoing family support services, $3,121.00 for staff mileage, and $3,324.00 for administrative costs. The total annual cost for bringing services to Madison children and families is 16 percent of that, or $10,306.88.

A renewable VOCA grant administered by the Virginia Department of Social Services, will cover part of the cost ($3,803.84) of the forensic interviewing services and the full cost ($3,529.28) of the family support services for FY21 for Madison families. That leaves a balance of $2,972.88 that will be needed to provide these services in FY21.

Foothills respectfully requests $2,600.00 towards providing services to child victims and their families from Madison County in FY 2020. Foothills will raise the remaining balance through private contributions.

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>☑ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 2600.00 |

Signature:  Title: _____Executive Director_____

Printed Name: Cathee Johnson Phillips Date: 01/13/2020

## Communication with Those Charged with Governance

**To the Board Members**
**Foothills Child Advocacy Center**
**Charlottesville, Virginia**

We have audited the financial statements of Foothills Child Advocacy Center for the year ended June 30, 2018 and have issued our report thereon dated May 28, 2019. Professional standards require that we provide you with information about our responsibilities under generally accepted auditing standards, as well as certain information related to the planned scope and timing of our audit. We have communicated such information in our letter to you dated February 4, 2019. Professional standards also require that we communicate to you the following information related to our audit.

Significant Audit Findings

*Qualitative Aspects of Accounting Practices*

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by Foothills Child Advocacy Center are described in Note 1 to the financial statements. No new accounting policies were adopted and the application of existing policies was not changed during 2018. We noted no transactions entered into by the Organization during the year for which there is a lack of authoritative guidance or consensus. All significant transactions have been recognized in the financial statements in the proper period.

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ significantly from those expected. The most sensitive estimate(s) affecting the financial statements was (were):

> Management's estimate of the depreciable lives of the property and equipment is based on industry standards and historical information. We evaluated the key factors and assumptions used to develop the estimate in determining that it is reasonable in relation to the financial statements taken as a whole.

The financial statement disclosures are neutral, consistent, and clear.

*Difficulties Encountered in Performing the Audit*

We encountered no significant difficulties in dealing with management in performing and completing our audit.

*Corrected and Uncorrected Misstatements*

Professional standards require us to accumulate all misstatements identified during the audit, other than those that are clearly trivial, and communicate them to the appropriate level of management. Our procedures disclosed no misstatements that required correction by management.

*Disagreements with Management*

For purposes of this letter, a disagreement with management is a financial accounting, reporting, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the financial statements or the auditor's report. We are pleased to report that no such disagreements arose during the course of our audit.

*Management Representations*

We have requested certain representations from management that are included in the management representation letter dated May 28, 2019.

*Management Consultations with Other Independent Accountants*

In some cases, management may decide to consult with other accountants about auditing and accounting matters, similar to obtaining a "second opinion" on certain situations. If a consultation involves application of an accounting principle to the Organization's financial statements or a determination of the type of auditor's opinion that may be expressed on those statements, our professional standards require the consulting accountant to check with us to determine that the consultant has all the relevant facts. To our knowledge, there were no such consultations with other accountants.

*Other Audit Findings or Issues*

We generally discuss a variety of matters, including the application of accounting principles and auditing standards, with management each year prior to retention as the Organization's auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our retention.

This information is intended solely for the use of the Board of Directors and management of Foothills Child Advocacy Center and is not intended to be, and should not be, used by anyone other than these specified parties.

Robinson, Farmer, Cox Associates

Charlottesville, Virginia
May 28, 2019

**Date:** May 28, 2019

**Memorandum To:** Foothills Child Advocacy Center Board of Directors

**From:** Robinson, Farmer, Cox Associates

**Regarding:** Audit for Year Ended June 30, 2018

In planning and performing our audit of the financial statements of Foothills Child Advocacy Center (the "Organization"), for the year ended June 30, 2018, we considered the Organization's internal control in order to determine our auditing procedures for the purpose of expressing an opinion on the financial statements but not to provide assurance on internal control. This memorandum does not affect our report dated May 28, 2019, on the financial statements of the Organization. We will be pleased to discuss these comments in further detail at your convenience, to perform any additional study of these matters, or to assist you in implementing the recommendations.

During our audit, we noted no matters involving the internal control structure and related operational matters that we believe should be reported to you.

New FASB Accounting Standard

The Financial Accounting Standards Board (FASB) issued a new accounting standard (ASU 2016-14), in August 2016 that is meant to aid non-profits in increasing the transparency of financial statements. This standard will reduce the categories of net assets from three to two. Historically, the three classes were permanently restricted, temporarily restricted and unrestricted. The new standards have streamlined these classes into two, "net assets without donor restrictions" and "net assets with donor restrictions".

The standard will also require enhanced note disclosures regarding Board designated net assets, and greater transparency and utility of liquidity information relating to the Organization's cash and investments. Additionally, a net presentation of investment expenses against investment return will be shown on the face of the financial statements. Finally, the standard will require all non-profit organizations to present a statement of expenses by function and natural classification either on the face of the financial statements or in the accompanying notes.

# FOOTHILLS CHILD ADVOCACY CENTER

# FINANCIAL REPORT

# FOR THE YEAR ENDED JUNE 30, 2018

**FOOTHILLS CHILD ADVOCACY CENTER**

**FINANCIAL REPORT**

**FOR THE YEAR ENDED JUNE 30, 2018**

**Table of Contents**


| | Page |
|---|---|
| Independent Auditors' Report | 1 |
| ***Financial Statements:*** | |
| Statement of Financial Position | 2 |
| Statement of Activities | 3 |
| Statement of Functional Expenses | 4 |
| Statement of Cash Flows | 5 |
| Notes to Financial Statements | 6-8 |

## Independent Auditors' Report

**To the Board of Directors**
**Foothills Child Advocacy Center**
**Charlottesville, Virginia**

We have audited the accompanying financial statements of Foothills Child Advocacy Center (a nonprofit organization), which comprise the statement of financial position as of June 30, 2018, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

### Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Foothills Child Advocacy Center as of June 30, 2018, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Robinson, Farmer, Cox Associates

Charlottesville, Virginia
May 28, 2019

**- Financial Statements -**

**FOOTHILLS CHILD ADVOCACY CENTER**

**Statement of Financial Position**
**At June 30, 2018**

| | | |
|---|---|---|
| **Assets** | | |
| Current assets: | | |
| Cash and cash equivalents | $ | 181,644 |
| Grants receivable | | 66,214 |
| Prepaid expenses | | 3,279 |
| Total current assets | $ | 251,137 |
| Noncurrent assets: | | |
| Furniture and equipment, net of accumulated depreciation | $ | 7,627 |
| Security deposit | | 2,000 |
| Total noncurrent assets | $ | 9,627 |
| Total assets | $ | 260,764 |
| **Liabilities and Net Assets** | | |
| Liabilities: | | |
| Current liabilities: | | |
| Accounts payable | $ | 8,246 |
| Payroll liabilities | | 866 |
| Total liabilities | $ | 9,112 |
| Net assets: | | |
| Unrestricted | $ | 199,689 |
| Temporarily restricted | | 51,963 |
| Total net assets | $ | 251,652 |
| Total liabilities and net assets | $ | 260,764 |

The accompanying notes to financial statements are an integral part of this statement.

**FOOTHILLS CHILD ADVOCACY CENTER**

**Statement of Activities**
**For the Year Ended June 30, 2018**

| | Unrestricted | Temporarily Restricted | Total |
|---|---|---|---|
| **Revenues, gains and other support:** | | | |
| Direct public support | $ 86,244 | $ 10,000 | $ 96,244 |
| Indirect public support | - | 10,000 | 10,000 |
| Fundraising events | 237 | - | 237 |
| Government grants | - | 265,844 | 265,844 |
| Program income | 11 | - | 11 |
| Interest and dividends | 101 | - | 101 |
| Contributed services | - | 15,341 | 15,341 |
| Net assets released from restrictions | 295,456 | (295,456) | - |
| Total revenues, gains and other support | $ 382,049 | $ 5,729 | $ 387,778 |
| **Expenses:** | | | |
| Program services: | | | |
| Child advocacy | $ 323,627 | $ - | $ 323,627 |
| Supporting services: | | | |
| Management and general | 57,758 | - | 57,758 |
| Fundraising | 19,267 | - | 19,267 |
| Total expenses | $ 400,652 | $ - | $ 400,652 |
| Change in net assets | $ (18,603) | $ 5,729 | $ (12,874) |
| Net assets at beginning of year | 218,292 | 46,234 | 264,526 |
| Net assets at end of year | $ 199,689 | $ 51,963 | $ 251,652 |

The accompanying notes to financial statements are an integral part of this statement.

**FOOTHILLS CHILD ADVOCACY CENTER**

**Statement of Functional Expenses**
**For the Year Ended June 30, 2018**

| | Program Services | Supporting Services | | |
|---|---|---|---|---|
| | Child Advocacy | Management and general | Fund-raising | Total |
| Advocacy | $ 99 | $ - | $ - | $ 99 |
| Depreciation | 2,965 | - | - | 2,965 |
| Contractual services | 23,040 | 7,200 | 681 | 30,921 |
| Dues and subscriptions | 3,294 | 352 | - | 3,646 |
| Employee benefits | 37,795 | 6,407 | 2,029 | 46,231 |
| Food for programs | 3,115 | 673 | - | 3,788 |
| Forensic evaluation | 1,408 | - | - | 1,408 |
| Fundraising | 7 | 378 | 5,640 | 6,025 |
| Grants | 569 | 119 | - | 688 |
| Contributed services | 15,477 | - | - | 15,477 |
| Insurance | 2,940 | 1,641 | - | 4,581 |
| Miscellaneous | 286 | 560 | - | 846 |
| Occupancy | 36,175 | 2,074 | - | 38,249 |
| Office expense | 5,505 | 1,458 | 375 | 7,338 |
| Payroll expense | 175,427 | 35,865 | 10,454 | 221,746 |
| Small equipment | 1,369 | 943 | 88 | 2,400 |
| Travel | 12,550 | - | - | 12,550 |
| Professional education | 1,606 | 88 | - | 1,694 |
| Total expenses | $ 323,627 | $ 57,758 | $ 19,267 | $ 400,652 |

The accompanying notes to financial statements are an integral part of this statement.

**FOOTHILLS CHILD ADVOCACY CENTER**

**Statement of Cash Flows**
**For the Year Ended June 30, 2018**

| | | |
|---|---|---|
| Cash flows from operating activities: | | |
| Change in net assets | $ | (12,874) |
| Adjustments to reconcile change in net assets to net cash provided by (used for) operating activities: | | |
| Depreciation | | 2,965 |
| (Increase) decrease in assets: | | |
| Grants receivable | | 16,782 |
| Prepaid expenses | | 515 |
| Increase (decrease) in liabilities: | | |
| Accounts payable | | 5,246 |
| Payroll liabilities | | (4,946) |
| Net cash provided by (used for) operating activities | $ | 7,688 |
| Net increase (decrease) in cash and cash equivalents | $ | 7,688 |
| Cash and cash equivalents at beginning of year | | 173,956 |
| Cash and cash equivalents at end of year | $ | 181,644 |

The accompanying notes to financial statements are an integral part of this statement.

## Note 1 – Nature of Activities and Summary of Significant Accounting Policies:

### Nature of Activities:

Foothills Child Advocacy Center is a nonprofit organization. The Organization's principal activities are to provide a coordinated system of effective response and intervention to children who have been victimized. The Organization's goal is to minimize trauma, promote healing and ensure safety.

### Basis of Accounting:

The financial statements of the Organization have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

### Use of Estimates:

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

### Cash and Cash Equivalents:

For purposes of reporting cash flows, the Organization considers all cash accounts that are not subject to withdrawal restrictions or penalties and all highly liquid debt instruments purchased with an original maturity of three months or less from the date of acquisition to be cash or cash equivalents.

### Income Taxes:

The Organization is a not-for-profit organization that is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code and is classified as an organization other than a private foundation.

### Financial Statement Presentation:

The Organization is required to report information regarding its financial position and activities according to three classes of net assets based on the existence, or absence of donor-imposed restrictions as follows:

*Unrestricted net assets* – Net assets not subject to donor-imposed stipulations. At June 30, 2018, the Organization had unrestricted net assets of $199,689.

*Temporarily restricted net assets* – Net assets subject to donor-imposed stipulations that may or will be met either by actions of the Organization and/or the passage of time. At June 30, 2018, the Organization had temporarily restricted net assets of $51,963.

*Permanently restricted net assets* – Net assets subject to donor-imposed stipulations that they be maintained permanently by the Organization. At June 30, 2018, the Organization had no permanently restricted net assets.

### Contributions:

The Organization records contributions received as unrestricted or temporarily restricted support depending on the existence and/or nature of any donor restrictions. The Organization reports gifts of cash and other assets as temporarily or permanently restricted revenues if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported on the statement of activities as net assets released from restrictions. When donor restrictions are met in the same reporting period, temporarily restricted contributions are reported as unrestricted contributions.

**Note 1 – Nature of Activities and Summary of Significant Accounting Policies: (Continued)**

Furniture and Equipment:

Furniture and equipment are carried at cost or, if donated, at the approximate fair value at the date of donation. Depreciation is computed using the straight-line method over useful lives of five years.

Functional Allocation of Expenses:

The costs of providing the Organization's program and support services have been summarized on a functional basis on the Statements of Activities. Accordingly, certain costs have been allocated among the program and supporting services benefited.

Grants Receivable:

Grants receivable is recorded as the amount the Organization expects to collect on grants awarded at the end of the year.

Prepaid Expenses:

Prepaid expenses consist of amounts paid in advance for items that had not yet occurred as of the end of the fiscal year. The prepaid expenses balance at June 30, 2018 was $3,279.

**Note 2 – Furniture and Equipment:**

Purchased furniture and equipment with a cost of $2,000 or greater is recorded at its original cost. Material gifts of furniture and equipment are recorded at the fair market value at date of gift. Depreciation is taken on a straight-line basis, using a five-year life for computers and software, and a five year life for furniture and office equipment.

| | Furniture & Office Equipment | Computers & Software | Total |
|---|---|---|---|
| Cost | $ 460 | $ 17,321 | $ 17,781 |
| Accumulated Depreciation | 460 | 9,694 | 10,154 |
| Net Furniture and Equipment | $ - | $ 7,627 | $ 7,627 |

Depreciation expense for the year ended June 30, 2018 totaled $2,965.

**Note 3 – Temporarily Restricted Net Assets:**

Temporarily restricted net assets consist of unexpended funds for the following:

| | | |
|---|---|---|
| Stewards of Children | $ | 7,040 |
| Medical | | 32,172 |
| Forensic/MDT & Family Support | | 7,251 |
| NCA | | 5,500 |
| Total | $ | 51,963 |

**Note 4 – Contributed Services:**

Interns donate their services to activities funded by the Victims of Crime Act (VOCA) Program. During the year ended June 30, 2018, volunteers donated 602 hours to these activities. This donation is valued at $15,341 on the accompanying Statement of Activities.

**Note 5 – Operating Leases:**

Administrative and program activities occur at the East High Street facility. This facility is leased through August 31, 2019 with an annual escalation rate of 3%. Rent expense for the year ended June 30, 2018 was $27,745.

Future minimum rents at June 30, 2018 are as follows:

| | | |
|---|---|---|
| 6/30/2019 | $ | 54,273 |
| 6/30/2020 | | 9,925 |
| Total | $ | 64,198 |

**Note 6 – Date of Management's Review:**

In preparing these financial statements, Management has evaluated events and transactions for potential recognition or disclosure through May 28, 2019, the date the financial statements were available to be issued.

IRS Department of the Treasury
Internal Revenue Service
P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248206070
Aug. 21, 2013 LTR 4168C 0
20-5182316 000000 00
00021409
BODC: TE

FOOTHILLS CHILD ADVOCACY CENTER
1106 E HIGH ST STE 100
CHARLOTTESVLE VA 22902

022988

Employer Identification Number: 20-5182316
Person to Contact: Mrs. Turner
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Aug. 12, 2013, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in June 2007.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

0248206070
Aug. 21, 2013 LTR 4168C 0
20-5182316 000000 00
00021410

FOOTHILLS CHILD ADVOCACY CENTER
1106 E HIGH ST STE 100
CHARLOTTESVLE VA 22902

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Richard McKee

Richard McKee, Department Manager
Accounts Management Operations

**Comparative Financial Analysis**

| Revenue | FY 2019 Actual | FY 2020 Actual as of 12/31/2019 | FY 2020 Budget | FY 2021 Proposed |
|---|---|---|---|---|
| Direct Public Support (unrestricted contributions from individuals, companies, and some family foundations) | $ 128,894.35 | $ 66,176.13 | $ 115,500.00 | $ 145,000.00 |
| Fundraising Campaigns/Events | $ 1,900.00 | $ - | $ 5,000.00 | $ 5,000.00 |
| *Government Grants* | | | | |
| Charlottesville | $ 43,405.00 | $ 43,405.00 | $ 43,405.00 | $ 43,405.00 |
| Albemarle | $ 43,486.00 | $ 44,791.00 | $ 44,791.00 | $ 44,791.00 |
| Buckingham | $ 4,000.00 | $ 4,000.00 | $ 4,000.00 | $ 4,000.00 |
| Fluvanna | $ 10,000.00 | $ 10,000.00 | $ 10,000.00 | $ 12,000.00 |
| Madison | $ 2,400.00 | $ 2,400.00 | $ 2,400.00 | $ 2,500.00 |
| Federal National Children's Alliance | $ 425.00 | $ 6,375.00 | $ 6,575.00 | $ 7,000.00 |
| Virginia HHS Grant/VOCA combined | $ 188,417.61 | $ 361,058.59 | $ 361,058.59 | $ 361,058.59 |
| VOCA New Initiative Grant | $ 15,861.05 | $ - | $ - | $ - |
| *Subtotal, Government Grants* | $ 307,994.66 | $ 472,029.59 | $ 472,229.59 | $ 474,754.59 |
| Indirect Public Support (restricted funds from foundations or other funders) | $ 31,700.00 | $ 30,000.00 | $ 20,000.00 | $ 37,500.00 |
| Program, Interest, and Other Income | $ 88.46 | $ 45.32 | $ 150.00 | $ 150.00 |
| **SUBTOTAL REVENUE** | **$ 470,577.47** | **$ 568,251.04** | **$ 612,879.59** | **$ 662,404.59** |
| Program Income Released | $ 19,765.99 | $ - | $ 14,613.37 | $ - |
| Medical Reserves | $ 33,703.30 | $ - | $ 4,000.00 | $ - |
| **TOTAL REVENUE** | **$ 524,046.76** | **$ 568,251.04** | **$ 631,492.96** | **$ 662,404.59** |

Continued on next page…

| Expenditures | FY 2019 Actual | FY 2020 Actual as of 12/31/2019 | FY 2020 Budget | FY 2021 Proposed |
|---|---|---|---|---|
| PAYROLL | | | | |
| General & Administrative | $ 36,439.02 | $ 13,401.60 | $ 29,034.34 | $ 30,000.00 |
| Development | $ 10,562.16 | $ 6,532.44 | $ 14,154.38 | $ 15,000.00 |
| Programs | $ 190,895.96 | $ 99,336.62 | $ 266,471.07 | $ 313,169.47 |
| Benefits, FICA, Unemployment, Workmen's Comp, Direct Deposit Fees | $ 44,675.68 | $ 22,029.35 | $ 67,613.66 | $ 69,395.13 |
| **TOTAL PAYROLL** | **$ 282,572.82** | **$ 141,300.01** | **$ 377,273.45** | **$ 427,564.60** |
| OPERATIONS | | | | |
| Contract Services | $ 10,802.80 | $ 7,577.50 | $ 9,750.00 | $ 9,750.00 |
| Equipment (includes equipment for New Initiative program) | $ 1,976.82 | $ 2,348.23 | $ 6,000.00 | $ 6,000.00 |
| Facilities & Utilities (expanding facility as of Sept. 1, 2018, rent will increase significantly) | $ 80,855.42 | $ 45,689.64 | $ 88,762.32 | $ 89,769.02 |
| New space moving & renovation expenses | $ 33,199.71 | $ - | $ - | $ - |
| Insurance | $ 3,394.65 | $ 1,779.18 | $ 3,917.50 | $ 3,917.50 |
| Licenses, dues, fees | $ 4,240.00 | $ 2,225.00 | $ 4,500.00 | $ 4,500.00 |
| Operations (office supplies, postage, printing, food for programs) | $ 7,494.82 | $ 6,102.47 | $ 8,700.00 | $ 11,700.00 |
| Fundraising | $ 7,078.57 | $ 2,626.82 | $ 11,800.00 | $ 9,300.00 |
| Public Education and Outreach | $ 2,335.39 | $ 320.00 | $ 3,000.00 | $ 2,500.00 |
| Medical Program (launching medical program in February 2018) | $ 60,224.65 | $ - | $ 65,204.00 | $ 67,500.00 |
| Training, Meetings, Travel (includes food for clients and MDT meetings as well as staff training and travel expenditures) | $ 12,471.36 | $ 12,634.25 | $ 21,077.00 | $ 21,077.00 |
| Miscellaneous (honorariums, background checks, social events, contingency, program expense, bus tickets, web maintenance) | $ 4,875.97 | $ 4,196.15 | $ 3,880.00 | $ 3,880.00 |
| **TOTAL OPERATING EXPENSES** | **$ 228,950.16** | **$ 85,499.24** | **$ 226,590.82** | **$ 229,893.52** |
| **TOTAL PAYROLL & OPERATING EXPENSES** | **$ 511,522.98** | **$ 226,799.25** | **$ 603,864.27** | **$ 657,458.12** |

*Please note:*

• Foothills' Fiscal Year runs from July 1 through June 30.

• The FY 2018 audited statements are included in this application. The FY 2019 audited statements will not be available until later this year, but the FY 2019 form 990 is attached as a separate file.

• Foothills' budget increased significantly in FY 2020 and FY 2021 because Foothills has expanded its on-site services to included forensic medical exams and mental health counseling. These services are available to children and families from Madison County.

• Foothills is required by several funders to have a reserve that covers at least three months of

expenses and preferably six months. Foothills currently needs to rebuild its reserve funds after expanding its facility space and renovating the direct services space in FY 2018 and 2019; reserve funds totaling $33,199.71 were used to cover renovation costs not covered by private contributions and volunteer in-kind gifts. Accordingly, Foothills planned to raise additional private contributions in FY 2019 and FY 2020 in order to build back up the reserve; any surplus realized from those years has been/will be allocated to the reserve fund.

**Analysis of Clients**

Please see Table 1 for the analysis of clients. These numbers represent unique children served and are taken from our case tracking software, NCAtrak, a database developed by the National Children's Alliance for child advocacy centers.

Foothills Child Advocacy Center only serves children who are referred to the center by Child Protective Services or Law Enforcement in each locality. Each child is only counted once and is associated with only one locality.

FY 2020 numbers were budgeted based on the number of children served during the first six months of FY 2019 compared with the number served in FY 2018. FY 2020 numbers are projected based on the number served in each locality in FY 2019 and on the number of children served during the first six months of FY 2020.

Please note that the children's non-offending caregivers are also served.

**Table 1.**

| **Number of Children Served in Each Locality** | **FY 2019 Actual** | **FY 2020 Budgeted** | **FY 2021 Projected** |
|---|---|---|---|
| Charlottesville | 112 | 125 | 125 |
| Albemarle | 107 | 110 | 115 |
| Buckingham | 9 | 17 | 15 |
| Fluvanna | 45 | 53 | 50 |
| Greene | 20 | 15 | 20 |
| Madison | 15 | 15 | 15 |
| Nelson | 5 | 10 | 10 |
| Courtesy services provided to children in other localities: Chesterfield, 1; Culpeper, 1; Cumberland, 1; FBI, 1; Hancock, 1; Louisa, 25; Lynchburg, 1: Orange, 14; State Police, 1; and Other, 1. (Please note that two other child advocacy centers are now sharing the provision of services to Louisa and Orange, and the number served by Foothills is expected to decline this year and in FY21). | 47 | 15 | 30 |
| **TOTALS** | 360 | 360 | 380 |

**Way & Company Plc**
**3315 Berkmar Drive, Suite 2C**
**Charlottesville, VA 22901-1491**
**434-220-1093**

November 20, 2019

**CONFIDENTIAL**

Foothills Child Advocacy Center
1106 E. High Street; Suite 100
Charlottesville, VA 22902

Dear Cathee Phillips:

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements.

**Federal Filing Instructions**

Your Form 990 for the year ended 6/30/19 shows no balance due.

Your return is being filed electronically with the IRS and is not required to be mailed. If you mail a paper copy of your return to the IRS it will delay the processing of your return. Your electronically filed return is not complete without your signature. You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-EO, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned as soon as possible to:

Way & Company Plc
3315 Berkmar Drive, Suite 2C
Charlottesville, VA 22901-1491

*Important:* **Your return will not be filed with the IRS until the signed Form 8879-EO has been received by this office.**

Also enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Way & Company Plc

# Forms 990 / 990-EZ Return Summary

For calendar year 2018, or tax year beginning **07/01/18** , and ending **06/30/19**

**20-5182316**

## Foothills Child Advocacy Center

| | | | | |
|---|---|---|---|---|
| **Net Asset / Fund Balance at Beginning of Year** | | | | **251,651** |
| **Revenue** | | | | |
| Contributions | | **468,642** | | |
| Program service revenue | | | | |
| Investment income | | **88** | | |
| Capital gain / loss | | | | |
| Fundraising / Gaming: | | | | |
| Gross revenue | **1,900** | | | |
| Direct expenses | | | | |
| Net income | | **1,900** | | |
| Other income | | **0** | | |
| **Total revenue** | | | **470,630** | |
| **Expenses** | | | | |
| Program services | | **411,343** | | |
| Management and general | | **55,096** | | |
| Fundraising | | **19,951** | | |
| **Total expenses** | | | **486,390** | |
| **Excess / (deficit)** | | | | **-15,760** |
| Changes | | | | |
| **Net Asset / Fund Balance at End of Year** | | | | **235,891** |

### Reconciliation of Revenue

| | |
|---|---|
| Total revenue per financial statements | |
| Less: | |
| Unrealized gains | |
| Donated services | |
| Recoveries | |
| Other | |
| Plus: | |
| Investment expenses | |
| Other | |
| **Total revenue per return** | **470,630** |

### Reconciliation of Expenses

| | |
|---|---|
| Total expenses per financial statements | |
| Less: | |
| Donated services | |
| Prior year adjustments | |
| Losses | |
| Other | |
| Plus: | |
| Investment expenses | |
| Other | |
| **Total expenses per return** | **486,390** |

### Balance Sheet

| | Beginning | Ending | Differences |
|---|---|---|---|
| Assets | **260,763** | **237,625** | |
| Liabilities | **9,112** | **1,734** | |
| Net assets | **251,651** | **235,891** | **-15,760** |

### Miscellaneous Information

| | |
|---|---|
| Amended return | |
| Return / extended due date | **05/15/20** |
| Failure to file penalty | |

Form **8879-EO**

Department of the Treasury
Internal Revenue Service

# IRS *e-file* Signature Authorization for an Exempt Organization

For calendar year 2018, or fiscal year beginning 7/01, 2018, and ending 6/30, 20 19

**u Do not send to the IRS. Keep for your records.**
**u Go to *www.irs.gov/Form8879EO* for the latest information.**

OMB No. 1545-1878

**2018**

Name of exempt organization

**Foothills Child Advocacy Center**

**Employer identification number**

**20-5182316**

Name and title of officer

**Cathee Johnson Phillips**
**Executive Director**

## Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a,** or **5a,** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b,** or **5b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

| | | | |
|---|---|---|---|
| **1a** Form 990 check here ▶ [X] | **b Total revenue,** if any (Form 990, Part VIII, column (A), line 12) | **1b** | **470,630** |
| **2a** Form 990-EZ check here ▶ [ ] | **b Total revenue,** if any (Form 990-EZ, line 9) | **2b** | |
| **3a** Form 1120-POL check here ▶ [ ] | **b Total tax** (Form 1120-POL, line 22) | **3b** | |
| **4a** Form 990-PF check here ▶ [ ] | **b Tax based on investment income** (Form 990-PF, Part VI, line 5) | **4b** | |
| **5a** Form 8868 check here ▶ [ ] | **b Balance Due** (Form 8868, line 3c) | **5b** | |

## Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

**Officer's PIN: check one box only**

[X] I authorize **Way & Company Plc** to enter my PIN **62068** as my signature

**ERO firm name**

**Enter five numbers, but do not enter all zeros**

on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature } Date } **11/20/19**

## Part III Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**54257462068**

**Do not enter all zeros**

I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature } **David W. Way, CPA** Date } **11/20/19**

**ERO Must Retain This Form — See Instructions**
**Do Not Submit This Form to the IRS Unless Requested To Do So**

Form **990**

Department of the Treasury
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

**u Do not enter social security numbers on this form as it may be made public.**

**u Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

**2018**

**Open to Public Inspection**

**A For the 2018 calendar year, or tax year beginning 07/01/18 , and ending 06/30/19**

**B** Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

**C** Name of organization
**Foothills Child Advocacy Center**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
**1106 E. High Street; Suite 100**

City or town, state or province, country, and ZIP or foreign postal code
**Charlottesville VA 22902**

**D Employer identification number**
**20-5182316**

**E** Telephone number
**434-971-7233**

**G** Gross receipts $ **470,630**

**F** Name and address of principal officer:
**Cathee Johnson Phillips**
**150 Hemlock Lane**
**Barboursville VA 22923**

**H(a)** Is this a group return for subordinates? ☐ Yes ☒ No

**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) **t** (insert no.) ☐ 4947(a)(1) or ☐ 527

**J** Website: **u www.foothillscac.org**

**H(c)** Group exemption number **u**

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

**L** Year of formation: **2007**

**M** State of legal domicile: **VA**

## Part I Summary

**1** Briefly describe the organization's mission or most significant activities:
**See Schedule O**

**2** Check this box **u** ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

| | | | |
|---|---|---|---|
| **3** | Number of voting members of the governing body (Part VI, line 1a) | 3 | 12 |
| **4** | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 12 |
| **5** | Total number of individuals employed in calendar year 2018 (Part V, line 2a) | 5 | 8 |
| **6** | Total number of volunteers (estimate if necessary) | 6 | 0 |
| **7a** | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0 |
| **b** | Net unrelated business taxable income from Form 990-T, line 38 | 7b | 0 |

| | | Prior Year | Current Year |
|---|---|---|---|
| **8** | Contributions and grants (Part VIII, line 1h) | 372,099 | 468,642 |
| **9** | Program service revenue (Part VIII, line 2g) | | 0 |
| **10** | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 101 | 88 |
| **11** | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 237 | 1,900 |
| **12** | Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 372,437 | 470,630 |
| **13** | Grants and similar amounts paid (Part IX, column (A), lines 1–3) | 136 | 212 |
| **14** | Benefits paid to or for members (Part IX, column (A), line 4) | | 0 |
| **15** | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 264,198 | 279,061 |
| **16a** | Professional fundraising fees (Part IX, column (A), line 11e) | | 0 |
| **b** | Total fundraising expenses (Part IX, column (D), line 25) **u** 19,951 | | |
| **17** | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 120,977 | 207,117 |
| **18** | Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) | 385,311 | 486,390 |
| **19** | Revenue less expenses. Subtract line 18 from line 12 | -12,874 | -15,760 |

| | | Beginning of Current Year | End of Year |
|---|---|---|---|
| **20** | Total assets (Part X, line 16) | 260,763 | 237,625 |
| **21** | Total liabilities (Part X, line 26) | 9,112 | 1,734 |
| **22** | Net assets or fund balances. Subtract line 21 from line 20 | 251,651 | 235,891 |

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer — Date

**Cathee Johnson Phillips Executive Director**

Type or print name and title

**Paid Preparer Use Only**

| Print/Type preparer's name | Preparer's signature | Date | Check ☐ if self-employed | PTIN |
|---|---|---|---|---|
| David W. Way, CPA | David W. Way, CPA | 11/20/19 | | P00636120 |

Firm's name } **Way & Company Plc** Firm's EIN } **20-1667313**

Firm's address } **3315 Berkmar Drive, Suite 2C Charlottesville, VA 22901-1491** Phone no. **434-220-1093**

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

**Part III** **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III ☒

**1** Briefly describe the organization's mission:

**See Schedule O**

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses $ **334,664** including grants of $ **212** ) (Revenue $ )

**See Schedule O**

**4b** (Code: ) (Expenses $ **67,764** including grants of $ ) (Revenue $ )

**Child Victims Health Care Access Program:**
**The Child Victim's Health Access Program increases access to appropriate health care for child victims of abuse. On April 1, 2018, Foothills' new medical director began duties to provide forensic medical evaluations to child victims on site at Foothills. 117 children were offered medical services, regardless of access to insurance or ability to pay, which is a best practice, according to the National Children's Alliance (2017). Forensic medical evaluations support legal decision-making; screen for injuries/medical conditions and initiate medical treatment; diagnose sexual and physical abuse and neglect; and reassure victims and parents about the child's physical well-being (Walsh et al, 2007).**

**4c** (Code: ) (Expenses $ **8,480** including grants of $ ) (Revenue $ )

**Public Education and Outreach Program:**
**Foothills increases community understanding of the ways to prevent and stop child abuse and neglect by offering the nationally recognized Stewards of Children child sexual abuse prevention training, the locally developed Stand Up for Kids! mandated reporter training, and other training free of charge to parents, grandparents, and other concerned adults and to staff at youth-serving organizations. In FY 2019, 944 adults completed training offered by Foothills.**

**4d** Other program services (Describe in Schedule O.)
(Expenses $ **435** including grants of $ ) (Revenue $ )

**4e** Total program service expenses **u** **411,343**

## Part IV Checklist of Required Schedules

| | | | Yes | No |
|---|---|---|---|---|
| **1** | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A* | **1** | X | |
| **2** | Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)? | **2** | X | |
| **3** | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I* | **3** | | X |
| **4** | **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II* | **4** | | X |
| **5** | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III* | **5** | | X |
| **6** | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I* | **6** | | X |
| **7** | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II* | **7** | | X |
| **8** | Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III* | **8** | | X |
| **9** | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV* | **9** | | X |
| **10** | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V* | **10** | | X |
| **11** | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | | |
| **a** | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI* | **11a** | X | |
| **b** | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII* | **11b** | | X |
| **c** | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII* | **11c** | | X |
| **d** | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX* | **11d** | | X |
| **e** | Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X* | **11e** | X | |
| **f** | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X* | **11f** | | X |
| **12a** | Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII* | **12a** | | X |
| **b** | Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional* | **12b** | | X |
| **13** | Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E* | **13** | | X |
| **14a** | Did the organization maintain an office, employees, or agents outside of the United States? | **14a** | | X |
| **b** | Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV* | **14b** | | X |
| **15** | Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV* | **15** | | X |
| **16** | Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV* | **16** | | X |
| **17** | Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions) | **17** | | X |
| **18** | Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II* | **18** | | X |
| **19** | Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III* | **19** | | X |
| **20a** | Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* | **20a** | | X |
| **b** | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | **20b** | | |
| **21** | Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II* | **21** | | X |

## Part IV Checklist of Required Schedules *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| **22** | Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III* | 22 | | X |
| **23** | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J* | 23 | | X |
| **24a** | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a* | 24a | | X |
| **b** | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| **c** | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| **d** | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| **25a** | **Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I* | 25a | | X |
| **b** | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I* | 25b | | X |
| **26** | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II* | 26 | | X |
| **27** | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III* | 27 | | X |
| **28** | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| **a** | A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV* | 28a | | X |
| **b** | A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV* | 28b | | X |
| **c** | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV* | 28c | | X |
| **29** | Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M* | 29 | | X |
| **30** | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M* | 30 | | X |
| **31** | Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I* | 31 | | X |
| **32** | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II* | 32 | | X |
| **33** | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I* | 33 | | X |
| **34** | Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1* | 34 | | X |
| **35a** | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| **b** | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* | 35b | | |
| **36** | **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2* | 36 | | X |
| **37** | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI* | 37 | | X |
| **38** | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O. | 38 | X | |

## Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

| | | | | Yes | No |
|---|---|---|---|---|---|
| **1a** | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | 0 | | |
| **b** | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | 0 | | |
| **c** | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | | X | |

**Part V Statements Regarding Other IRS Filings and Tax Compliance** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| **2a** | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return **2a** **8** | | | |
| **b** | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | **2b** | X | |
| | **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions) | | | |
| **3a** | Did the organization have unrelated business gross income of $1,000 or more during the year? | **3a** | | X |
| **b** | If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* | **3b** | | |
| **4a** | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | **4a** | | X |
| **b** | If "Yes," enter the name of the foreign country: **u** See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | |
| **5a** | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | **5a** | | X |
| **b** | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | **5b** | | X |
| **c** | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | **5c** | | |
| **6a** | Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | **6a** | | X |
| **b** | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | **6b** | | |
| **7** | **Organizations that may receive deductible contributions under section 170(c).** | | | |
| **a** | Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? | **7a** | | |
| **b** | If "Yes," did the organization notify the donor of the value of the goods or services provided? | **7b** | | |
| **c** | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | **7c** | | |
| **d** | If "Yes," indicate the number of Forms 8282 filed during the year **7d** | | | |
| **e** | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | **7e** | | |
| **f** | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | **7f** | | |
| **g** | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | **7g** | | |
| **h** | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | **7h** | | |
| **8** | **Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | **8** | | |
| **9** | **Sponsoring organizations maintaining donor advised funds.** | | | |
| **a** | Did the sponsoring organization make any taxable distributions under section 4966? | **9a** | | |
| **b** | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | **9b** | | |
| **10** | **Section 501(c)(7) organizations.** Enter: | | | |
| **a** | Initiation fees and capital contributions included on Part VIII, line 12 **10a** | | | |
| **b** | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b** | | | |
| **11** | **Section 501(c)(12) organizations.** Enter: | | | |
| **a** | Gross income from members or shareholders **11a** | | | |
| **b** | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b** | | | |
| **12a** | **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041? | **12a** | | |
| **b** | If "Yes," enter the amount of tax-exempt interest received or accrued during the year **12b** | | | |
| **13** | **Section 501(c)(29) qualified nonprofit health insurance issuers.** | | | |
| **a** | Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O. | **13a** | | |
| **b** | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b** | | | |
| **c** | Enter the amount of reserves on hand **13c** | | | |
| **14a** | Did the organization receive any payments for indoor tanning services during the tax year? | **14a** | | X |
| **b** | If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* | **14b** | | |
| **15** | Is the organization 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? If "Yes," see instructions and file Form 4720, Schedule N. | **15** | | X |
| **16** | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. | **16** | | X |

**Part VI** **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI ..... [X]

## Section A. Governing Body and Management

| | | | | Yes | No |
|---|---|---|---|---|---|
| **1a** | Enter the number of voting members of the governing body at the end of the tax year ..... | **1a** | **12** | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | | |
| **b** | Enter the number of voting members included in line 1a, above, who are independent ..... | **1b** | **12** | | |
| **2** | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? ..... | **2** | | | X |
| **3** | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? ..... | **3** | | | X |
| **4** | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? ..... | **4** | | | X |
| **5** | Did the organization become aware during the year of a significant diversion of the organization's assets? ..... | **5** | | | X |
| **6** | Did the organization have members or stockholders? ..... | **6** | | | X |
| **7a** | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? ..... | **7a** | | | X |
| **b** | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? ..... | **7b** | | | X |
| **8** | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | |
| **a** | The governing body? ..... | **8a** | | X | |
| **b** | Each committee with authority to act on behalf of the governing body? ..... | **8b** | | X | |
| **9** | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* ..... | **9** | | | X |

## Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

| | | | Yes | No |
|---|---|---|---|---|
| **10a** | Did the organization have local chapters, branches, or affiliates? ..... | **10a** | | X |
| **b** | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? ..... | **10b** | | |
| **11a** | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? ..... | **11a** | X | |
| **b** | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| **12a** | Did the organization have a written conflict of interest policy? *If "No," go to line 13* ..... | **12a** | X | |
| **b** | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? ..... | **12b** | X | |
| **c** | Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* ..... | **12c** | X | |
| **13** | Did the organization have a written whistleblower policy? ..... | **13** | X | |
| **14** | Did the organization have a written document retention and destruction policy? ..... | **14** | X | |
| **15** | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| **a** | The organization's CEO, Executive Director, or top management official ..... | **15a** | | X |
| **b** | Other officers or key employees of the organization ..... | **15b** | | X |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | |
| **16a** | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? ..... | **16a** | | X |
| **b** | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? ..... | **16b** | | |

## Section C. Disclosure

**17** List the states with which a copy of this Form 990 is required to be filed **u** **None**

**18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[X] Own website [X] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

**19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records **u**

**Cathee Johnson Phillips 150 Hemlock Lane**

**Barboursville VA 22923 434-971-7233**

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

Check if Schedule O contains a response or note to any line in this Part VII ☐

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) **Lisa S Brook** | 0.00 | | | | | | | | | |
| **Chairperson** | 0.00 | X | | X | | | | 0 | 0 | 0 |
| (2) **William T Click** | 0.00 | | | | | | | | | |
| **Treasurer/Vice Chair** | 0.00 | X | | X | | | | 0 | 0 | 0 |
| (3) **Emily Talley** | 0.00 | | | | | | | | | |
| **Secretary** | 0.00 | X | | X | | | | 0 | 0 | 0 |
| (4) **Carl Brown** | 0.00 | | | | | | | | | |
| **Director** | 0.00 | X | | | | | | 0 | 0 | 0 |
| (5) **Todd Cabell** | 0.00 | | | | | | | | | |
| **Director** | 0.00 | X | | | | | | 0 | 0 | 0 |
| (6) **Lee Catlin** | 0.00 | | | | | | | | | |
| **Director** | 0.00 | X | | | | | | 0 | 0 | 0 |
| (7) **Carlton Gregory** | 0.00 | | | | | | | | | |
| **Director** | 0.00 | X | | | | | | 0 | 0 | 0 |
| (8) **Katherine A. Ralston** | 0.00 | | | | | | | | | |
| **Director** | 0.00 | X | | | | | | 0 | 0 | 0 |
| (9) **Jocelyn Schauer** | 0.00 | | | | | | | | | |
| **Director** | 0.00 | X | | | | | | 0 | 0 | 0 |
| (10) **Karen Stemland** | 0.00 | | | | | | | | | |
| **Director** | 0.00 | X | | | | | | 0 | 0 | 0 |
| (11) **Melvin N Wilson** | 0.00 | | | | | | | | | |
| **Director** | 0.00 | X | | | | | | 0 | 0 | 0 |

**Part VII** **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| **(12) Lee Winlock Wietz** | 0.00 | | | | | | | | | |
| Director | 0.00 | X | | | | | | 0 | 0 | 0 |
| **(13) Cathee Johnson Phillips** | 40.00 | | | | | | | | | |
| Executive Director | 0.00 | | | X | | | | 64,882 | 0 | 6,231 |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| **1b Sub-total** | | | | | | | u | 64,882 | | 6,231 |
| **c Total from continuation sheets to Part VII, Section A** | | | | | | | u | | | |
| **d Total (add lines 1b and 1c)** | | | | | | | u | 64,882 | | 6,231 |

**2** Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization **u** **0**

| | | Yes | No |
|---|---|---|---|
| **3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual* | 3 | | X |
| **4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual* | 4 | | X |
| **5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person* | 5 | | X |

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization **u** 0

**Part VIII** **Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII ☐

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
|---|---|---|---|---|---|---|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a Federated campaigns | 1a | | | | |
| | b Membership dues | 1b | | | | |
| | c Fundraising events | 1c | | | | |
| | d Related organizations | 1d | | | | |
| | e Government grants (contributions) | 1e | 308,048 | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f | 160,594 | | | |
| | g Noncash contributions included in lines 1a-1f: $ | | | | | |
| | h **Total.** Add lines 1a–1f u | | 468,642 | | | |
| Program Service Revenue | | Busn. Code | | | | |
| | 2a | | | | | |
| | b | | | | | |
| | c | | | | | |
| | d | | | | | |
| | e | | | | | |
| | f All other program service revenue | | | | | |
| | g **Total.** Add lines 2a–2f u | | | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) u | | 88 | | | 88 |
| | 4 Income from investment of tax-exempt bond proceeds u | | | | | |
| | 5 Royalties u | | | | | |
| | | (i) Real | (ii) Personal | | | |
| | 6a Gross rents | | | | | |
| | b Less: rental exps. | | | | | |
| | c Rental inc. or (loss) | | | | | |
| | d Net rental income or (loss) u | | | | | |
| | 7a Gross amount from sales of assets other than inventory | (i) Securities | (ii) Other | | | |
| | b Less: cost or other basis & sales exps. | | | | | |
| | c Gain or (loss) | | | | | |
| | d Net gain or (loss) u | | | | | |
| | 8a Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18 a | | 1,900 | | | |
| | b Less: direct expenses b | | | | | |
| | c Net income or (loss) from fundraising events u | | 1,900 | | | |
| | 9a Gross income from gaming activities. See Part IV, line 19 a | | | | | |
| | b Less: direct expenses b | | | | | |
| | c Net income or (loss) from gaming activities u | | | | | |
| | 10a Gross sales of inventory, less returns and allowances a | | | | | |
| | b Less: cost of goods sold b | | | | | |
| | c Net income or (loss) from sales of inventory u | | | | | |
| | Miscellaneous Revenue | Busn. Code | | | | |
| | 11a | | | | | |
| | b | | | | | |
| | c | | | | | |
| | d All other revenue | | | | | |
| | e **Total.** Add lines 11a–11d u | | | | | |
| | 12 **Total revenue.** See instructions. u | | 470,630 | 0 | 0 | 88 |

## Part IX Statement of Functional Expenses

*Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).*

Check if Schedule O contains a response or note to any line in this Part IX ..... X

| *Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.* | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|---|---|---|---|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 212 | 212 | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 64,882 | 36,064 | 19,853 | 8,965 |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | 174,764 | 158,154 | 15,013 | 1,597 |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 5,468 | 4,587 | 612 | 269 |
| 9 Other employee benefits | 16,564 | 13,768 | 2,026 | 770 |
| 10 Payroll taxes | 17,383 | 13,850 | 2,752 | 781 |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | 7,560 | 7,560 | | |
| c Accounting | 1,650 | | 1,650 | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) | 60,469 | 60,297 | 172 | |
| 12 Advertising and promotion | 658 | 100 | 386 | 172 |
| 13 Office expenses | 9,988 | 3,694 | 662 | 5,632 |
| 14 Information technology | 2,131 | 791 | 140 | 1,200 |
| 15 Royalties | | | | |
| 16 Occupancy | 85,413 | 77,787 | 7,552 | 74 |
| 17 Travel | | | | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 12,671 | 12,671 | | |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 3,085 | 3,085 | | |
| 23 Insurance | 6,959 | 5,238 | 1,571 | 150 |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a Dues and subscriptions | 4,493 | 3,485 | 1,008 | |
| b Food for programs | 3,402 | 2,431 | 971 | |
| c Education | 3,206 | 3,206 | | |
| d Software/web licenses | 1,913 | 1,345 | 568 | |
| e All other expenses | 3,519 | 3,018 | 160 | 341 |
| 25 **Total functional expenses.** Add lines 1 through 24e | 486,390 | 411,343 | 55,096 | 19,951 |
| 26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here u ☐ if following SOP 98-2 (ASC 958-720) | | | | |

## Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

| | | | (A) Beginning of year | | (B) End of year |
|---|---|---|---|---|---|
| Assets | 1 | Cash—non-interest bearing | 181,643 | 1 | 177,561 |
| | 2 | Savings and temporary cash investments | | 2 | |
| | 3 | Pledges and grants receivable, net | 66,214 | 3 | 20,398 |
| | 4 | Accounts receivable, net | | 4 | 30 |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L | | 6 | |
| | 7 | Notes and loans receivable, net | | 7 | |
| | 8 | Inventories for sale or use | | 8 | |
| | 9 | Prepaid expenses and deferred charges | 3,279 | 9 | 3,482 |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 46,393 | | | |
| | b | Less: accumulated depreciation — 10b: 13,239 | 7,627 | 10c | 33,154 |
| | 11 | Investments—publicly traded securities | | 11 | |
| | 12 | Investments—other securities. See Part IV, line 11 | | 12 | |
| | 13 | Investments—program-related. See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | 2,000 | 15 | 3,000 |
| | 16 | **Total assets.** Add lines 1 through 15 (must equal line 34) | 260,763 | 16 | 237,625 |
| Liabilities | 17 | Accounts payable and accrued expenses | 8,246 | 17 | 336 |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | 866 | 25 | 1,398 |
| | 26 | **Total liabilities.** Add lines 17 through 25 | 9,112 | 26 | 1,734 |
| Net Assets or Fund Balances | | **Organizations that follow SFAS 117 (ASC 958), check here ▶ ☒ and complete lines 27 through 29, and lines 33 and 34.** | | | |
| | 27 | Unrestricted net assets | 199,688 | 27 | 210,372 |
| | 28 | Temporarily restricted net assets | 51,963 | 28 | 25,519 |
| | 29 | Permanently restricted net assets | | 29 | |
| | | **Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.** | | | |
| | 30 | Capital stock or trust principal, or current funds | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| | 33 | Total net assets or fund balances | 251,651 | 33 | 235,891 |
| | 34 | Total liabilities and net assets/fund balances | 260,763 | 34 | 237,625 |

## Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI ☐

| | | | |
|---|---|---|---|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 470,630 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 486,390 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -15,760 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 251,651 |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 235,891 |

## Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☒

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | 2a | | X |
| b | Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | 2b | | X |
| c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | 2c | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a | | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. | 3b | | |

**SCHEDULE A (Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

# Public Charity Status and Public Support

**Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.**

**u Attach to Form 990 or Form 990-EZ.**

**u Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

**2018**

**Open to Public Inspection**

**Name of the organization**

**Foothills Child Advocacy Center**

**Employer identification number**

**20-5182316**

## Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....

10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations .....

g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1–10 above (see instructions)) | (iv) Is the organization listed in your governing document? Yes | (iv) No | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|---|---|---|---|---|---|---|
| (A) | | | | | | |
| (B) | | | | | | |
| (C) | | | | | | |
| (D) | | | | | | |
| (E) | | | | | | |
| Total | | | | | | |

**Part II** **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

## Section A. Public Support

| Calendar year (or fiscal year beginning in) u | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 323,474 | 359,882 | 367,929 | 372,099 | 468,642 | 1,892,026 |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 **Total.** Add lines 1 through 3 | 323,474 | 359,882 | 367,929 | 372,099 | 468,642 | 1,892,026 |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 19,104 |
| 6 **Public support.** Subtract line 5 from line 4 | | | | | | 1,872,922 |

## Section B. Total Support

| Calendar year (or fiscal year beginning in) u | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 7 Amounts from line 4 | 323,474 | 359,882 | 367,929 | 372,099 | 468,642 | 1,892,026 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | 99 | 92 | 101 | 88 | 380 |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | 1,855 | 3,149 | | | | 5,004 |
| 11 **Total support.** Add lines 7 through 10 | | | | | | 1,897,410 |

12 Gross receipts from related activities, etc. (see instructions) 12 2,137

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

## Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14 98.71 %

15 Public support percentage from 2017 Schedule A, Part II, line 14 15 99.69 %

16a **33 1/3% support test—2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test—2017.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

## Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

### Section A. Public Support

| Calendar year (or fiscal year beginning in) u | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 **Total.** Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 **Public support.** (Subtract line 7c from line 6.) | | | | | | |

### Section B. Total Support

| Calendar year (or fiscal year beginning in) u | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 **Total support.** (Add lines 9, 10c, 11, and 12.) | | | | | | |

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

### Section C. Computation of Public Support Percentage

| | | | |
|---|---|---|---|
| 15 | Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) | 15 | % |
| 16 | Public support percentage from 2017 Schedule A, Part III, line 15 | 16 | % |

### Section D. Computation of Investment Income Percentage

| | | | |
|---|---|---|---|
| 17 | Investment income percentage for **2018** (line 10c, column (f), divided by line 13, column (f)) | 17 | % |
| 18 | Investment income percentage from **2017** Schedule A, Part III, line 17 | 18 | % |

19a **33 1/3% support tests—2018.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

## Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.* | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).* | 2 | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.* | 3a | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in Part VI when and how the organization made the determination.* | 3b | | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in Part VI what controls the organization put in place to ensure such use.* | 3c | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.* | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.* | 4b | | |
| c | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.* | 4c | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).* | 5a | | |
| b | **Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | | |
| c | **Substitutions only.** Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.* | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).* | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).* | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.* | 9a | | |
| b | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.* | 9b | | |
| c | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.* | 9c | | |
| 10a | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.* | 10a | | |
| b | Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)* | 10b | | |

**Part IV Supporting Organizations** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| **11** | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| **a** | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? | **11a** | | |
| **b** | A family member of a person described in (a) above? | **11b** | | |
| **c** | A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.* | **11c** | | |

## Section B. Type I Supporting Organizations

| | | | Yes | No |
|---|---|---|---|---|
| **1** | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.* | **1** | | |
| **2** | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.* | **2** | | |

## Section C. Type II Supporting Organizations

| | | | Yes | No |
|---|---|---|---|---|
| **1** | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).* | **1** | | |

## Section D. All Type III Supporting Organizations

| | | | Yes | No |
|---|---|---|---|---|
| **1** | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | **1** | | |
| **2** | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).* | **2** | | |
| **3** | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.* | **3** | | |

## Section E. Type III Functionally-Integrated Supporting Organizations

**1** *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).*

- **a** ☐ The organization satisfied the Activities Test. *Complete line 2 below.*
- **b** ☐ The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- **c** ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

| | | | Yes | No |
|---|---|---|---|---|
| **2** | Activities Test. *Answer (a) and (b) below.* | | | |
| **a** | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.* | **2a** | | |
| **b** | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.* | **2b** | | |
| **3** | Parent of Supported Organizations. *Answer (a) and (b) below.* | | | |
| **a** | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.* | **3a** | | |
| **b** | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.* | **3b** | | |

## Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

**1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| **Section A - Adjusted Net Income** | | (A) Prior Year | (B) Current Year (optional) |
|---|---|---|---|
| **1** Net short-term capital gain | **1** | | |
| **2** Recoveries of prior-year distributions | **2** | | |
| **3** Other gross income (see instructions) | **3** | | |
| **4** Add lines 1 through 3. | **4** | | |
| **5** Depreciation and depletion | **5** | | |
| **6** Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | **6** | | |
| **7** Other expenses (see instructions) | **7** | | |
| **8** **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4) | **8** | | |

| **Section B - Minimum Asset Amount** | | (A) Prior Year | (B) Current Year (optional) |
|---|---|---|---|
| **1** Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | | |
| **a** Average monthly value of securities | **1a** | | |
| **b** Average monthly cash balances | **1b** | | |
| **c** Fair market value of other non-exempt-use assets | **1c** | | |
| **d** **Total** (add lines 1a, 1b, and 1c) | **1d** | | |
| **e** **Discount** claimed for blockage or other factors (explain in detail in **Part VI**): | | | |
| **2** Acquisition indebtedness applicable to non-exempt-use assets | **2** | | |
| **3** Subtract line 2 from line 1d. | **3** | | |
| **4** Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). | **4** | | |
| **5** Net value of non-exempt-use assets (subtract line 4 from line 3) | **5** | | |
| **6** Multiply line 5 by .035. | **6** | | |
| **7** Recoveries of prior-year distributions | **7** | | |
| **8** **Minimum Asset Amount** (add line 7 to line 6) | **8** | | |

| **Section C - Distributable Amount** | | Current Year |
|---|---|---|
| **1** Adjusted net income for prior year (from Section A, line 8, Column A) | **1** | |
| **2** Enter 85% of line 1. | **2** | |
| **3** Minimum asset amount for prior year (from Section B, line 8, Column A) | **3** | |
| **4** Enter greater of line 2 or line 3. | **4** | |
| **5** Income tax imposed in prior year | **5** | |
| **6** **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | **6** | |

**7** ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

## Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

| Section D - Distributions | | Current Year |
|---|---|---|
| 1 | Amounts paid to supported organizations to accomplish exempt purposes | |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | |
| 4 | Amounts paid to acquire exempt-use assets | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | |
| 6 | Other distributions (describe in **Part VI**). See instructions. | |
| 7 | **Total annual distributions.** Add lines 1 through 6. | |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions. | |
| 9 | Distributable amount for 2018 from Section C, line 6 | |
| 10 | Line 8 amount divided by line 9 amount | |

| Section E - Distribution Allocations (see instructions) | | (i) Excess Distributions | (ii) Underdistributions Pre-2018 | (iii) Distributable Amount for 2018 |
|---|---|---|---|---|
| 1 | Distributable amount for 2018 from Section C, line 6 | | | |
| 2 | Underdistributions, if any, for years prior to 2018 (reasonable cause required-explain in **Part VI**). See instructions. | | | |
| 3 | Excess distributions carryover, if any, to 2018 | | | |
| a | From 2013 | | | |
| b | From 2014 | | | |
| c | From 2015 | | | |
| d | From 2016 | | | |
| e | From 2017 | | | |
| f | **Total** of lines 3a through e | | | |
| g | Applied to underdistributions of prior years | | | |
| h | Applied to 2018 distributable amount | | | |
| i | Carryover from 2013 not applied (see instructions) | | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| 4 | Distributions for 2018 from Section D, line 7: $ | | | |
| a | Applied to underdistributions of prior years | | | |
| b | Applied to 2018 distributable amount | | | |
| c | Remainder. Subtract lines 4a and 4b from 4. | | | |
| 5 | Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in **Part VI**. See instructions. | | | |
| 6 | Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in **Part VI**. See instructions. | | | |
| 7 | **Excess distributions carryover to 2019.** Add lines 3j and 4c. | | | |
| 8 | Breakdown of line 7: | | | |
| a | Excess from 2014 | | | |
| b | Excess from 2015 | | | |
| c | Excess from 2016 | | | |
| d | Excess from 2017 | | | |
| e | Excess from 2018 | | | |

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**Part II, Line 10 - Other Income Detail**

| | |
|---|---|
| **Program revenues** | **$ 5,004** |

**Schedule B**
**(Form 990, 990-EZ, or 990-PF)**
Department of the Treasury
Internal Revenue Service

# Schedule of Contributors

**u Attach to Form 990, Form 990-EZ, or Form 990-PF.**
**u Go to *www.irs.gov/Form990* for the latest information.**

OMB No. 1545-0047

**2018**

Name of the organization

**Foothills Child Advocacy Center**

**Employer identification number**

**20-5182316**

**Organization type** (check one):

| Filers of: | Section: |
|---|---|
| Form 990 or 990-EZ | [X] 501(c)( **3** ) (enter number) organization |
| | [ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation |
| | [ ] 527 political organization |
| Form 990-PF | [ ] 501(c)(3) exempt private foundation |
| | [ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | [ ] 501(c)(3) taxable private foundation |

Check if your organization is covered by the **General Rule** or a **Special Rule.**
**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33$^{1}/_{3}$% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering) "N/A" in column (b) instead of the contributor name and address), II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year ▶ $

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
**Foothills Child Advocacy Center**

Employer identification number
**20-5182316**

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|---|---|---|---|
| 1 | The Thomas C. and Mary Ann Hays Family Charitable Trust<br>PO Box 1118 ML CN-OH-W7P<br>Cincinnati OH 45201-1118 | $ 10,000 | Person [X]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| 2 | | $ 15,000 | Person [X]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| 3 | The Farkas Family Foundation<br>Trustee Gail Farkas Munger<br>1720 Browns Gap Turnpike<br>Charlottesville VA 22901 | $ 15,000 | Person [X]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| 4 | S Sonjia Smith<br>815 Broomley Rd<br>Charlottesville VA 22901 | $ 10,000 | Person [X]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |

**SCHEDULE D (Form 990)**

Department of the Treasury
Internal Revenue Service

# Supplemental Financial Statements

**u Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
**u Attach to Form 990.**
**u Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

**2018**

**Open to Public Inspection**

**Name of the organization**

**Foothills Child Advocacy Center**

**Employer identification number**

**20-5182316**

## Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

| | | (a) Donor advised funds | (b) Funds and other accounts |
|---|---|---|---|
| 1 | Total number at end of year | | |
| 2 | Aggregate value of contributions to (during year) | | |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year | | |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

## Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of a historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | | Held at the End of the Tax Year |
|---|---|---|
| a | Total number of conservation easements 2a | |
| b | Total acreage restricted by conservation easements 2b | |
| c | Number of conservation easements on a certified historic structure included in (a) 2c | |
| d | Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d | |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year **u**

4 Number of states where property subject to conservation easement is located **u**

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year **u**

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year **u** $

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

## Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 **u** $
(ii) Assets included in Form 990, Part X **u** $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 **u** $
b Assets included in Form 990, Part X **u** $

## Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

**3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- **a** ☐ Public exhibition
- **b** ☐ Scholarly research
- **c** ☐ Preservation for future generations
- **d** ☐ Loan or exchange programs
- **e** ☐ Other

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

## Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table:

| | | Amount |
|---|---|---|
| **c** Beginning balance | **1c** | |
| **d** Additions during the year | **1d** | |
| **e** Distributions during the year | **1e** | |
| **f** Ending balance | **1f** | |

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

## Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|---|---|---|---|---|
| **1a** Beginning of year balance | | | | | |
| **b** Contributions | | | | | |
| **c** Net investment earnings, gains, and losses | | | | | |
| **d** Grants or scholarships | | | | | |
| **e** Other expenditures for facilities and programs | | | | | |
| **f** Administrative expenses | | | | | |
| **g** End of year balance | | | | | |

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- **a** Board designated or quasi-endowment **u** %
- **b** Permanent endowment **u** %
- **c** Temporarily restricted endowment **u** %

The percentages on lines 2a, 2b, and 2c should equal 100%.

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

| | | Yes | No |
|---|---|---|---|
| **(i)** unrelated organizations | **3a(i)** | | |
| **(ii)** related organizations | **3a(ii)** | | |
| **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | **3b** | | |

**4** Describe in Part XIII the intended uses of the organization's endowment funds.

## Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|---|---|---|---|
| **1a** Land | | | | |
| **b** Buildings | | | | |
| **c** Leasehold improvements | | | | |
| **d** Equipment | | | | |
| **e** Other | | 46,393 | 13,239 | 33,154 |
| **Total.** Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* **u** | | | | 33,154 |

## Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|---|---|
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other | | |
| (A) | | |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| **Total.** *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* **u** | | |

## Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|---|---|
| **(1)** | | |
| **(2)** | | |
| **(3)** | | |
| **(4)** | | |
| **(5)** | | |
| **(6)** | | |
| **(7)** | | |
| **(8)** | | |
| **(9)** | | |
| **Total.** *(Column (b) must equal Form 990, Part X, col. (B) line 13.)* **u** | | |

## Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|---|
| **(1)** | |
| **(2)** | |
| **(3)** | |
| **(4)** | |
| **(5)** | |
| **(6)** | |
| **(7)** | |
| **(8)** | |
| **(9)** | |
| **Total.** *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* **u** | |

## Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| **1.** (a) Description of liability | (b) Book value |
|---|---|
| (1) Federal income taxes | |
| (2) **Payroll liabilities** | **1,398** |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| **Total.** *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* **u** | **1,398** |

**2.** Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

## Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | | | |
|---|---|---|---|---|---|
| **1** | Total revenue, gains, and other support per audited financial statements | | | **1** | |
| **2** | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | | |
| **a** | Net unrealized gains (losses) on investments | **2a** | | | |
| **b** | Donated services and use of facilities | **2b** | | | |
| **c** | Recoveries of prior year grants | **2c** | | | |
| **d** | Other (Describe in Part XIII.) | **2d** | | | |
| **e** | Add lines **2a** through **2d** | | | **2e** | |
| **3** | Subtract line **2e** from line **1** | | | **3** | |
| **4** | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | | |
| **a** | Investment expenses not included on Form 990, Part VIII, line 7b | **4a** | | | |
| **b** | Other (Describe in Part XIII.) | **4b** | | | |
| **c** | Add lines **4a** and **4b** | | | **4c** | |
| **5** | Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)* | | | **5** | |

## Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | | | |
|---|---|---|---|---|---|
| **1** | Total expenses and losses per audited financial statements | | | **1** | |
| **2** | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | | |
| **a** | Donated services and use of facilities | **2a** | | | |
| **b** | Prior year adjustments | **2b** | | | |
| **c** | Other losses | **2c** | | | |
| **d** | Other (Describe in Part XIII.) | **2d** | | | |
| **e** | Add lines **2a** through **2d** | | | **2e** | |
| **3** | Subtract line **2e** from line **1** | | | **3** | |
| **4** | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | | |
| **a** | Investment expenses not included on Form 990, Part VIII, line 7b | **4a** | | | |
| **b** | Other (Describe in Part XIII.) | **4b** | | | |
| **c** | Add lines **4a** and **4b** | | | **4c** | |
| **5** | Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)* | | | **5** | |

## Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**Part XIII Supplemental Information** *(continued)*

| SCHEDULE O (Form 990 or 990-EZ) | Supplemental Information to Form 990 or 990-EZ | OMB No. 1545-0047 |
|---|---|---|
| | Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. | 2018 |
| Department of the Treasury Internal Revenue Service | u Attach to Form 990 or 990-EZ. u Go to *www.irs.gov/Form990* for the latest information. | Open to Public Inspection |

| Name of the organization | Employer identification number |
|---|---|
| Foothills Child Advocacy Center | 20-5182316 |

**Form 990 - Organization's Mission Statement: Foothills Child Advocacy Center provides a coordinated system of effective response and intervention to children who have been victimized. Our goals are to minimize trauma, promote healing, and ensure child safety.**

**Most significant activities: To provide a well coordinated multidisciplinary team response to allegations of child abuse or victimization, beginning with a forensic interview and including case management services for children and their non-offending family members or guardians**

**Form 990, Part III, Line 4a - First Accomplishment**

**MDT/Forensic Assessment Program:**

**Foothills (1) coordinates multidisciplinary teams (MDTs) of local government and nonprofit agencies to increase communication and mutual accountability, reduce duplication of services, and help ensure that children are safe and that their needs are met; (2) conducts coordinated forensic interviews that reduce the number of times a child is interviewed and so reduces the child's trauma and that provide accurate information that helps the team to make decisions in the best interest of the child; and (3) provides ongoing support, assessment, and referral services to help families create and maintain safe, healing environments for their children. In FY 2019, Foothills served 360 new children and families, who represented many cases of alleged maltreatment.**

Name of the organization: Foothills Child Advocacy Center

Employer identification number: 20-5182316

**Form 990, Part III, Line 4d - All Other Accomplishments**

**Training for Professionals:**

**Foothills provides local professionals who work with child victims training on best practices in serving child victims and their families. In FY 2019, Foothills provided training on a trauma-informed response to child victims and families to investigators and on trauma-informed care,the prevalence of child abuse, and the appropriate response to child victims and families to medical professionals.**

**Form 990, Part VI, Line 11b - Organization's Process to Review Form 990**

**The Foothills Child Advocacy Center Board of Directors receives a copy of the Form 990 and supporting schedules for review before filing and has a minimum of five (5) business days to review the form and respond with questions or corrections.**

**Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy**

**Once a year, the officers, directors, trustees and key employees are required to reiview the Conflict of Interest Policy and to complete, sign and submit the Conflict of Interest Disclosure Statement. The Executive Director reviews the statements and maintains awareness of potential conflicts of interest throughout the year and addresses any that may arise.**

**Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation**

**Made available upon request. All reports are backed up electronically and stored.**

**Form 990, Part IX, Line 11g - Other Fees for Services**

Name of the organization: Foothills Child Advocacy Center

Employer identification number: 20-5182316

| Description | Tot/Prog Service | Mgt & General | Fundraising |
|---|---|---|---|
| Other contract services | $ 1,116 | $ 172 | $ 0 |
| Other contract services | $ 405 | $ 0 | $ 0 |
| Other contract services | $ 72 | $ 0 | $ 0 |
| Medical director | $ 58,704 | $ 0 | $ 0 |
| Total | $ 60,297 | $ 172 | $ 0 |

**Form 990, Part XII - Additional Information**

The organization has checked the "No" boxes in Part XII, Lines 2a and 2b, however the financial statements of the organizaation are audited by an independent accountant each year. This audit occurs after the submission of the tax return. The financial statements for the year ended June 30, 2018 (the prior year) have been audited. The finacial statements for the year ended June 30, 2019, which is the fiscal year reported on this tax return, will be audited. These financial statements are not consolidated.

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

# Depreciation and Amortization
**(Including Information on Listed Property)**
**u Attach to your tax return.**
**u Go to *www.irs.gov/Form4562* for instructions and the latest information.**

OMB No. 1545-0172
**2018**
Attachment Sequence No. **179**

Name(s) shown on return: **Foothills Child Advocacy Center**

**Identifying number**: **20-5182316**

Business or activity to which this form relates: **Indirect Depreciation**

## Part I Election To Expense Certain Property Under Section 179

**Note:** If you have any listed property, complete Part V before you complete Part I.

| | | | |
|---|---|---|---|
| 1 | Maximum amount (see instructions) | 1 | 1,000,000 |
| 2 | Total cost of section 179 property placed in service (see instructions) | 2 | |
| 3 | Threshold cost of section 179 property before reduction in limitation (see instructions) | 3 | 2,500,000 |
| 4 | Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- | 4 | |
| 5 | Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions | 5 | |

| 6 | (a) Description of property | (b) Cost (business use only) | (c) Elected cost |
|---|---|---|---|
| | | | |
| | | | |

| | | | |
|---|---|---|---|
| 7 | Listed property. Enter the amount from line 29 | 7 | |
| 8 | Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 | 8 | |
| 9 | Tentative deduction. Enter the **smaller** of line 5 or line 8 | 9 | |
| 10 | Carryover of disallowed deduction from line 13 of your 2017 Form 4562 | 10 | |
| 11 | Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions | 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 2019. 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.

## Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

| | | | |
|---|---|---|---|
| 14 | Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions | 14 | |
| 15 | Property subject to section 168(f)(1) election | 15 | |
| 16 | Other depreciation (including ACRS) | 16 | 120 |

## Part III MACRS Depreciation (Don't include listed property. See instructions.)

### Section A

| | | | |
|---|---|---|---|
| 17 | MACRS deductions for assets placed in service in tax years beginning before 2018 | 17 | 2,965 |
| 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 u ☐ | | |

### Section B—Assets Placed in Service During 2018 Tax Year Using the General Depreciation System

| | (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only–see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|---|---|---|---|---|---|---|---|
| 19a | 3-year property | | | | | | |
| b | 5-year property | | | | | | |
| c | 7-year property | | | | | | |
| d | 10-year property | | | | | | |
| e | 15-year property | | | | | | |
| f | 20-year property | | | | | | |
| g | 25-year property | | | 25 yrs. | | S/L | |
| h | Residential rental property | | | 27.5 yrs. | MM | S/L | |
| | | | | 27.5 yrs. | MM | S/L | |
| i | Nonresidential real property | | | 39 yrs. | MM | S/L | |
| | | | | | MM | S/L | |

### Section C—Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 20a | Class life | | | | | S/L | |
| b | 12-year | | | 12 yrs. | | S/L | |
| c | 30-year | | | 30 yrs. | MM | S/L | |
| d | 40-year | | | 40 yrs. | MM | S/L | |

## 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. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions | 22 | 3,085 |
| 23 | For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs | 23 | |

337 Foothills Child Advocacy Center 11/20/2019
20-5182316

# Federal Asset Report

FYE: 6/30/2019

## Form 990, Page 1

| Asset | Description | Date In Service | Cost | Bus % | Sec 179 | Bonus | Basis for Depr | Per | Conv | Meth | Prior | Current |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Prior MACRS:** | | | | | | | | | | | | |
| 1 | Computer | 11/12/07 | 1,424 | | | | 1,424 | 5 | HY | S/L | 1,424 | 0 |
| 2 | Audio equipment | 12/08/08 | 460 | | | X | 230 | 5 | HY | S/L | 460 | 0 |
| 3 | Computer | 7/23/10 | 1,070 | | | X | 535 | 5 | HY | S/L | 856 | 0 |
| 4 | Pesa AV Processor | 10/19/15 | 3,995 | | | | 3,995 | 5 | HY | S/L | 1,998 | 799 |
| 5 | PTZ Camera | 10/19/15 | 5,000 | | | | 5,000 | 5 | HY | S/L | 2,500 | 1,000 |
| 6 | Dell PC Quad Core, Accessories | 10/19/15 | 5,832 | | | | 5,832 | 5 | HY | S/L | 2,916 | 1,166 |
| | | | 17,781 | | | | 17,016 | | | | 10,154 | 2,965 |
| **Other Depreciation:** | | | | | | | | | | | | |
| 7 | Leasehold Improvements | 5/01/19 | 24,165 | | | | 24,165 | 40 | MO | S/L | 0 | 101 |
| 8 | Leasehold Improvements | 5/01/19 | 4,447 | | | | 4,447 | 40 | MO | S/L | 0 | 19 |
| | **Total Other Depreciation** | | 28,612 | | | | 28,612 | | | | 0 | 120 |
| | **Total ACRS and Other Depreciation** | | 28,612 | | | | 28,612 | | | | 0 | 120 |
| | **Grand Totals** | | 46,393 | | | | 45,628 | | | | 10,154 | 3,085 |
| | **Less: Dispositions and Transfers** | | 0 | | | | 0 | | | | 0 | 0 |
| | **Less: Start-up/Org Expense** | | 0 | | | | 0 | | | | 0 | 0 |
| | **Net Grand Totals** | | 46,393 | | | | 45,628 | | | | 10,154 | 3,085 |

337 Foothills Child Advocacy Center
20-5182316
FYE: 6/30/2019

# AMT Asset Report
## Form 990, Page 1

11/20/2019

| Asset | Description | Date In Service | Cost | Bus % | Sec 179 | Bonus | Basis for Depr | Per | Conv | Meth | Prior | Current |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Prior MACRS:** | | | | | | | | | | | | |
| 1 | Computer | 11/12/07 | 1,424 | | | | 1,424 | 5 | HY | S/L | 1,424 | 0 |
| 2 | Audio equipment | 12/08/08 | 460 | | | X | 230 | 5 | HY | S/L | 460 | 0 |
| 3 | Computer | 7/23/10 | 1,070 | | | X | 535 | 5 | HY | S/L | 1,070 | 0 |
| 4 | Pesa AV Processor | 10/19/15 | 3,995 | | | | 3,995 | 5 | HY | S/L | 1,998 | 799 |
| 5 | PTZ Camera | 10/19/15 | 5,000 | | | | 5,000 | 5 | HY | S/L | 2,500 | 1,000 |
| 6 | Dell PC Quad Core, Accessories | 10/19/15 | 5,832 | | | | 5,832 | 5 | HY | S/L | 2,916 | 1,166 |
| | | | 17,781 | | | | 17,016 | | | | 10,368 | 2,965 |
| **Other Depreciation:** | | | | | | | | | | | | |
| 7 | Leasehold Improvements | 5/01/19 | 0 | | | | 0 | 0 | HY | | 0 | 0 |
| 8 | Leasehold Improvements | 5/01/19 | 4,447 | | | | 4,447 | 40 | MO | S/L | 0 | 19 |
| | **Total Other Depreciation** | | 4,447 | | | | 4,447 | | | | 0 | 19 |
| | **Total ACRS and Other Depreciation** | | 4,447 | | | | 4,447 | | | | 0 | 19 |
| | **Grand Totals** | | 22,228 | | | | 21,463 | | | | 10,368 | 2,984 |
| | **Less: Dispositions and Transfers** | | 0 | | | | 0 | | | | 0 | 0 |
| | **Net Grand Totals** | | 22,228 | | | | 21,463 | | | | 10,368 | 2,984 |

337 Foothills Child Advocacy Center 11/20/2019
20-5182316

# Bonus Depreciation Report

FYE: 6/30/2019

## Form 990, Page 1

| Asset | Property Description | Date In Service | Tax Cost | Bus Pct | Tax Sec 179 Exp | Current Bonus | Prior Bonus | Tax - Basis for Depr |
|---|---|---|---|---|---|---|---|---|
| 2 | Audio equipment | 12/08/08 | 460 | | 0 | 0 | 230 | 230 |
| 3 | Computer | 7/23/10 | 1,070 | | 0 | 0 | 535 | 535 |
| | **Grand Total** | | 1,530 | | 0 | 0 | 765 | 765 |

337 Foothills Child Advocacy Center 11/20/2019
20-5182316

# Depreciation Adjustment Report

FYE: 6/30/2019

## All Business Activities

| Form | Unit | Asset | Description | Tax | AMT | AMT Adjustments/ Preferences |
|---|---|---|---|---|---|---|
| **MACRS Adjustments:** | | | | | | |
| Page 1 | 1 | 1 | Computer | 0 | 0 | 0 |
| Page 1 | 1 | 2 | Audio equipment | 0 | 0 | 0 |
| Page 1 | 1 | 3 | Computer | 0 | 0 | 0 |
| Page 1 | 1 | 4 | Pesa AV Processor | 799 | 799 | 0 |
| Page 1 | 1 | 5 | PTZ Camera | 1,000 | 1,000 | 0 |
| Page 1 | 1 | 6 | Dell PC Quad Core, Accessories | 1,166 | 1,166 | 0 |
| | | | | 2,965 | 2,965 | 0 |

337 Foothills Child Advocacy Center 11/20/2019
20-5182316 **Future Depreciation Report FYE: 6/30/20**
FYE: 6/30/2019 **Form 990, Page 1**

| Asset | Description | Date In Service | Cost | Tax | AMT |
|---|---|---|---|---|---|
| **Prior MACRS:** | | | | | |
| 1 | Computer | 11/12/07 | 1,424 | 0 | 0 |
| 2 | Audio equipment | 12/08/08 | 460 | 0 | 0 |
| 3 | Computer | 7/23/10 | 1,070 | 0 | 0 |
| 4 | Pesa AV Processor | 10/19/15 | 3,995 | 799 | 799 |
| 5 | PTZ Camera | 10/19/15 | 5,000 | 1,000 | 1,000 |
| 6 | Dell PC Quad Core, Accessories | 10/19/15 | 5,832 | 1,167 | 1,167 |
| | | | 17,781 | 2,966 | 2,966 |
| **Other Depreciation:** | | | | | |
| 7 | Leasehold Improvements | 5/01/19 | 24,165 | 604 | 0 |
| 8 | Leasehold Improvements | 5/01/19 | 4,447 | 111 | 111 |
| | **Total Other Depreciation** | | 28,612 | 715 | 111 |
| | **Total ACRS and Other Depreciation** | | 28,612 | 715 | 111 |
| | **Grand Totals** | | 46,393 | 3,681 | 3,077 |

Form **990**

# Two Year Comparison Report

For calendar year 2018, or tax year beginning **07/01/18** , ending **06/30/19**

**2017 & 2018**

Name

**Foothills Child Advocacy Center**

Taxpayer Identification Number

**20-5182316**

| | | | 2017 | 2018 | Differences |
|---|---|---|---|---|---|
| Revenue | 1. Contributions, gifts, grants | 1. | 106,255 | 160,594 | 54,339 |
| | 2. Membership dues and assessments | 2. | | | |
| | 3. Government contributions and grants | 3. | 265,844 | 308,048 | 42,204 |
| | 4. Program service revenue | 4. | | | |
| | 5. Investment income | 5. | 101 | 88 | -13 |
| | 6. Proceeds from tax exempt bonds | 6. | | | |
| | 7. Net gain or (loss) from sale of assets other than inventory | 7. | | | |
| | 8. Net income or (loss) from fundraising events | 8. | 237 | 1,900 | 1,663 |
| | 9. Net income or (loss) from gaming | 9. | | | |
| | 10. Net gain or (loss) on sales of inventory | 10. | | | |
| | 11. Other revenue | 11. | | | |
| | 12. **Total revenue.** Add lines 1 through 11 | 12. | 372,437 | 470,630 | 98,193 |
| Expenses | 13. Grants and similar amounts paid | 13. | 136 | 212 | 76 |
| | 14. Benefits paid to or for members | 14. | | | |
| | 15. Compensation of officers, directors, trustees, etc. | 15. | 63,810 | 64,882 | 1,072 |
| | 16. Salaries, other compensation, and employee benefits | 16. | 200,388 | 214,179 | 13,791 |
| | 17. Professional fundraising fees | 17. | | | |
| | 18. Other professional fees | 18. | 30,922 | 69,679 | 38,757 |
| | 19. Occupancy, rent, utilities, and maintenance | 19. | 38,248 | 85,413 | 47,165 |
| | 20. Depreciation and Depletion | 20. | 2,965 | 3,085 | 120 |
| | 21. Other expenses | 21. | 48,842 | 48,940 | 98 |
| | 22. **Total expenses.** Add lines 13 through 21 | 22. | 385,311 | 486,390 | 101,079 |
| | 23. **Excess or (Deficit).** Subtract line 22 from line 12 | 23. | -12,874 | -15,760 | -2,886 |
| Other Information | 24. Total exempt revenue | 24. | 372,437 | 470,630 | 98,193 |
| | 25. Total unrelated revenue | 25. | | | |
| | 26. Total excludable revenue | 26. | 101 | 88 | -13 |
| | 27. Total assets | 27. | 260,763 | 237,625 | -23,138 |
| | 28. Total liabilities | 28. | 9,112 | 1,734 | -7,378 |
| | 29. Retained earnings | 29. | 251,651 | 235,891 | -15,760 |
| | 30. Number of voting members of governing body | 30. | 11 | 12 | |
| | 31. Number of independent voting members of governing body | 31. | 11 | 12 | |
| | 32. Number of employees | 32. | 8 | 8 | |
| | 33. Number of volunteers | 33. | | | |

Form **990**

# Tax Return History

**2018**

Name

**Foothills Child Advocacy Center**

Employer Identification Number

**20-5182316**

| | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 |
|---|---|---|---|---|---|---|
| Contributions, gifts, grants | 323,474 | 359,882 | 367,929 | 372,099 | 468,642 | |
| Membership dues | | | | | | |
| Program service revenue | 1,855 | 3,149 | | | | |
| Capital gain or loss | | | | | | |
| Investment income | 80 | 99 | 92 | 101 | 88 | |
| Fundraising revenue (income/loss) | 2,918 | 1,603 | 13,821 | 237 | 1,900 | |
| Gaming revenue (income/loss) | | | | | | |
| Other revenue | | | | | | |
| **Total revenue** | 328,327 | 364,733 | 381,842 | 372,437 | 470,630 | |
| Grants and similar amounts paid | | 271 | 9,904 | 136 | 212 | |
| Benefits paid to or for members | | | | | | |
| Compensation of officers, etc. | 50,475 | 56,980 | 63,191 | 63,810 | 64,882 | |
| Other compensation | 149,606 | 157,042 | 175,520 | 200,388 | 214,179 | |
| Professional fees | 6,527 | 16,526 | 9,415 | 30,922 | 69,679 | |
| Occupancy costs | 36,858 | 37,448 | 39,585 | 38,248 | 85,413 | |
| Depreciation and depletion | 107 | 1,590 | 2,966 | 2,965 | 3,085 | |
| Other expenses | 62,284 | 61,173 | 66,485 | 48,842 | 48,940 | |
| **Total expenses** | 305,857 | 331,030 | 367,066 | 385,311 | 486,390 | |
| **Excess or (Deficit)** | 22,470 | 33,703 | 14,776 | -12,874 | -15,760 | |
| Total exempt revenue | 328,327 | 364,733 | 381,842 | 372,437 | 470,630 | |
| Total unrelated revenue | | | | | | |
| Total excludable revenue | 1,935 | 3,248 | 92 | 101 | 88 | |
| Total Assets | 220,100 | 257,701 | 273,337 | 260,763 | 237,625 | |
| Total Liabilities | 4,054 | 7,952 | 8,812 | 9,112 | 1,734 | |
| Net Fund Balances | 216,046 | 249,749 | 264,525 | 251,651 | 235,891 | |

# Federal Statements

## Taxable Interest on Investments

| Description | Amount | Unrelated Business | Exclusion Code | Postal Code | Acquired after 6/30/75 | US Obs ($ or %) |
|---|---|---|---|---|---|---|
| Taxable Interest | $ 88 | | 14 | | | |
| Total | $ 88 | | | | | |

# Federal Statements



## Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

| Description | Total Expenses | Program Service | Management & General | Fund Raising |
|---|---|---|---|---|
| Other contract services | $ 1,288 | $ 1,116 | $ 172 | $ |
| Other contract services | 405 | 405 | | |
| Other contract services | 72 | 72 | | |
| Medical director | 58,704 | 58,704 | | |
| Total | $ 60,469 | $ 60,297 | $ 172 | $ 0 |

## Form 990, Part IX, Line 24e - All Other Expenses

| Description | Total Expenses | Program Service | Management & General | Fund Raising |
|---|---|---|---|---|
| Equipment rental | $ 1,045 | $ 967 | $ 78 | $ |
| Program supplies | 976 | 969 | 7 | |
| Medical supplies | 650 | 650 | | |
| Honorariums/gifts | 317 | 292 | 25 | |
| Credit card commissions | 296 | | | 296 |
| Miscellaneous | 84 | 84 | | |
| Criminial background chec | 82 | 56 | 26 | |
| Training/speakers | 45 | | | 45 |
| Sales tax | 17 | | 17 | |
| Bank fees | 7 | | 7 | |
| Total | $ 3,519 | $ 3,018 | $ 160 | $ 341 |

# Federal Statements



## Schedule A, Part II, Line 1(e)

| Description | Amount |
|---|---|
| City of Charlottesville | $ 43,405 |
| County of Albemarle | 43,486 |
| NCA-General | 600 |
| VOCA | 204,157 |
| for Outlying Areas | 16,400 |
| | 160,594 |
| Total | $ 468,642 |

# Federal Statements

## Schedule A, Part II, Line 5 - Excess Gifts

| Donor Name | Total | Excess |
|---|---|---|
| The George F and Ann Harris Quantitative Foundation | $ | $ |
| The Thomas C. and Mary Ann Hays | 24,000 | |
| Alexandra Nammack | | |
| Ted and Sheila Weschler | 50,000 | 12,052 |
| The Farkas Family Foundation | 45,000 | 7,052 |
| S Sonjia Smith | 35,000 | |
| Rathburn Family Foundation | | |
| Total | $ 154,000 | $ 19,104 |

# Federal Statements



## Schedule A, Part II, Line 8(e)

| Description | Amount |
|---|---|
| Taxable Interest | $ 88 |
| Total | $ 88 |

## Schedule A, Part II, Line 10(e)

| Description | Amount |
|---|---|
| Child victim interviews | $ |
| TF-CBT Training calls | |
| Total | $ 0 |

## Schedule A, Part II, Line 12 - Current year

| Description | Amount |
|---|---|
| Sip & Shop | $ |
| Amazon Smile | |
| Fridays After 5 | |
| Sticks Spirit Night | |
| Nickels for Non-Profits | |
| Sedona Tap House | 1,900 |
| Chipotle | |
| Charlottesville Gives | |
| Charlottesville 10 Miler | |
| Panera Bread Fundraiser | |
| Family Jam | |
| Total | $ 1,900 |

# COMMONWEALTH OF VIRGINIA

**RAPPAHANNOCK RAPIDAN HEALTH DISTRICT**
Madison County Health Department
98 Alexandria Pike, Suite 42
Warrenton, Virginia 20186
(540) 347-6363 FAX (540) 347-6373

January 10, 2020

Mary Jane Costello
Director of Finance/Assistant County Administrator
Madison County Government
302 Thrift Road
Madison, VA 22727

RE: Health Department FY21 Funding Request

Dear Ms. Costello:

Please find attached the requested information for fiscal year 2021 funding.

We request an additional $6,865 local match (state general fund increase, $12,012). The increased funding will be used for increased health insurance premiums (projecting 5.4% increase based on previous 5 year average; $3,764), increased VRS retirement contribution rate (VRS published projected increase from 13.52% to 14.46%; $2,363), increased VITA technology rates ($2,883) and a portion of one Health Educator ($6,908) and one Facilities Maintenance Worker ($2,959).

If you would like to discuss further, please do not hesitate to contact me at 540.316.6303 or by email at Dana.McClelland@vdh.virginia.gov

Sincerely,

Dana McClelland
Business Manager

# Madison County Health Department Budget

Updated January 6, 2020

| | FY21 Budget Request | FY20 YTD *11/30/2019* | FY20 Approved Budget | FY19 Actual | *% Change* |
|---|---|---|---|---|---|
| **INCOME** | | | | | |
| **State Contribution** | **$ 289,697** | **$ 277,685** | **$ 277,685** | **$ 245,685** | |
| State General Fund (GF) | 289,697 | 277,685 | 277,685 | 245,685 | *4%* |
| *Percent of Total Income* | *53.4%* | *70.7%* | *52.3%* | *52.1%* | |
| **Locality Contribution** | **$ 165,565** | **$ 79,376** | **$ 158,726** | **$ 140,412** | |
| Local Match | 165,565 | 79,350 | 158,700 | 140,412 | *4%* |
| 100% Local Only | - | - | - | - | - |
| Carry-Forward | - | 26 | 26 | 0 | - |
| *Percent of Total Income* | *30.5%* | *20.2%* | *29.9%* | *29.8%* | |
| **Revenue** | **$ 87,149** | **$ 35,880** | **$ 94,749** | **$ 85,374** | |
| Environmental Health Services | 53,383 | 21,953 | 48,683 | 46,090 | *10%* |
| Clinical Services | 33,766 | 13,927 | 46,066 | 39,284 | *-27%* |
| *Percent of Total Income* | *16.1%* | *9.1%* | *17.8%* | *18.1%* | |
| **TOTAL INCOME** | **$ 542,411** | **$ 392,941** | **$ 531,160** | **$ 471,471** | *2%* |
| **EXPENSES** | | | | | |
| **Personnel** | **$ 387,140** | **$ 150,799** | **$ 374,803** | **$ 357,350** | *3%* |
| Payroll - Coop/Local | 404,422 | 150,799 | 386,294 | 357,350 | *5%* |
| *Budgeted Salary Lapse* | *(17,282)* | | *(11,491)* | - | |
| *Turn-over Percentage* | *4.27%* | *0.00%* | *2.97%* | *0.00%* | |
| *Percent of Total Expenses* | *71.4%* | *69.4%* | *70.6%* | *75.8%* | |
| **Non-Personnel** | **$ 155,271** | **$ 66,556** | **$ 156,357** | **$ 114,095** | *-1%* |
| Contractual Services | 59,585 | 26,556 | 57,484 | 56,755 | *4%* |
| Supplies | 6,130 | 5,027 | 6,960 | 4,849 | *-12%* |
| Transfer Funds | - | - | - | - | - |
| Continuous Charges | 89,556 | 34,813 | 91,714 | 50,998 | *-2%* |
| Equipment | - | 160 | 200 | 1,493 | - |
| *Percent of Total Expenses* | *28.6%* | *30.6%* | *29.4%* | *24.2%* | |
| *Unexpended Balance* | | | | *$ 26.34* | |
| **TOTAL EXPENSES** | **$ 542,411** | **$ 217,355** | **$ 531,160** | **$ 471,471** | *2%* |

The mission of the Madison County Health Department is to attain optimal health for the people of our community through disease prevention, environmental safe guards and health promotion by implementing individual and population-level strategies to reduce morbidity and mortality.

**Environmental Health**

- Permit and regulate food service establishments and monitor and educate the providers of these services
- Assist with communicable disease outbreak investigations and emergency preparedness and response activities
- Permit installation of private wells and sewage disposal systems
- Assist local government with control of animal rabies, promotion of vector controls for arboviral illness, and providing referral or information to respond to other environmental health concerns of citizens

These activities help prevent disease through safe disposal of sewage and assurance of safe drinking water for the homes and businesses not served by a public water and sewer system; safe food preparation in foodservice establishments, including schools; prevention of rabies and arboviral disease transmission to humans; proper sanitation in facilities that serve the public such as summer camps, hotels, day care centers, and migrant labor camps.

**Family Planning**

- Provide clinic services for persons who are sexually active and need education and/or contraceptives in order to prevent unintended pregnancies. Services are targeted to low-income persons. Services are provided on a sliding scale
- Provide outreach education about family planning to teens and hard-to-reach populations

These activities reduce unintended pregnancies leading to better maternal and child health outcomes in the community.

**Maternal & Child Health**

- Distribute free car seats and cribs to eligible caregivers and teach families about how to use them safely
- Teach mandated health classes for day care providers
- Provide health education to the public for improved child health

These programs benefit the community by improving children's ability to learn, preventing negative health outcomes in children, promoting healthy pregnancies, helping parents and childcare providers in offering a safe and healthy environment for children.

**Immunizations**

- Provide immunizations for residents of all ages, including those required and recommended for children. Many who seek immunizations at the health department do so because they have no regular doctor or because the cost is minimal or free.
- Provide assessment, guidance and training for health care providers, schools and childcare providers.

These services prevent outbreaks of serious vaccine-preventable diseases.

**Communicable Disease Control**

- Provide surveillance, investigate and implement controls for communicable diseases and threats (including tuberculosis, sexually transmitted infections (STI), and influenza)
- Provide STI testing and treatment.

This activity benefits all residents and visitors to the area by preventing the spread of diseases.

**Population Health**

- Enhance partnerships to build healthy communities
- Use Community Health Assessment data to determine and prioritize public health issues
- Educate the community on Safe Sleep for infants & smoking cessation resources
- Implement a Community Health Improvement Plan to guide health improvement efforts, including:
    - Nutrition & Physical Activity
    - Literacy
    - Adolescent Vaccinations
    - Injury Prevention

These activities help maintain and improve the health of the entire population. Public health aims to work with local partners to guide and assess prevention initiatives, including those that target social determinants of health and enhance equity.

**Emergency Preparedness and Response**

- Work with community partners to plan for and educate the public about public health emergencies

By having coordinated response plans with others in order to mitigate the impact of health emergencies such as bioterrorism or pandemic influenza.

**Chronic Disease Prevention and Control**

- Assess residents at risk of nursing home placement and plan care in facility or in the community in partnership with the Department of Social Services (DSS)
- Provide public education, health promotion and prevention activities such as childhood obesity prevention, promoting healthy lifestyles, community assessment to monitor disease prevalence and environmental factors that promote healthy lifestyles

The intended impact of these services on the community is to reverse the trend of increasing incidence of chronic diseases associated with unhealthy lifestyle behaviors, to prevent progression of chronic disease and to optimize life quality for those afflicted with chronic disease.

**WIC Nutrition**

- Provide nutrition education and food vouchers for low-income mothers, infants and children.

These services and the nutritious foods provided increase the likelihood of positive pregnancy outcomes and proper growth and development of infants and children. Health departments are the only access points for WIC in the Commonwealth.

Our agency strategic plan includes, but is not limited to, the following goals:

Chronic Disease:

- Increase the percentage of Virginians reporting physical activity or exercise outside of work in the last 30 days
- Increase the number of children and pregnant women access to healthy, nutritional food
- Increase the percentage of mothers reporting not to have smoked during pregnancy

Maternal and Child Health:

- Increase the number of infants who survive their first year of life
- Reduce the pregnancy rate of women age 15-19 years

Communicable Disease:

- Increase the percentage of children receiving four does of DTaP by age 2
- Increase the percentage of adolescent women receiving three doses of HPV vaccine
- Increase the percentage of active Tuberculosis cases completing a standard treatment regime within 12 months
- Stabilize the incidence rate of reported cases of Chlamydia, Syphilis, and Gonorrhea
- Increase the percentage of reported disease cases in which control measures were initiated within Public Health Emergency Preparedness required timeframes

Operations:

- Continue to support and improve the health of all Virginians through efficient and effective execution of operations and delivery of services

Emergency Preparedness:

- Maintain NACCHO Project Public Health designation

Environmental Health:

- Complete scheduled food facility inspections within required timeframes
- Increase the percentage of food facility violations corrected at the time of inspection
- Increase percentage of failing onsite sewage systems corrected within 60 days of health department awareness

| Madison (113)<br>Non-Personnel Expenses | Actual<br>FY17 | Actual<br>FY18 | Actual<br>FY19 | YTD<br>FY20 | Budget<br>FY21 | <br>FY22 | %<br>Change |
|---|---|---|---|---|---|---|---|
| 1211 EXPRESS SERVICE | 54 | 37 | 66 | 14 | 44 | | -34% |
| 1212 OUTBOUND FREIGHT | 184 | 148 | 404 | 81 | 140 | | -65% |
| 1213 MESSENGER SERVICES | - | - | - | 17 | - | | #DIV/0! |
| 1214 POSTAL SERVICES | 4,500 | 5,094 | 102 | - | 500 | | 390% |
| 1215 PRINTING SERVICES | 63 | 52 | 150 | 54 | 107 | | -29% |
| 1216 TELECOMMUNICA (VITA) | 21,801 | 23,878 | 24,259 | 2,996 | 23,611 | | -3% |
| 1217 TELECOM (NON-STATE) | 36 | - | - | 1 | - | | #DIV/0! |
| 1218 NON-DIT TELECOMM SVCS | - | - | - | - | - | | #DIV/0! |
| 1219 INBOUND FREIGHT | - | - | - | - | - | | #DIV/0! |
| **1210 COMMUNICATION SVC** | **$ 26,638** | **$ 29,209** | **$ 24,981** | **$ 3,163** | **$ 24,402** | **$ -** | **-2%** |
| 1222 PUBLCATION SUBSC. | 33 | - | 107 | - | 107 | | 0% |
| 1224 EMPL TRAINING COURSES | 372 | 590 | 85 | 152 | - | | -100% |
| 1226 EMPL TRAINING/CONS SERV | - | - | - | - | - | | #DIV/0! |
| 1227 EMPL TRAINING/TRANSP | 483 | 3,575 | 614 | 142 | - | | -100% |
| **1220 EMPLY DEVEL SVC.** | **$ 888** | **$ 4,166** | **$ 806** | **$ 294** | **$ 107** | **$ -** | **-87%** |
| 1231 CLINIC SERVICES | - | - | - | - | - | | #DIV/0! |
| 1232 DENTAL SERVICES | - | - | - | - | - | | #DIV/0! |
| 1234 MEDICAL SERVICES | - | - | - | - | - | | #DIV/0! |
| 1236 X-RAY AND LAB SVC | 485 | 1,426 | 6 | 117 | 900 | | 14900% |
| **1230 HEALTH SERVICES** | **$ 485** | **$ 1,426** | **$ 6** | **$ 117** | **$ 900** | **$ -** | **14900%** |
| 1241 AUDITING SERVICES | - | - | - | - | - | | #DIV/0! |
| 1242 FISCAL SERVICES | 376 | 229 | 263 | 47 | 288 | | 10% |
| 1243 ATTORNEY SERVICES | - | - | - | - | - | | #DIV/0! |
| 1244 MANAGEMENT SVC | 29 | 91 | 162 | 35 | 115 | | -29% |
| 1245 PERS. DEVL. SVC | 13 | - | - | - | - | | #DIV/0! |
| 1247 Legal Services | - | - | 1 | - | - | | -100% |
| 1248 MEDIA SERVICES | - | - | - | - | - | | #DIV/0! |
| 1249 RECRUITMENT ADVERTISING | 28 | - | - | - | - | | #DIV/0! |
| **1240 MNG. INFO. SVS.** | **$ 445** | **$ 320** | **$ 426** | **$ 82** | **$ 403** | **$ -** | **-5%** |
| 1251 CUSTODIAL SERVICE | 6,511 | 14,681 | 13,654 | 5,958 | 13,000 | | -5% |
| 1252 ELECREPAIR/MAIN. | 1,520 | 450 | 967 | 258 | 579 | | -40% |
| 1253 EQUIP REPAIR/MAIN. | 822 | 1,312 | 1,524 | - | 1,483 | | -3% |
| 1254 EXTERMINATION SVC | 396 | 396 | 34 | - | 34 | | 0% |
| 1256 MECH. REPAIR/MAIN. | - | - | - | - | - | | #DIV/0! |
| 1259 Vehicle REPAIR/ MAIN. | - | 75 | - | - | - | | #DIV/0! |
| **1250 REPAIR & MAIN. SVCS.** | **$ 9,248** | **$ 16,914** | **$ 16,179** | **$ 6,215** | **$ 15,096** | **$ -** | **-7%** |
| 1263 Clerical Services | 144 | 42 | 176 | - | - | | -100% |
| 1266 Manual Labor Service | 5,398 | 60 | 619 | 4,830 | 826 | | 33% |
| 1268 Skilled Serv. | 44 | 2,997 | - | 493 | - | | #DIV/0! |
| **1260 SUPPORT SERVICES** | **$ 5,585** | **$ 3,099** | **$ 795** | **$ 5,323** | **$ 826** | **$ -** | **4%** |
| 1275 Comp. Software Main | 22 | 300 | - | 3,364 | - | | #DIV/0! |
| 1277 Comp. Oper. Non Vita | - | 209 | - | - | - | | #DIV/0! |
| 1276 COMP. OPER. SVC.(Vita) | - | - | - | - | - | | #DIV/0! |
| 1278 COMP. OPER.SVC. (STATE) | 4,386 | 4,848 | 6,465 | 3,437 | 9,348 | | 45% |
| 1279 COMP. SFTWR. COST | 107 | - | - | - | - | | #DIV/0! |
| **1270 TECHNICAL SERVICES** | **$ 4,516** | **$ 5,357** | **$ 6,465** | **$ 6,801** | **$ 9,348** | **$ -** | **45%** |
| 1282 TRAVEL, PERS. VEHICLE | 4,185 | 3,259 | 3,780 | 3,020 | 4,758 | | 26% |

| Madison (113) Non-Personnel Expenses | Actual FY17 | Actual FY18 | Actual FY19 | YTD FY20 | Budget FY21 | FY22 | % Change |
|---|---|---|---|---|---|---|---|
| 1283 TRAVEL, PUBLIC CAR | 15 | 32 | - | - | - | | #DIV/0! |
| 1284 TRAVEL, STATE VEHICLE | 1,146 | 2,418 | 3,097 | 1,433 | 3,746 | | 21% |
| 1285 TRAVEL, SUBSI/LODGING | - | 70 | 202 | 107 | - | | -100% |
| 1297 LATE PAY PENALTIES | - | - | 21 | - | - | | -100% |
| **1280 TRANS. SERVICES** | **$ 5,346** | **$ 5,778** | **$ 7,098** | **$ 4,561** | **$ 8,503** | **$ -** | ***20%*** |
| **1200 TOTAL CONTRACT SVCE** | **$ 53,150** | **$ 66,268** | **$ 56,755** | **$ 26,556** | **$ 59,585** | **$ -** | ***5%*** |
| 1309 CHARGE CARD PURCH. | - | - | - | - | - | | #DIV/0! |
| 1312 OFFICE SUPPLIES | 1,535 | 1,534 | 460 | 1,095 | 1,320 | | 187% |
| 1313 STATIONERY AND FORMS | 104 | 6 | - | - | | | #DIV/0! |
| **1310 ADMIN. SUPP** | **$ 1,638** | **$ 1,540** | **$ 460** | **$ 1,095** | **$ 1,320** | **$ -** | ***187%*** |
| 1322 GAS | - | - | - | - | - | | #DIV/0! |
| 1323 GASOLINE | 280 | 303 | 301 | 110 | 300 | | 0% |
| 1324 OIL | - | - | - | - | - | | #DIV/0! |
| **1320 ENERGY SUPP** | **$ 280** | **$ 303** | **$ 301** | **$ 110** | **$ 300** | **$ -** | ***0%*** |
| 1335 PACK AND SHIP SUPP | - | - | - | - | - | | #DIV/0! |
| **1330 MAIN. AND MER SUPP** | **$ -** | **$ -** | **$ -** | **$ -** | **$ -** | **$ -** | ***#DIV/0!*** |
| 1341 LAB SUPPLIES | - | - | - | - | - | | #DIV/0! |
| 1342 MED & DEN SUPP. | 1,025 | 2,028 | 566 | 166 | 420 | | -26% |
| 1343 FIELD SUPPLIES | 86 | 595 | - | - | - | | #DIV/0! |
| 1344 PHARMACEUTICAL DRUGS | 9,164 | 5,931 | 2,154 | 1,468 | 2,590 | | 20% |
| **1340 MED & LAB SUPP.** | **$ 10,276** | **$ 8,554** | **$ 2,721** | **$ 1,634** | **$ 3,010** | **$ -** | ***11%*** |
| 1351 BUL REP AND MAIN. MAT | 696 | 83 | - | - | - | | #DIV/0! |
| 1352 CUST REP. & MAIN. MAT | 871 | 421 | 650 | 166 | 600 | | -8% |
| 1353 ELEC REP. & MAIN. MAT | 790 | - | - | - | - | | #DIV/0! |
| 1354 MECH REP & MAIN MAT | 250 | - | - | 1,468 | 60 | | #DIV/0! |
| 1355 VEH REP & MAIN MAT | - | - | - | | - | | #DIV/0! |
| **1350 REP & MAIN SUPP** | **$ 2,606** | **$ 504** | **$ 650** | **$ 1,634** | **$ 660** | **$ -** | ***1%*** |
| 1361 Clothing Supplies | - | - | - | - | - | | #DIV/0! |
| 1363 FOOD SVC SUPP | - | 5 | - | - | - | | #DIV/0! |
| 1365 PERSONAL CARD SUPPLIES | - | 78 | - | - | - | | #DIV/0! |
| **1360 RESIDENTIALSUPP** | **$ -** | **$ 83** | **$ -** | **$ -** | **$ -** | **$ -** | ***#DIV/0!*** |
| 1373 COMUP OPER. SUPP. | 1,301 | 4,252 | 716 | 553 | 840 | | 17% |
| 1374 EDUCATIONAL SUP | 41 | 1,764 | - | - | - | | #DIV/0! |
| 1377 PHOTOGRAPHIC SUPPLIES | - | - | - | - | - | | #DIV/0! |
| **1370 SPECIFIC USE SUPP** | **$ 1,342** | **$ 6,016** | **$ 716** | **$ 553** | **$ 840** | **$ -** | ***17%*** |
| 1397 LATE PAY. PEN SUPP. | - | - | - | - | | | #DIV/0! |
| **1390 LATE PAYMENT** | **0** | **$ -** | **$ -** | **$ -** | **$ -** | **$ -** | ***#DIV/0!*** |
| **1300 TOTAL SUPP AND MAT** | **$ 16,142** | **$ 17,001** | **$ 4,849** | **5,027** | **6,130** | **-** | ***26%*** |
| 1415 UNEMPLOYMENT COMP | - | - | - | - | - | | #DIV/0! |
| 1418 INCENTIVES | - | 2,352 | - | - | - | | #DIV/0! |
| 1413 Premiums | - | - | - | - | - | | #DIV/0! |
| **1400 TOTAL TRANS PAY.** | **$ -** | **$ 2,352** | **$ -** | **$ -** | **$ -** | **$ -** | ***#DIV/0!*** |
| 1516 PROPERTY INSURANCE | 348 | 348 | 371 | - | 371 | | 0% |
| 1512 Auto Liability INS | 28 | 29 | 43 | 42 | 43 | | 0% |
| **1510 INS-FIXED ASSETS** | **$ 377** | **$ 377** | **$ 414** | **$ 42** | **$ 414** | **$ -** | ***0%*** |
| 1523 COMP SFTWR LEASE | - | - | - | - | - | | #DIV/0! |

| Madison (113)<br>Non-Personnel Expenses | Actual<br>FY17 | Actual<br>FY18 | Actual<br>FY19 | YTD<br>FY20 | Budget<br>FY21 | <br>FY22 | %<br>Change |
|---|---|---|---|---|---|---|---|
| 1524 EQUIP CAP LEASES | - | - | - | - | - | | #DIV/0! |
| **1520 CAP LEASE PAY.** | **$ -** | **$ -** | **$ -** | **$ -** | **$ -** | **$ -** | ***#DIV/0!*** |
| 1534 EQUIPMENT RENTAL | 3,015 | 2,506 | 1,488 | - | 1,116 | | *-25%* |
| 1535 BUILDING RENTALS | - | - | - | - | - | | *#DIV/0!* |
| 1539 BLDG RENT NON-STATE OWN | 32,920 | 32,126 | 34,110 | 28,975 | 76,014 | | *123%* |
| 1533 Comp. Software RENTAL | - | - | - | - | - | | *#DIV/0!* |
| **1530 OPER. LEASE PAY.** | **$ 35,935** | **$ 34,633** | **$ 35,598** | **$ 28,975** | **$ 77,130** | **$ -** | ***117%*** |
| 1541/1546 AGENCY SVC CHRG | 127 | 115 | 2,742 | 27 | 140 | | *-95%* |
| 1542 ELEC SVC CHARGE | 5,968 | 7,189 | 7,768 | 2,229 | 8,364 | | *8%* |
| 1543 REFUSE SVC CHRGS. | 727 | 1,124 | 799 | 218 | - | | *-100%* |
| 1544 WAT & SEW SVC CHRG. | - | - | - | - | - | | *#DIV/0!* |
| 1547 PRIVATE VENDOR SVC (EVA) | 10 | 36 | 31 | 3 | 18 | | *-41%* |
| **1540 SERVICES CHARGED** | **$ 6,832** | **$ 8,464** | **$ 11,340** | **$ 2,477** | **$ 8,522** | **$ -** | ***-25%*** |
| 1551 GEN LIAB. INS. | - | - | 112 | 109 | 109 | | *-3%* |
| 1553 PAY ST INSURANCE TRUST F | - | - | 171 | - | 171 | | *0%* |
| 1554 SURETY BONDS | - | - | 16 | 15 | 15 | | *-1%* |
| 1555 WORKMENS COMP | - | - | 3,348 | 3,195 | 3,195 | | *-5%* |
| **1550 INSURANCE - OPER** | **$ -** | **$ -** | **$ 3,646** | **$ 3,319** | **$ 3,490** | **$ -** | *-4%* |
| 1597 LATE PAYMENT COST | - | - | - | - | - | | *#DIV/0!* |
| 1599 INTRA-AGENCY RECOVER | - | - | - | - | - | | *#DIV/0!* |
| **1590 LATE PAYMENT PENALTY** | **$ -** | **$ -** | **$ -** | **$ -** | **$ -** | **$ -** | ***#DIV/0!*** |
| **1500 CONTINOUS CHARGES** | **$ 43,144** | **$ 43,474** | **$ 50,998** | **$ 34,813** | **$ 89,556** | **$ -** | ***76%*** |
| **2131 SITE IMPROVEMENT** | **$ -** | **$ -** | **$ -** | **$ -** | **$ -** | **$ -** | ***#DIV/0!*** |
| 2211/2216/2217/2218 COMPUTER | 264 | 1,164 | 501 | 160 | - | | *-100%* |
| **2210 COMPUTER EQUIP** | **$ 264** | **$ 1,164** | **$ 501** | **$ 160** | **$ -** | **$ -** | ***-100%*** |
| 2222 EDUCATIONAL EQUIP | - | - | - | - | - | | *#DIV/0!* |
| 2224 REFERENCE EQUIP | 62 | 348 | - | - | - | | *#DIV/0!* |
| **2220 EDUC & CULT. EQUIP.** | **$ 62** | **$ 348** | **$ -** | **$ -** | **$ -** | **$ -** | ***#DIV/0!*** |
| 2231 ELECTRONIC EQUIP | 657 | 567 | 1 | - | - | | *-100%* |
| 2233 VOICE AND DATE TRANS. | - | - | - | - | - | | *#DIV/0!* |
| **2230 ELEC. &PHOTO EQUIP** | **$ 657** | **$ 567** | **$ 1** | **$ -** | **$ -** | **$ -** | ***-100%*** |
| 2241 LAB EQUIPMENT | 1,399 | - | - | - | - | | *#DIV/0!* |
| 2242 MED. & DENT EQUIP. | 111 | 155 | - | - | - | | *#DIV/0!* |
| 2243 FIELD EQUIPMENT | - | - | - | - | - | | *#DIV/0!* |
| 2248 MED & LAB EQUIP IMP. | - | - | - | - | - | | *#DIV/0!* |
| **2240 MED & LAB EQUIP** | **$ 1,510** | **$ 155** | **$ -** | **$ -** | **$ -** | **$ -** | ***#DIV/0!*** |
| 2261 OFFICE APPUR | 293 | - | 19 | - | - | | *-100%* |
| 2262 OFFICE FURNITURE | 9,228 | 39,689 | 965 | - | - | | *-100%* |
| 2263 OFFICE INCIDENTALS | - | - | - | - | - | | *#DIV/0!* |
| 2264 OFFICE MACHINES | 3,792 | 4,095 | - | - | - | | *#DIV/0!* |
| **2260 OFFICE EQUIPMENT** | **$ 13,313** | **$ 43,784** | **$ 984** | **$ -** | **$ -** | **$ -** | ***-100%*** |
| 2271 HOUSEHOLD EQUIP | 222 | 555 | - | - | - | | *#DIV/0!* |
| 2274 NON-POW REP & MAIN. | - | - | - | - | - | | *#DIV/0!* |
| **2270 SPECIFIC EQUIPMENT** | **$ 222** | **$ 555** | **$ -** | **$ -** | **$ -** | **$ -** | ***#DIV/0!*** |
| **2282 FIXTURES** | **0** | **$ 155** | **$ 7** | **$ -** | **$ -** | **$ -** | ***-100%*** |
| **2200 TOTAL EQUIPMENT** | **$ 16,029** | **$ 46,728** | **$ 1,493** | **$ 160** | **$ -** | **$ -** | ***-100%*** |

| Madison (113) Non-Personnel Expenses | Actual FY17 | Actual FY18 | Actual FY19 | YTD FY20 | Budget FY21 | FY22 | % Change |
|---|---|---|---|---|---|---|---|
| Non-Personnel Total | $ 128,465 | $ 175,822 | $ 114,095 | $ 66,556 | $ 155,271 | $ - | 36% |

| Madison (113)<br>Personnel Expenses | Actual<br>FY17 | Actual<br>FY18 | Actual<br>FY19 | YTD<br>FY20 | Budget<br>FY21 | <br>FY22 | %<br>Change |
|---|---|---|---|---|---|---|---|
| 1111 EMPLOYEE RETIRE | 28,808 | 26,936 | 30,270 | 12,826 | 36,357 | | 20% |
| 1166 RETIRE DEFINED BENEFITS | 1,235 | 1,285 | 1,292 | 364 | 1,584 | | 23% |
| 1112 FICA FOR SALARIED | 17,517 | 15,237 | 18,530 | 7,889 | 18,902 | | 2% |
| 1113 FICA FOR WAGES | 241 | 96 | 125 | - | 1,035 | | 728% |
| 1114 GROUP INSURANCE | 2,899 | 2,681 | 3,062 | 1,278 | 3,294 | | 8% |
| 1115 MED/ HOSP/ INS | 50,838 | 46,734 | 45,191 | 18,394 | 71,892 | | 59% |
| 1116 RET. MED/HOSP/INS | 2,609 | 2,389 | 2,735 | 1,142 | 2,942 | | 8% |
| 1117 LONG-TERM DISABIL. INSUR. | 1,373 | 1,332 | 1,453 | 605 | 1,559 | | 7% |
| **1110 EMPLOYEE BENEFITS** | **$ 105,520** | **$ 96,690** | **$ 102,658** | **$ 42,499** | **$ 137,564** | | ***34%*** |
| 1123 SALARIES, CLASSIFIED | 238,390 | 207,173 | 233,205 | 100,494 | 251,434 | | 8% |
| 1125 Salaries/Overtime | 188 | 279 | - | - | - | | #DIV/0! |
| 1128 Salaries, Information Tech. | - | - | - | - | - | | #DIV/0! |
| 1138 DC MATCH | 1,257 | 1,333 | 1,277 | 560 | 1,900 | | 49% |
| **1120/1130 SALARIES** | **$ 239,834** | **$ 208,785** | **$ 234,482** | **$ 101,054** | **$ 253,334** | | ***8%*** |
| 1131 Bonuses & Incentives | 23 | 335 | 100 | - | - | | -100% |
| 1141 Wages, General | 3,168 | 1,254 | 17,076 | 7,246 | 13,524 | | -21% |
| 1153 SHORT-TERM DISABILITY | 2,612 | 649 | 921 | - | - | | -100% |
| 1158 Workers Comp | - | - | - | - | - | | #DIV/0! |
| 1162 SALARIES, A/L BAL. | 374 | 3,906 | 1,460 | - | - | | -100% |
| 1163 SALARIES, S/L BAL. | 616 | 293 | - | - | - | | #DIV/0! |
| 1164 SALARIES, Comp BAL. | - | 342 | 653 | - | - | | -100% |
| 1171 1172 1174 WTA - Trans Sev | - | - | - | - | - | | #DIV/0! |
| **1140/1150/1160 WAGES** | **$ 6,793** | **$ 6,779** | **$ 20,210** | **$ 7,246** | **$ 13,524** | **$ -** | ***-33%*** |
| 1198 INTERAGENCY RECOV. | - | - | | | - | | #DIV/0! |
| 1199 INTRA-AGENCY RECOV. | - | - | | | - | | #DIV/0! |
| **1190 INTERAGENCY** | | **$ -** | **$ -** | **$ -** | **$ -** | **$ -** | ***#DIV/0!*** |
| **1100 TOTAL PERSONAL SV** | **$ 352,147** | **$ 312,254** | **$ 357,350** | **$ 150,799** | **$ 404,422** | **$ -** | ***13%*** |

**Dana McClelland:** Employee that previously did not participate in our health insurance plan signed up for family coverage at $22,792

# Rappahannock Rapidan Health District

## FY21 Madison County Health Department

| | Position Title | Employee | Employee Status | % assigned | Funding Source |
|---|---|---|---|---|---|
| 1 | Environmental Health Specialist | Fortenberry, Susan | Classified | 100% | 100% Coop (66.63% State, 36.37% Local) |
| 2 | Office Support Specialist | Brown, E. Brown | Classified | 100% | 100% Coop (66.63% State, 36.37% Local) |
| 3 | Office Support Specialist | Gipson, Lorna | Wage | 100% | 100% Coop (66.63% State, 36.37% Local) |
| 4 | Public Health Nurse | Curtis, Margorie | Classified | 80% | 100% Coop (66.63% State, 36.37% Local) |
| 5 | Environmental Health Supervisor | Cook, Steven | Classified | 25% | 100% Coop (66.63% State, 36.37% Local) |
| 6 | Health Care Technician | Portillo, Lina | Classified | 10% | 100% Coop (66.63% State, 36.37% Local) |
| 7 | Office Service Supervisor | Gorman, Tanya | Classified | 20% | 100% Coop (66.63% State, 36.37% Local) |
| 8 | Nurse Practitioner | Bond, Jo | Classified | 13% | 100% Coop (66.63% State, 36.37% Local) |
| 9 | Public Health Nurse Supervisor | Flynn, Karen | Classified | 10% | 100% Coop (66.63% State, 36.37% Local) |
| 10 | Accountant | Atkins, Tammy | Classified | 11% | 100% Coop (66.63% State, 36.37% Local) |
| 11 | Business Manager | McClelland, Dana | Classified | 11% | 100% Coop (66.63% State, 36.37% Local) |
| 12 | Environmental Health Manager | Wright, Whitney | Classified | 11% | 100% Coop (66.63% State, 36.37% Local) |
| 13 | Environmental Health Technical Specialist - Food | Goddard, Vy | Classified | 11% | 100% Coop (66.63% State, 36.37% Local) |
| 14 | Environmental Health Technical Specialist - Onsite | Merten, Katherine | Classified | 11% | 100% Coop (66.63% State, 36.37% Local) |
| 15 | Fiscal Technician - Accounts Payable | Taylor, Debbie | Wage | 11% | 100% Coop (66.63% State, 36.37% Local) |
| 16 | Fiscal Technician - Accounts Receivable | Peters, Mike | Classified | 11% | 100% Coop (66.63% State, 36.37% Local) |
| 17 | Health Director | Kartchner, Wade | Classified | 11% | 100% Coop (66.63% State, 36.37% Local) |
| 18 | Information Technology Specialist | Malm, Anthoni | Classified | 11% | 100% Coop (66.63% State, 36.37% Local) |
| 19 | Nurse Manager | Donner, Paula | Classified | 11% | 100% Coop (66.63% State, 36.37% Local) |
| 20 | Population Health Coordinator | Achter, April | Classified | 11% | 100% Coop (66.63% State, 36.37% Local) |
| 21 | Procurement Specialist/Human Resource Asst. | Lickliter, Lorie | Classified | 11% | 100% Coop (66.63% State, 36.37% Local) |
| | | | | 5.9 | FTEs |
| 22 | Epidemiologist | Ferrell, Daniel | Classified | 11% | 100% Grant |
| 23 | Immunization Action Program Nurse | Johnson, Karen | Classified | 11% | 100% Grant |
| 24 | Local Emergency Coordinator | Hatter, Kathryn | Classified | 11% | 100% Grant |
| 25 | MRC Coordinator | Conner, Jessica | Classified | 6% | 100% Grant |
| 26 | WIC Nutritionist | Vacant | Classified | 11% | 100% Grant |
| 27 | WIC Nutritionist | Moya, Rebeca | Classified | 11% | 100% Grant |
| 28 | WIC Nutritionist | Roudabush, Carolyn | Classified | 11% | 100% Grant |
| 29 | WIC Program Manager | O'Connor, Ann | Classified | 11% | 100% Grant |
| | | | | 0.8 | FTEs |
| | | | | 6.7 | Total FTEs |
| | | | | | = Home office in Madison |

# MCHD Serves the Community Across The Life Span of Residents
(Data for FY2019)




- Served Through WIC per month = 140
- Private well applications = 54
- School admission physicals = 4
- Restaurant Inspections = 85
- Trigger Locks Distributed = 22
- Onsite Applications / Reviews = 99
- Nursing Home Admission Screenings = 24
- Cribs provided = 0
- Car seats provided = 37
- Vaccines Administered = 553
- Rabies exposure investigations = 57
- Infectious Disease Screens / Investigations = 42
- Family Planning Services = 171
- Vital Records Issued = 1,159

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE:** January 13, 2020

| IDENTIFICATION | |
|---|---|
| *Organization/Agency Name:* | Madison Free Clinic Inc. |
| *Street Name:* | 410 N. Main Street |
| *Mailing Address:* | PO Box 914 |
| *Agency Contact:* | Brenda Clements |
| *Telephone Number:* | 540.948.3667 or 540.729.4373 |
| *E-mail Address – Agency Contact* | bclements@madisonfreeclinic.org |
| *Agency's Web Address:* | www.madisonfreeclinic.org |
| *Federal Tax ID#:* | 311654015 |
| *Audit:* | [X] Yes [ ] No |

**PURPOSE/NARRATIVE**

*Missions and Goals:*

**Mission Statement**

The Madison Free Clinic, Inc. provides uninsured residents of Madison County, Virginia who meet the guidelines, to receive medical care and medications. The clinic also provides limited dental and vision care. We also provide nutritional counseling to those patients who may benefit from this guidance.

**Guidelines**

The Madison Free Clinic serves Madison County adults between 18-65 who fall below 300 percent of the Federal Poverty Level. We also have providers who can see children who are Medicaid pending.

**Vision**

The Madison Free Clinic is and will continue to be a safety net to ensure that all people in our community have access to healthcare. Our goals are to be able to provide more onsite services as well as remote services such as sign up events in outlying areas of our county.

***Experience and Accomplishments:***

The Madison Free Clinic has been caring for the uninsured and under insured residents of Madison County since July 1999. Last year (FY19), in addition to providing basic health care to our patients we provided $40,193.50 to restore the dental health of Madison County residents. We have budgeted $44,200 for FY20 and are on track to accomplish that goal.

***Benefits of Funding:*** Our patients are mostly uninsured residents who work but have no benefits. By keeping this population healthy we are greatly preventing the spread of infectious diseases as well as helping those individuals to maintain health so they can continue to work. Many of our patients work two and three jobs in order to pay their bills. A sickness left untreated could lead to loss of work and pay that would be catastrophic. Our dental patients are being seen locally by Dr. Jared Kleine. We are helping those whose teeth cannot be restored get dentures at Affordable Dentures in Charlottesville. This is important because poor dental health is linked directly to diabetes and heart disease. In addition, poor dental health impacts employability of those who suffer from missing or decaying teeth.

***Intention of Use:***

The Madison Free Clinic respectfully requests $5,000 to be designated for dental expenses. As you can see from the table below, dental services have become our largest area of need.

| | FY17 | FY18 | FY19 | FY20 Budgeted |
|---|---|---|---|---|
| Total services (000's) | 34 | 51 | 62 | 60 |
| Dental services (000's) | 6 | 27 | 40 | 44 |
| Dental % | 17.6% | 52.9% | 64.5% | 73.3% |

MFC anticipates a 10% increase in the dental budget for FY21. $5K from the County would represent a 10.3% match. We recently received a $5,000 grant from Delta Dental.

MFC wishes to thank the County for providing our current facility space. We recognize that considerations regarding our continued occupancy are unresolved at this juncture. MFC would gratefully accept a reasonable increase in our monthly rent that would allow us to remain in lieu of the above requested funding. We would hope the County would consider a three year lease agreement.

Thank you for your consideration.

| FUNDING | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☒ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>☐ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 5,000 |

Signature: Brenda A. Clements Title: Executive Director

Printed Name: Brenda A. Clements Date: 12/18/19

# MADISON FREE CLINIC, INC.

# CASH BASIS FINANCIAL STATEMENTS

# YEAR ENDED JUNE 30, 2018

ROBINSON, FARMER, COX ASSOCIATES

*A PROFESSIONAL LIMITED LIABILITY COMPANY CERTIFIED PUBLIC ACCOUNTANTS*

CHARLOTTESVILLE ▫ RICHMOND ▫ FREDERICKSBURG ▫ STAUNTON ▫ BLACKSBURG ▫ LOUISA

MADISON FREE CLINIC, INC.

CASH BASIS FINANCIAL STATEMENTS

YEAR ENDED JUNE 30, 2018

Table of Contents


| | Page |
|---|---|
| Independent Accountants' Review Report | 1 |
| *Financial Statements:* | |
| Statement of Assets and Net Assets - Cash Basis | 2 |
| Statement of Revenues, Expenses and Other Changes in Net Assets - Cash Basis | 3 |
| Statement of Cash Flows - Cash Basis | 4 |
| Statement of Functional Expenses - Cash Basis | 5 |
| Notes to Financial Statements | 6-8 |

# ROBINSON, FARMER, COX ASSOCIATES

*CERTIFIED PUBLIC ACCOUNTANTS* *A PROFESSIONAL LIMITED LIABILITY COMPANY*

## INDEPENDENT ACCOUNTANTS' REVIEW REPORT

**To the Board of Directors**
**Madison Free Clinic, Inc.**
**Madison, Virginia**

We have reviewed the accompanying financial statements of Madison Free Clinic, Inc. (a nonprofit organization), which comprise the statement of assets and net assets—cash basis as of June 30, 2018, and the related statements of revenues, expenses and other changes in net assets—cash basis, cash flows—cash basis and functional expenses—cash basis for the year then ended, and the related notes to the financial statements. A review includes primarily applying analytical procedures to management's financial data and making inquiries of management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as a whole. Accordingly, we do not express such an opinion.

### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the cash basis of accounting; this includes determining that the cash basis of accounting is an acceptable basis for the preparation of financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

### Accountants' Responsibility

Our responsibility is to conduct the review engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. Those standards require us to perform procedures to obtain limited assurance as a basis for reporting whether we are aware of any material modifications that should be made to the financial statements for them to be in accordance with the cash basis of accounting. We believe that the results of our procedures provide a reasonable basis for our conclusion.

### Accountants' Conclusion

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in accordance with the cash basis of accounting.

### Basis of Accounting

We draw attention to Note 1 of the financial statements, which describes the basis of accounting. The financial statements are prepared in accordance with the cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our conclusion is not modified with respect to this matter.

Robinson, Farmer, Cox Associates

Charlottesville, Virginia
December 14, 2018

- Financial Statements -

MADISON FREE CLINIC, INC.

Statement of Assets and Net Assets - Cash Basis
June 30, 2018

**ASSETS**

| | |
|---|---|
| Cash and cash equivalents | $ 187,413 |
| Beneficial interest in assets held by others | 27,108 |
| Total assets | $ 214,521 |

**NET ASSETS**

| | |
|---|---|
| Unrestricted | $ 214,521 |
| Total net assets | $ 214,521 |

See accompanying notes and independent accountants' review report.

MADISON FREE CLINIC, INC.

Statement of Revenues, Expenses and Other Changes in Net Assets - Cash Basis
Year Ended June 30, 2018

| Support and Revenue: | | Unrestricted |
|---|---|---|
| Support: | | |
| Grants | $ | 69,293 |
| Contributions - various | | 39,436 |
| Total support | $ | 108,729 |
| Revenue: | | |
| Interest income | $ | 1,710 |
| Vision reimbursement | | 847 |
| Miscellaneous | | 856 |
| Fundraising - special events | | 20,180 |
| Total revenue | $ | 23,593 |
| Total support and revenue | $ | 132,322 |
| Expenses: | | |
| Program expenses: | | |
| Private outpatient | $ | 90,417 |
| Supporting services: | | |
| Management and general | | 17,908 |
| Fundraising | | 6,678 |
| Total expenses | $ | 115,003 |
| Increase (decrease) in net assets | $ | 17,319 |
| Net assets, beginning of year | | 197,202 |
| Net assets, end of year | $ | 214,521 |

See accompanying notes and independent accountants' review report.

MADISON FREE CLINIC, INC.

Statement of Cash Flows - Cash Basis
Year Ended June 30, 2018

| | | |
|---|---|---|
| **Cash Flows from Operating Activities:** | | |
| Receipts from contributors - various | $ | 109,585 |
| Receipts from interest income | | 197 |
| Receipts from fundraising special events | | 20,180 |
| Payments to suppliers | | (68,830) |
| Payments to or on behalf of employees | | (45,326) |
| Net cash flows provided by (used for) operating activities | $ | 15,806 |
| Net increase (decrease) in cash and cash equivalents | $ | 15,806 |
| Cash and cash equivalents, beginning of year | | 171,607 |
| Cash and cash equivalents, end of year | $ | 187,413 |
| **Reconciliation of change in net assets to net cash provided by (used for) operating activities:** | | |
| Change in net assets | $ | 17,319 |
| Adjustments to reconcile change in net assets to cash provided by (used for) operating activities: | | |
| Change in beneficial interest asset | | (1,513) |
| Net cash provided by (used for) operating activities | $ | 15,806 |

See accompanying notes and independent accountants' review report.

MADISON FREE CLINIC, INC.

Statement of Functional Expenses - Cash Basis
Year Ended June 30, 2018

| | Program Services | Supporting Services | | |
|---|---|---|---|---|
| | Private Outpatient | Management and General | Fundraising | Total Expenses |
| Salaries | $ 29,459 | $ 10,521 | $ 2,104 | $ 42,084 |
| Payroll taxes | 2,269 | 811 | 162 | 3,242 |
| Total salaries and related expenses | $ 31,728 | $ 11,332 | $ 2,266 | $ 45,326 |
| Advertising | 360 | - | - | 360 |
| Conferences and meetings | - | 750 | - | 750 |
| Contractor services | 766 | - | - | 766 |
| Corporate fees | - | 25 | - | 25 |
| Dues | - | 150 | - | 150 |
| Fundraising | - | - | 4,412 | 4,412 |
| Healthcare | 30,513 | - | - | 30,513 |
| Insurance | - | 1,543 | - | 1,543 |
| Management fees | 4,231 | - | - | 4,231 |
| Miscellaneous | - | 565 | - | 565 |
| Office expense | - | 2,643 | - | 2,643 |
| Prescriptions | 20,413 | - | - | 20,413 |
| Professional fees | - | 900 | - | 900 |
| Telephone | 2,406 | - | - | 2,406 |
| Total expenses | $ 90,417 | $ 17,908 | $ 6,678 | $ 115,003 |

See accompanying notes and independent accountants' review report.

## NOTE 1 - ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Madison Free Clinic, Inc. operates as a voluntary not-for-profit organization located in Madison, Virginia, whose purpose is to provide medical visits and prescription medication to the indigent Madison County residents.

### Financial Statement Presentation:

The Organization is required to report information regarding its financial position and activities according to three classes of net assets based on the existence or absence of donor imposed restrictions as follows:

*Unrestricted net assets* - Net assets not subject to donor-imposed stipulations. At June 30, 2018, the Organization had unrestricted net assets of $214,521.

*Temporarily restricted net assets* - Net assets subject to donor-imposed stipulations that may or will be met either by actions of the Organization and/or the passage of time. At June 30, 2018, the Organization had no temporarily restricted net assets.

*Permanently restricted net assets* - Net assets subject to donor-imposed stipulations that they be maintained permanently by the Organization. At June 30, 2018, the Organization had no permanently restricted net assets.

### Basis of Accounting:

The Organization reports its financial activities on the cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted accounting principles. Support and revenue are recorded when received and expenses are recorded when paid, not when the obligation is incurred.

### Cash and Cash Equivalents:

For purposes of cash flows, cash and cash equivalents consists of all cash on hand and in banks and cash investment with maturities of three months or less from the date of acquisition.

### Contributions:

The Organization records contributions received as unrestricted, temporarily restricted, or permanently restricted support depending on the existence and/or nature of any donor restrictions.

All contributions are considered to be available for unrestricted use unless specifically restricted by the donor. Amounts received that are designated for future periods or restricted by the donor for specific purposes are reported as temporarily restricted or permanently restricted support that increases those net asset classes. When a temporary restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of revenues, expenses and other changes in net assets as net assets released from restrictions. Contributions received with donor-imposed restrictions that are met in the same year in which the contributions are received are classified as unrestricted contributions.

## NOTE 1 - ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES: (CONTINUED)

Functional Allocation of Expenses:

The costs of providing the various programs and supporting activities have been summarized on a functional basis in the statement of revenues, expenses and other changes in net assets. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

Income Taxes:

Madison Free Clinic, Inc. is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code and therefore has made no provision for federal income taxes in the accompanying financial statements. In addition, Madison Free Clinic, Inc. has been determined by the Internal Revenue Service not to be a "private foundation" within the meaning of Section 509(a) of the Internal Revenue Code. There was no unrelated business income for 2018.

## NOTE 2 - DONATED SERVICES AND FACILITIES:

A substantial number of volunteers have donated significant amounts of time in the Organization's program services and management activities. No amounts have been reflected in these financial statements for these donated services. Also, a local pharmacy provides medications to beneficiaries of the program at cost. No adjustment is made in these financial statements to reflect the market value of these medications. Finally, the County of Madison provides administrative office space to the Organization at no cost. The actual value of this office space is not reflected in these financial statements.

## NOTE 3 - CONCENTRATION OF CREDIT RISK:

Deposits are exposed to custodial credit risk if they are not covered by depository insurance and the deposits are (1) uncollateralized, (2) collateralized with securities held by the pledging financial institution, or (3) collateralized with securities held by the pledging financial institutions trust department or agent but not in the depositor's name.

At June 30, 2018, Madison Free Clinic, Inc. had no amounts in excess of the Federal Deposit Insurance Corporation limit.

## NOTE 4 - DATE OF MANAGEMENT REVIEW:

In preparing the financial statements, management has evaluated events and transactions for potential recognition or disclosure through December 14, 2018, the date the financial statements were available to be issued.

## NOTE 5 - FAIR VALUE MEASUREMENTS:

Fair value for investments is determined as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants at the measurement date. The three level fair value hierarchy prioritizes the inputs used to measure fair value. This hierarchy requires entities to maximize the use of observable inputs and minimize the use of unobservable inputs. Observable inputs are inputs that market participants would use in pricing the asset or liability based on market data obtained from independent sources. Unobservable inputs reflect assumptions that market participants would use in pricing the asset or liability based on the best information available in the circumstances. The three levels of inputs used to measure fair value are as follows:

- Level 1 – Quoted prices (unadjusted) in active markets for identical assets or liabilities.
- Level 2 – Observable inputs other than quoted prices included in Level 1, such as quoted prices for similar assets and liabilities in active markets; quoted prices for identical or similar assets and liabilities in markets that are not active; or other inputs that are observable or can be corroborated by observable market data.
- Level 3 – Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities. This includes certain pricing models, discounted cash flow methodologies and similar techniques that use significant unobservable inputs.

Inputs are used in applying the various valuation techniques and broadly refer to the assumptions that market participants use to make valuation decisions, including assumptions about risk.

The Organization is providing the following information related to its investments:

| | | Fair Value Measurements at Reporting Date Using | | |
|---|---|---|---|---|
| | Total 6/30/2018 | Quoted Prices in Active Markets for Identical Assets | Significant Other Observable Inputs | Significant Unobservable Inputs |
| Certificate of Deposit | $ 46,431 | $ 46,431 | $ - | $ - |
| Beneficial interest in assets held by others | 27,108 | - | 27,108 | - |
| Total | $ 73,539 | $ 46,431 | $ 27,108 | $ - |

## NOTE 6 - BENEFICIAL INTEREST IN AGENCY FUND HELD BY THIRD PARTY:

Madison Free Clinic, Inc. is the beneficiary under a Designated Agency Fund Agreement with Northern Piedmont Community Foundation. The agency fund has been recorded in accordance with the cash basis of accounting which states that if a community foundation receives assets from a nonprofit organization that specifies itself or its affiliate as the beneficiary, those assets are not considered a contribution to the foundation, regardless of the variance power of the foundation. The assets of the fund are included in the statement of financial position of Madison Free Clinic, Inc. as a beneficial interest in assets held by others. Distributions are to be paid upon the request of Madison Free Clinic, Inc. and the approval of the foundation, the latter not withheld without significant cause. In addition, the fund is charged a 1.0% administrative fee on the fund balance, to be paid quarterly.

See independent accountants' review report.

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: JUL 25 2003

MADISON FREE CLINIC INC
PO BOX 914
MADISON, VA 22727

Employer Identification Number:
31-1654015
DLN:
17053081729063
Contact Person:
ERIC J BERTELSEN ID# 31323
Contact Telephone Number:
(877) 829-5500
Public Charity Status:
170(b)(1)(A)(vi)

Dear Applicant:

Our letter dated JULY 1999, stated you would be exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, and you would be treated as a public charity during an advance ruling period.

Based on our records and on the information you submitted, we are pleased to confirm that you are exempt under section 501(c)(3) of the Code, and you are classified as a public charity under the Code section listed in the heading of this letter.

Publication 557, Tax-Exempt Status for Your Organization, provides detailed information about your rights and responsibilities as an exempt organization. You may request a copy by calling the toll-free number for forms, (800) 829-3676. Information is also available on our Internet Web Site at www.irs.gov.

If you have general questions about exempt organizations, please call our toll-free number shown in the heading between 8:00 a.m. - 6:30 p.m. Eastern time.

Please keep this letter in your permanent records.

Sincerely yours,

Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements

Letter 1050 (DO/CG)

Date of fiscal year end

June 30

# MADISON FREE CLINIC
# FY21 Budget

| | FY21 Budget |
|---|---|
| Ordinary Income/Expense | |
| Income | |
| Churches | 4,100 |
| Civic Donations | |
| Madison Board of Supervisors | 5,000 |
| Other Civic | 1,000 |
| Total Civic Donations | 6,000 |
| Direct Public Support | |
| Business Contributions | 4,000 |
| Give Local Piedmont | 3,000 |
| Individual Gifts | 20,000 |
| Total Direct Public Support | 27,000 |
| Fundraiser | |
| Donations | 12,000 |
| Silent Auction | 4,000 |
| Sponsor | 3,500 |
| Taste of the Mountains | 1,500 |
| Total Fundraiser | 21,000 |
| Grants | |
| Piedmont United Way | 4,600 |
| Va Association of Free Clinics | 51,000 |
| Total Grants | 55,600 |
| Indirect Public Support | |
| United Way, CFC Contributions | 1,000 |
| Total Indirect Public Support | 1,000 |
| Investments | |
| Interest-Savings, Short-term CD | 1,600 |
| Total Investments | 1,600 |
| Vision Reimbursement | 1,500 |
| Total Income | 117,800 |
| Expense | |
| Fundraising | 3,500 |
| Medical Services | |
| Dental Services | 48,620 |
| Flu Shots | 500 |
| Medical | 1,500 |
| Prescriptions | 15,000 |
| Total Medical Services | 65,620 |
| Operations | |
| Accounting Fees | 950 |
| Business Registration Fees | 100 |
| Computer Support | 1,200 |
| Conference, Convention, Meeting | 1,500 |
| Contract Services | |
| Outside Contract Services | 870 |
| Total Contract Services | 870 |
| Insurance - Liability, D and O | 760 |
| Insurance - Workers Comp | 430 |
| Memberships and Dues | 120 |
| Rent | 3,600 |
| Office Supplies | 1,230 |
| Postage, Mailing Service | 200 |
| Printing and Copying | 500 |
| Software | 150 |
| Telephone, Telecommunications | 2,560 |
| Total Operations | 14,170 |

# MADISON FREE CLINIC
# FY21 Budget

| | FY21 Budget |
|---|---|
| Payroll Expenses | |
| Medicare Expenses | 887 |
| Salaries and Wages | 61,193 |
| Social Security Expenses | 3,794 |
| Total Payroll Expenses | 65,874 |
| VAFC Mgt Fees | 5,000 |
| Visual Services | |
| Examination Fees | 1,100 |
| Frames | 560 |
| Lenses | 1,310 |
| Total Visual Services | 2,970 |
| Total Expense | 157,134 |
| Net Ordinary Income | (39,334) |
| Net Income | (39,334) |

# MADISON FREE CLINIC
## Statement of Activities - Budget vs. Actual
### July through December 2019

| | Jul - Dec 19 | Budget | $ Over Budget | % of Budget |
|---|---|---|---|---|
| Ordinary Income/Expense | | | | |
| Income | | | | |
| Churches | 541 | 4,100 | (3,559) | 13% |
| Civic Donations | | | | |
| COPN | 0 | 3,300 | (3,300) | 0% |
| Other Civic | 550 | 600 | (50) | 92% |
| Total Civic Donations | 550 | 3,900 | (3,350) | 14% |
| Direct Public Support | | | | |
| Business Contributions | 1,866 | 3,200 | (1,334) | 58% |
| Give Local Piedmont | 2,221 | 2,122 | 99 | 105% |
| Giving Tuesday | 0 | 500 | (500) | 0% |
| Individual Gifts | 4,549 | 20,000 | (15,451) | 23% |
| Total Direct Public Support | 8,636 | 25,822 | (17,186) | 33% |
| Fundraiser | | | | |
| Auction | 0 | 3,800 | (3,800) | 0% |
| Donations | 5,321 | 11,700 | (6,379) | 45% |
| Sponsor | 0 | 3,500 | (3,500) | 0% |
| Total Fundraiser | 5,321 | 19,000 | (13,679) | 28% |
| Grants | | | | |
| United Way | 112 | 4,600 | (4,488) | 2% |
| Va Association of Free Clinics | 28,171 | 34,000 | (5,829) | 83% |
| Total Grants | 28,283 | 38,600 | (10,317) | 73% |
| Indirect Public Support | | | | |
| Affiliated Org. Contributions | 62 | 0 | 62 | 100% |
| Total Indirect Public Support | 62 | 0 | 62 | 100% |
| Investments | | | | |
| Interest-Savings, Short-term CD | 1,672 | 1,600 | 72 | 105% |
| Total Investments | 1,672 | 1,600 | 72 | 105% |
| Total Income | 45,066 | 93,022 | (47,956) | 48% |
| Expense | | | | |
| Facilities and Equipment | | | | |
| Equip Rental and Maintenance | 61 | 0 | 61 | 100% |
| Total Facilities and Equipment | 61 | 0 | 61 | 100% |
| Fundraising | 913 | 4,500 | (3,587) | 20% |
| Medical Services | | | | |
| Dental Services | 17,093 | 44,200 | (27,108) | 39% |
| Flu Shots | 0 | 100 | (100) | 0% |
| Medical | 0 | 800 | (800) | 0% |
| Prescriptions | 4,612 | 12,000 | (7,388) | 38% |
| Total Medical Services | 21,704 | 57,100 | (35,396) | 38% |
| Medical Supplies | 9 | | | |
| Operations | | | | |
| Accounting Fees | 0 | 950 | (950) | 0% |
| Advertising Expenses | 0 | 2,590 | (2,590) | 0% |
| Business Registration Fees | 25 | 90 | (65) | 28% |
| Cleaning | 286 | 0 | 286 | 100% |
| Conference, Convention, Meeting | 245 | 1,230 | (985) | 20% |
| Contract Services | | | | |
| Outside Contract Services | 362 | 870 | (508) | 42% |
| Total Contract Services | 362 | 870 | (508) | 42% |

# MADISON FREE CLINIC
## Statement of Activities - Budget vs. Actual
### July through December 2019

| | Jul - Dec 19 | Budget | $ Over Budget | % of Budget |
|---|---|---|---|---|
| Insurance - Liability, D and O | 0 | 760 | (760) | 0% |
| Insurance - Workers Comp | 270 | 430 | (160) | 63% |
| Memberships and Dues | 50 | 110 | (60) | 45% |
| Office Supplies | 312 | 1,230 | (918) | 25% |
| Other Costs | 178 | 370 | (192) | 48% |
| Postage, Mailing Service | 180 | 330 | (150) | 55% |
| Printing and Copying | 0 | 500 | (500) | 0% |
| Rent | 500 | 0 | 500 | 100% |
| Repairs and Maintenance | 62 | 0 | 62 | 100% |
| Software | 770 | 1,100 | (330) | 70% |
| Telephone, Telecommunications | 1,307 | 2,560 | (1,253) | 51% |
| Travel | 795 | 500 | 295 | 159% |
| Total Operations | 5,341 | 13,620 | (8,279) | 39% |
| Payroll Expenses | | | | |
| Medicare Expenses | 515 | 887 | (372) | 58% |
| Salaries and Wages | 35,507 | 61,193 | (25,686) | 58% |
| Social Security Expenses | 2,201 | 3,794 | (1,593) | 58% |
| Total Payroll Expenses | 38,224 | 65,874 | (27,650) | 58% |
| VAFC Mgt Fees | 3,110 | 5,000 | (1,890) | 62% |
| Visual Services | | | | |
| Examination Fees | 711 | 1,100 | (389) | 65% |
| Frames | 89 | 560 | (471) | 16% |
| Lenses | 615 | 1,310 | (695) | 47% |
| Total Visual Services | 1,415 | 2,970 | (1,555) | 48% |
| Total Expense | 70,777 | 149,064 | (78,287) | 47% |
| Net Ordinary Income | (25,711) | (56,042) | 30,331 | 46% |
| Other Income/Expense | | | | |
| Other Expense | | | | |
| Ask My Accountant | 450 | | | |
| Total Other Expense | 450 | | | |
| Net Other Income | (450) | 0 | (450) | 100% |
| Net Income | (26,161) | (56,042) | 29,881 | 47% |

# MADISON FREE CLINIC
## Statement of Activities
### July 2018 through June 2019

| | Jul '18 - Jun 19 |
|---|---|
| Ordinary Income/Expense | |
| Income | |
| Churches | 4,443.20 |
| Civic Donations | |
| COPN | 3,277.72 |
| Madison Board of Supervisors | 2,500.00 |
| Other Civic | 602.25 |
| Total Civic Donations | 6,379.97 |
| Direct Public Support | |
| Business Contributions | 3,001.98 |
| Individual Gifts | 130,563.58 |
| Total Direct Public Support | 133,565.56 |
| Fundraiser | |
| Auction | 4,385.00 |
| Donations | 9,975.33 |
| Sponsor | 3,510.00 |
| Total Fundraiser | 17,870.33 |
| Grants | |
| American Woodmark | 1,000.00 |
| Delta Dental of Virginia Founda | 5,000.00 |
| Dominion Energy Charitable Foun | 1,000.00 |
| United Way | 9,465.37 |
| Va Association of Free Clinics | 46,369.55 |
| Total Grants | 62,834.92 |
| Indirect Public Support | |
| Affiliated Org. Contributions | 20.00 |
| Total Indirect Public Support | 20.00 |
| Investments | |
| Interest-Savings, Short-term CD | 1,148.71 |
| Total Investments | 1,148.71 |
| Total Income | 226,262.69 |
| Expense | |
| Facilities and Equipment | |
| Equipment | 38.95 |
| Total Facilities and Equipment | 38.95 |
| Fundraising | 4,665.82 |
| Medical Services | |
| Dental Services | 40,193.50 |
| Flu Shots | 54.00 |
| Medical | 744.80 |
| Prescriptions | 18,097.66 |
| Total Medical Services | 59,089.96 |
| Medical Supplies | 32.41 |
| Miscellaneous | 33.00 |
| Operations | |
| Accounting Fees | 900.00 |
| Advertising Expenses | 2,466.11 |
| Business Registration Fees | 85.00 |
| Conference, Convention, Meeting | 1,168.54 |
| Contract Services | |
| Outside Contract Services | 826.22 |
| Total Contract Services | 826.22 |

# MADISON FREE CLINIC
## Statement of Activities
July 2018 through June 2019

| | Jul '18 - Jun 19 |
|---|---|
| Insurance - Liability, D and O | 725.00 |
| Insurance - Workers Comp | 412.00 |
| Memberships and Dues | 100.00 |
| Office Supplies | 1,170.74 |
| Other Costs | 348.98 |
| Postage, Mailing Service | 310.68 |
| Software | 1,051.06 |
| Telephone, Telecommunications | 2,439.12 |
| Travel | 289.21 |
| Total Operations | 12,292.66 |
| Payroll Expenses | |
| Medicare Expenses | 889.89 |
| Salaries and Wages | 61,376.27 |
| Social Security Expenses | 3,805.33 |
| Total Payroll Expenses | 66,071.49 |
| VAFC Mgt Fees | 2,969.64 |
| Visual Services | |
| Examination Fees | 1,106.00 |
| Frames | 511.00 |
| Lenses | 1,187.00 |
| Total Visual Services | 2,804.00 |
| Total Expense | 147,997.93 |
| Net Ordinary Income | 78,264.76 |
| Net Income | **78,264.76** |

This organization does not receive funding from multiple localities.

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE: January 13, 2020**

| **IDENTIFICATION** | |
|---|---|
| *Organization/Agency Name*: | Piedmont Regional Dental Clinic |
| *Street Name:* | 13296 James Madison Highway |
| *Mailing Address:* | PO Box 151<br>Orange, VA 22960 |
| *Agency Contact:* | Mary C Foley, Executive Director |
| *Telephone Number:* | (540)661-0008 x6 |
| *E-mail Address – Agency Contact* | mary.foley@vaprdc.org |
| *Agency's Web Address:* | www.vaprdc.org |
| *Federal Tax ID#:* | 27-0625764 |
| *Audit:* | ☒Yes ☐No |

| **PURPOSE/NARRATIVE** |
|---|
| *Missions and Goals:* PRDC's mission is to make affordable dental care accessible to all residents of Virginia's Piedmont. |
| *Experience and Accomplishments:* PRDC has treated over 13, 600 patients since opening its doors in 2011. Our clinic provides care to over 1175 Madison residents from infants to seniors. We treat patients of all income levels but offer reduced fees to patients at or below **200%** of the federal poverty level (about $51,500 for a family of four). Over 90% of our patients receive Medicaid or qualify for reduced rates (we do not track household income for |

patients with commercial insurance). Less than .05% of our patients have household incomes above 200% of the FPL and are uninsured. PRDC maintained the 200% FPL eligibility threshold post-Medicaid expansion. Our nonprofit status and sliding scale fee schedule make it possible for many to receive dental care that would otherwise be financially impossible. Over 50% of our Madison patients use Medicaid to pay for their services. Only 13% of dentists in Virginia accept Medicaid because reimbursement rates average just 64% of usual and customary fees. It is as a nonprofit that we can afford to see an unlimited number of Medicaid patients: we depend on philanthropic support to cover unreimbursed costs.
To fulfill our mission, PRDC has created several programs designed to reach underserved patient populations in our area:

- PRDC started what is now one of Virginia's largest school-based dental exam programs, Smile Time, at Waverly-Yowell in 2012. One of PRDC's dentists and team visit the schools to provide exams and preventative care (i.e. cleanings, fluoride varnish and sealants) as well as detailed reports to parents on the state of their child's oral health. We have now examined over 5,425 Smile Time children in every primary and elementary school in Madison, Culpeper, Orange and Greene County as well as Head Start, Child Help, Sin Barreras and JACHIP. Over 90% of participating children use Medicaid to cover their care.
- We also run one of the largest free dental care events for low-income veterans in the Commonwealth. Most Americans do not realize that unless a veteran is homeless or 100% service-related disabled, they don't have a dental benefit once they separate from military service. Medicare doesn't provide a dental benefit either. Most of the veterans we care for each year are senior citizens. These veterans served our country in World War II, Korea, and Vietnam. We are also seeing more low-income younger vets from Afghanistan and Iraq. PRDC must raise approximately $20,000 each year from philanthropic sources to continue this program. Approximately 10% of the veterans participating in 2019 were from Madison County. In fact, one Madison County Korean War-era veteran was selected in 2018 to receive almost $5000 in additional care after the event, from a new grant earmarked for that purpose. In all, the 2019 "Our Turn To Serve" event provided $27,500 worth of oral health care to area veterans.
- Our region has experienced an influx of undocumented residents in recent years. If a child was not born in the United States, they are ineligible for Medicaid. Extreme poverty combined with zero dental care has created a human health crisis for which our hospitals are ill-equipped to care: they don't do dental care. PRDC pioneered a program funded by the Northern Piedmont Community Foundation to provide direct dental care for these children ineligible for Medicaid in Culpeper County. We are now in our third, very successful year of the program. In 2019 we applied to the BAMAWorks Fund of the Dave Matthews Band for funds to expand the program to include Madison, Orange, Greene, Louisa, Albemarle and Nelson Counties. In addition, we were recently awarded seed money from Dominion Energy to enable us to treat any qualified child (12 and under ineligible for Medicaid) residing in Virginia.

- PRDC's wait list for appointments is approaching three months: too long! In late December 2019 we were awarded a grant from the Virginia Health Care Foundation for $159,000 in dental equipment to equip five additional operatories in our Clinic. The grant is conditional on raising the estimated $100,000 it will take for leasehold improvements to build out the new operatories and install the equipment and ancillary facilities. We estimate these new operatories, and the additional general and pediatric dentists and hygienists we will be able to hire will help us drop our wait time to four-to-six weeks.

*Benefits of Funding:*
PRDC wishes to continue providing service to all residents of the Piedmont, particularly those that are underserved or low-income. We receive no state funding. To bridge the gap between what we receive from Medicaid and self-pay patient, we rely on donors like the County of Madison to help us chip away at the almost $100,000 we must raise each year philanthropically. The other three counties we serve (i.e. Culpeper, Greene, and Orange) also provide annual support to our programs because they realize the benefit of our services for their citizens. Not only is their relief of pain and improved health outcomes, but the costs to social service organizations and ambulance runs to the ER that are reduced or avoided make it good business to support all points on the health safety net in the Piedmont.

Please note that PRDC budgets are based on a July-June fiscal year. The final audit for the 2018/2019 year has been completed and I will forward a copy of the report to the County of Madison as soon as it is received.

*Intention of Use:* Providing low-cost dental services to low-income children, veterans, uninsured adults and senior citizens in Madison County.

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☒ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>☐ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 5000 |

Signature: Mary C Foley Title: Executive Director

Printed Name: Mary C. Foley Date: January 6, 2020

PIEDMONT
REGIONAL DENTAL CLINIC

# Supplemental Information[i]
# Piedmont Regional Dental Clinic

## Actual unique patients served in 2019[ii]

| Total | from Madison County |
|---|---|
| 3900 | 470 |

## Projected unique patients served in 2020[iii]

| | |
|---|---|
| 4134 | 500 |

## Projected unique patients served in 2021[iv]

| | |
|---|---|
| 4630 | 558 |

## Actual patient encounters (appointments) in 2019[v]

| | |
|---|---|
| 7551 | 1048 |

## Projected patient encounters (appointments) in 2020[vi]

| | |
|---|---|
| 8004 | 1110 |

## Projected patient encounters (appointments) in 2021[vii]

| | |
|---|---|
| 8964 | 1244 |

---

[i] Madison County patients are a subset of total patients  Every patient and/or encounter was only counted once within the category

[ii] Source:  Electronic Health Record System (actuals)

[iii] Projected 6% increase due to Clinic Expansion effective July 1, 2020

[iv] Projected 12% increase due to full year of Clinic Expansion

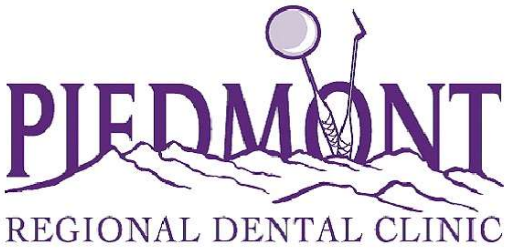
[v] Source Electronic Health Record System

[vi] Projected 6% increase due to Clinic Expansion effective July 1, 2020

[vii] Projected 12% increase due to full year of Clinic Expansion

# Management Report

## Piedmont Regional Dental Clinic
## For the period ended December 31, 2019




Prepared on
January 8, 2020

For management use only

# Table of Contents

Profit and Loss ..... 3

Balance Sheet ..... 7

# Profit and Loss

January - December 2019

| | Total |
|---|---|
| INCOME | |
| 4000 Production | 272.11 |
| 4001 Self Pay | |
| 4001.01 Self Pay - A | 281,490.10 |
| 4001.02 Self Pay - B | 260,598.23 |
| **Total 4001 Self Pay** | **542,088.33** |
| 4010 Medicaid | |
| 4010.01 Children | 327,162.81 |
| 4010.02 Adults | 361,427.89 |
| **Total 4010 Medicaid** | **688,590.70** |
| 4012 EARNED GRANT REVENUE | 48,629.93 |
| **Total 4000 Production** | **1,279,581.07** |
| 4010.04 Interest Medicaid | 15.91 |
| 4900 Adjmnts/Discnts/Rfnds/W-offs | |
| 4900.03 Medicaid Adjustments | -15,592.36 |
| 4900.04 Other Adjustments | -28,838.62 |
| 4900.07 Commercial Insurance Adjustments | -70,031.55 |
| 4900.90 Refunds | -89.00 |
| **Total 4900 Adjmnts/Discnts/Rfnds/W-offs** | **-114,551.53** |
| **Total Income** | **1,165,045.45** |
| COST OF GOODS SOLD | |
| 5010 Dental Supplies | |
| 5010.01 Oxygen/ Nitrous | 5,473.76 |
| 5010.02 Consumable Supplies | 90,822.55 |
| 5010.03 Equipment | 5,355.67 |
| **Total 5010 Dental Supplies** | **101,651.98** |
| 5020 Other Dental Expenses | |
| 5020.01 LaboratoryExpenses | 31,173.70 |
| 5020.02 Waste Disposal | 529.95 |
| 5020.03 Dental Equipment Maintenance | 5,045.40 |
| 5020.05 Licensing Costs | 107.90 |
| 5020.08 Dental IT | 11,833.95 |
| **Total 5020 Other Dental Expenses** | **48,690.90** |
| 5090 Dental Salaries & Services | |
| 5090.01 Dentist Salaries | 324,950.00 |
| 5090.02 Hygientist Salaries | 94,825.29 |
| 5090.03 Dental Assistant Salaries | 170,772.08 |
| **Total 5090 Dental Salaries & Services** | **590,547.37** |
| 5091 Contract Labor - COS | |
| 5091.01 Dentist - Contractual Services | 24,400.00 |
| 5091.02 Hygienist-Contractual Services | 1,239.00 |
| 5091.03 Dental Assistant- Contractual Services | 1,000.00 |

| | Total |
|---|---|
| **Total 5091 Contract Labor - COS** | **26,639.00** |
| 5093 Payroll Taxes & Benefits | |
| 5093.01 FICA/MC | 36,891.75 |
| 5093.02 SUTA | 2,570.51 |
| 5093.04 Medical Ins | 13,835.10 |
| 5093.05 Worker's Comp Ins | 2,525.63 |
| 5093.06 Accrued Vacation | 3,594.44 |
| 5093.07 Dental Insurance | 1,194.53 |
| 5093.08 Staff Educational Expense | 2,223.75 |
| **Total 5093 Payroll Taxes & Benefits** | **62,835.71** |
| 5094 VCU | |
| 5094.01 Salaries | 43,000.00 |
| **Total 5094 VCU** | **43,000.00** |
| **Total Cost of Goods Sold** | **873,364.96** |
| GROSS PROFIT | **291,680.49** |
| EXPENSES | |
| 6000 Operating Expenses | |
| 6000.01 Advertising and Promotion | 10,421.08 |
| 6000.02 Outreach | 115.06 |
| 6000.03 Bank Service, Merchant Account Fees and Finance Fees | 15,745.37 |
| 6000.04 Professional Fees | 33.90 |
| 6000.05 Consultant | 372.00 |
| 6000.08 Legal & Accounting | 14,828.08 |
| 6000.09 Recruiter | 1,221.93 |
| 6000.12 IT/Software | 13,420.96 |
| 6000.13 Memberships & Assn | 851.00 |
| 6000.14 Publications | 147.40 |
| **Total 6000 Operating Expenses** | **57,156.78** |
| 6100 Facilities and Office | |
| 6100.01 Rent | 60,000.00 |
| 6100.02 Telephone & Communications | 5,762.71 |
| 6100.03 Electric, water, sewer | 11,808.35 |
| 6100.04 Office Supplies and Equipment | 10,662.09 |
| 6100.05 Facility/Cleaning Supplies | 825.24 |
| 6100.06 Postage & Shipping | 1,170.62 |
| 6100.07 Stationery & Printing | 4,083.18 |
| 6100.08 Cleaning Services | 9,650.00 |
| 6100.09 Repair & Maintenance | 11,129.07 |
| **Total 6100 Facilities and Office** | **115,091.26** |
| 6200 Insurance | |
| 6200.01 Directors & Officers | 1,864.00 |
| 6200.02 Equipment Insurance | 3,045.00 |
| 6200.03 Commerical | 3,703.00 |
| **Total 6200 Insurance** | **8,612.00** |

| | Total |
|---|---|
| 7000 Admin Expenses | |
| 7001 Salaries | |
| 7001.01 Salary Expense - Admin | 233,111.84 |
| **Total 7001 Salaries** | **233,111.84** |
| 7100 Payroll Taxes & Benefits - Admin | 88.99 |
| 7100.01 FICA/MC | 17,431.20 |
| 7100.02 SUTA | 1,404.42 |
| 7100.04 Medical Insurances | 26,326.38 |
| 7100.05 Workers Comp Ins | 841.38 |
| 7100.06 Accrued Vacation | 944.17 |
| 7100.07 Dental Insurance Premiums | 2,032.11 |
| **Total 7100 Payroll Taxes & Benefits - Admin** | **49,068.65** |
| 7200 Other Admin Expenses | |
| 7200.02 Recruiting | 160.00 |
| 7200.03 Staff Appreciation | 1,838.58 |
| 7200.04 Staff Training | 2,667.21 |
| **Total 7200 Other Admin Expenses** | **4,665.79** |
| 7500 Travel | |
| 7500.01 Travel Mileage | 575.58 |
| 7500.03 Lodging | 183.28 |
| **Total 7500 Travel** | **758.86** |
| 7600 Staff Expenses | 88.99 |
| 7710 Vehicle Expenses | |
| 7710.01 Fuel | 146.96 |
| 7710.03 Repair and Maintenance | 1,212.03 |
| **Total 7710 Vehicle Expenses** | **1,358.99** |
| 7900 Depreciation Expense | |
| 7900.11 Depreciation-Dental Equipment | 8,677.89 |
| 7900.12 Depreciation-Office Equipment | 1,938.55 |
| **Total 7900 Depreciation Expense** | **10,616.44** |
| **Total 7000 Admin Expenses** | **299,669.56** |
| 8000 Miscellaneous Expenses | 44.97 |
| 8500 Taxes & Licenses | 166.29 |
| Equipment | |
| 5010.04 In-kind donation received | 31,388.58 |
| **Total Equipment** | **31,388.58** |
| **Total Expenses** | **512,129.44** |
| NET OPERATING INCOME | **-220,448.95** |
| OTHER INCOME | |
| 9020 Donations | |
| 9021 Individuals | 14,330.00 |
| 9022 Business | 3,325.95 |
| 9023 Foundations | 6,300.00 |
| 9023.01 Foundations Income Restricted | 22.64 |

| | Total |
|---|---|
| 9023.02 Foundations Unrestricted | 52,000.00 |
| **Total 9023 Foundations** | **58,322.64** |
| 9024 Clubs/Civic | 1,090.00 |
| 9025 Local Funds | |
| 9025.01 Town of Orange | 2,500.00 |
| 9025.02 County of Orange | 5,000.00 |
| 9025.03 County of Greene | 2,500.00 |
| 9025.04 Town of Gordonsville | 500.00 |
| 9025.05 Madison County | 2,500.00 |
| 9025.06 County of Culpeper | 1,500.00 |
| **Total 9025 Local Funds** | **14,500.00** |
| 9026 Faith Based Donations | 1,315.00 |
| 9027 In-Kind Donations | 42,151.48 |
| **Total 9020 Donations** | **135,035.07** |
| 9040 Grants | |
| 9040.03 Other Miscellaneous Income | 20.40 |
| **Total 9040 Grants** | **20.40** |
| 9990 Interest Income | 67.15 |
| 9999 Miscellaneous Income | 2,148.42 |
| **Total Other Income** | **137,271.04** |
| NET OTHER INCOME | **137,271.04** |
| NET INCOME | **$ -83,177.91** |

# Balance Sheet

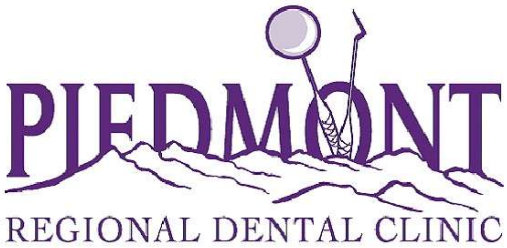
As of December 31, 2019

| | Total |
|---|---|
| ASSETS | |
| **Current Assets** | |
| **Bank Accounts** | |
| 1010 VNB-checking | -571.37 |
| 1010.01 Operating Account | -14,145.13 |
| 1010.04 Suspended Credit Account | 21,673.84 |
| 1010.05 Escrow Account | 14,430.27 |
| **Total 1010 VNB-checking** | **21,387.61** |
| 1050 Petty Cash | 181.50 |
| **Total Bank Accounts** | **21,569.11** |
| **Accounts Receivable** | |
| 1100 Accounts Receivables-Nonpatient | 8,749.99 |
| **Total Accounts Receivable** | **8,749.99** |
| **Other Current Assets** | |
| 1200 Accounts Receivable | |
| 1201 Medicaid | -715.81 |
| 1201.01 Medicaid | -23,977.30 |
| 1201.02 Self Pay | 2,630.75 |
| **Total 1201 Medicaid** | **-22,062.36** |
| 1202 Scale A | |
| 1202.01 Scale A - third party payors | 7,481.00 |
| 1202.02 Scale A -Self Pay Payment Plans | 830.50 |
| **Total 1202 Scale A** | **8,311.50** |
| 1204 Scale B (insured) | |
| 1204.01 Scale B - Insurance | 17,895.75 |
| 1204.03 Scale B - Self Pay | 7,452.21 |
| **Total 1204 Scale B (insured)** | **25,347.96** |
| **Total 1200 Accounts Receivable** | **11,597.10** |
| 1400 Prepaid Expenses | 3,152.87 |
| **Total Other Current Assets** | **14,749.97** |
| **Total Current Assets** | **45,069.07** |
| **Fixed Assets** | |
| 2000 Fixed Assets | |
| 2010 Mobile Dental Unit | 22,690.74 |
| 2010.01 Accumulated Depreciation-Mobile Dental Unit | -22,690.74 |
| **Total 2010 Mobile Dental Unit** | **0.00** |
| 2011 Dental Equipment | 245,793.60 |
| 2011.01 Accumulated Depreciation-Dental Equipment | -223,632.83 |
| **Total 2011 Dental Equipment** | **22,160.77** |
| 2011.10 Dental Equipment - o/s Orders | 2,414.00 |
| 2012 Office Equipment | 71,011.96 |
| 2012.01 Accumulated Depreciation-Office Equipment | -66,205.58 |

| | Total |
|---|---|
| **Total 2012 Office Equipment** | **4,806.38** |
| **Total 2000 Fixed Assets** | **29,381.15** |
| **Total Fixed Assets** | **29,381.15** |
| **TOTAL ASSETS** | **$74,450.22** |
| LIABILITIES AND EQUITY | |
| **Liabilities** | |
| **Current Liabilities** | |
| **Other Current Liabilities** | |
| 2060 Accrued Expenses | 0.00 |
| 2060.02 Accrued Vacation EOY | 9,112.12 |
| **Total 2060 Accrued Expenses** | **9,112.12** |
| 2500 Payroll Tax Payable | 0.00 |
| 2516 Employee AFLAC withheld | 513.46 |
| **Total 2500 Payroll Tax Payable** | **513.46** |
| 2517 Employee 403b withholding | 3,518.15 |
| 2600 Deferred Revenues | |
| 2600.10 Self Pay Prepaids - A Suspended Credit | 14,349.64 |
| 2600.15 Self Pay Prepaid - B Suspended Credits | 13,110.88 |
| 2600.16 Medicaid - Suspended Credits (Retractions) | 16,880.36 |
| 2600.30 Earned Grant Income | 24,338.71 |
| **Total 2600 Deferred Revenues** | **68,679.59** |
| 2700 VA Unclaimed Property | 1,160.00 |
| **Total Other Current Liabilities** | **82,983.32** |
| **Total Current Liabilities** | **82,983.32** |
| **Total Liabilities** | **82,983.32** |
| **Equity** | |
| 3000 Retained Earnings | 69,834.78 |
| Net Income | -78,367.88 |
| **Total Equity** | **-8,533.10** |
| **TOTAL LIABILITIES AND EQUITY** | **$74,450.22** |

# Management Report

## Piedmont Regional Dental Clinic
## For the period ended December 31, 2018




Prepared on
January 8, 2020

For management use only

# Table of Contents

Profit and Loss ..... 3

Balance Sheet ..... 7

# Profit and Loss

January - December 2018

| | Total |
|---|---|
| INCOME | |
| 4000 Production | |
| 4001 Self Pay | |
| 4001.01 Self Pay - A | 320,065.61 |
| 4001.02 Self Pay - B | 260,613.00 |
| **Total 4001 Self Pay** | **580,678.61** |
| 4010 Medicaid | |
| 4010.01 Children | 362,532.07 |
| 4010.02 Adults | 233,322.07 |
| **Total 4010 Medicaid** | **595,854.14** |
| 4012 EARNED GRANT REVENUE | 32,564.00 |
| **Total 4000 Production** | **1,209,096.75** |
| 4900 Adjmnts/Discnts/Rfnds/W-offs | |
| 4900.04 Other Adjustments | -41,312.38 |
| 4900.06 Bad Debt Write Off | 166.00 |
| 4900.07 Commercial Insurance Adjustments | -43,726.99 |
| **Total 4900 Adjmnts/Discnts/Rfnds/W-offs** | **-84,873.37** |
| **Total Income** | **1,124,223.38** |
| COST OF GOODS SOLD | |
| 5010 Dental Supplies | |
| 5010.01 Oxygen/ Nitrous | 5,899.00 |
| 5010.02 Consumable Supplies | 80,165.27 |
| 5010.03 Equipment | 5,857.93 |
| **Total 5010 Dental Supplies** | **91,922.20** |
| 5020 Other Dental Expenses | |
| 5020.01 LaboratoryExpenses | 29,145.98 |
| 5020.02 Waste Disposal | 698.19 |
| 5020.03 Dental Equipment Maintenance | 1,687.48 |
| 5020.04 Insurance - Dental Liability | 4,510.99 |
| 5020.05 Licensing Costs | 322.27 |
| 5020.06 Outside Dental Services | 2,934.80 |
| 5020.07 Other Costs of Services - COS | 1,161.66 |
| 5020.08 Dental IT | 6,379.38 |
| **Total 5020 Other Dental Expenses** | **46,840.75** |
| 5090 Dental Salaries & Services | |
| 5090.01 Dentist Salaries | 265,235.25 |
| 5090.02 Hygientist Salaries | 53,139.86 |
| 5090.03 Dental Assistant Salaries | 152,621.76 |
| **Total 5090 Dental Salaries & Services** | **470,996.87** |
| 5091 Contract Labor - COS | |
| 5091.01 Dentist - Contractual Services | 17,000.00 |
| 5091.02 Hygienist-Contractual Services | 5,346.59 |

| | Total |
|---|---|
| **Total 5091 Contract Labor - COS** | **22,346.59** |
| 5093 Payroll Taxes & Benefits | |
| 5093.01 FICA/MC | 32,644.38 |
| 5093.02 SUTA | 2,903.37 |
| 5093.04 Medical Ins | 10,717.97 |
| 5093.05 Worker's Comp Ins | 1,975.21 |
| 5093.06 Accrued Vacation | -90.71 |
| 5093.07 Dental Insurance | 861.50 |
| **Total 5093 Payroll Taxes & Benefits** | **49,011.72** |
| 5094 VCU | |
| 5094.01 Salaries | 90,200.00 |
| 5094.09 Student Stipend | 1,345.00 |
| **Total 5094 VCU** | **91,545.00** |
| **Total Cost of Goods Sold** | **772,663.13** |
| GROSS PROFIT | **351,560.25** |
| EXPENSES | |
| 6000 Operating Expenses | |
| 6000.01 Advertising and Promotion | 11,268.88 |
| 6000.02 Outreach | 234.95 |
| 6000.03 Bank Service, Merchant Account Fees and Finance Fees | 11,658.29 |
| 6000.05 Consultant | 1,200.00 |
| 6000.08 Legal & Accounting | 22,788.53 |
| 6000.09 Recruiter | 175.00 |
| 6000.12 IT/Software | 19,816.61 |
| 6000.13 Memberships & Assn | 491.00 |
| 6000.14 Publications | 290.65 |
| **Total 6000 Operating Expenses** | **67,923.91** |
| 6100 Facilities and Office | |
| 6100.01 Rent | 57,501.00 |
| 6100.02 Telephone & Communications | 5,240.48 |
| 6100.03 Electric, water, sewer | 15,210.66 |
| 6100.04 Office Supplies and Equipment | 7,875.21 |
| 6100.05 Facility/Cleaning Supplies | 718.65 |
| 6100.06 Postage & Shipping | 1,341.90 |
| 6100.07 Stationery & Printing | 7,946.14 |
| 6100.08 Cleaning Services | 12,151.25 |
| 6100.09 Repair & Maintenance | 6,879.92 |
| **Total 6100 Facilities and Office** | **114,865.21** |
| 6200 Insurance | |
| 6200.01 Directors & Officers | 2,640.20 |
| 6200.03 Commerical | 2,950.00 |
| **Total 6200 Insurance** | **5,590.20** |
| 7000 Admin Expenses | |
| 7001 Salaries | |

| | Total |
|---|---|
| 7001.01 Salary Expense - Admin | 170,507.92 |
| **Total 7001 Salaries** | **170,507.92** |
| 7100 Payroll Taxes & Benefits - Admin | |
| 7100.01 FICA/MC | 12,193.69 |
| 7100.02 SUTA | 840.11 |
| 7100.04 Medical Insurances | 23,112.50 |
| 7100.05 Workers Comp Ins | 664.42 |
| 7100.06 Accrued Vacation | 285.57 |
| 7100.07 Dental Insurance Premiums | 293.26 |
| **Total 7100 Payroll Taxes & Benefits - Admin** | **37,389.55** |
| 7200 Other Admin Expenses | |
| 7200.02 Recruiting | 219.95 |
| 7200.03 Staff Appreciation | 1,590.75 |
| 7200.04 Staff Training | 4,011.80 |
| **Total 7200 Other Admin Expenses** | **5,822.50** |
| 7500 Travel | |
| 7500.01 Travel Mileage | 1,157.51 |
| 7500.02 Travel Meals | 33.79 |
| 7500.03 Lodging | 367.68 |
| **Total 7500 Travel** | **1,558.98** |
| 7600 Staff Expenses | 80.00 |
| 7710 Vehicle Expenses | |
| 7710.01 Fuel | 330.18 |
| 7710.02 Auto Insurance | -294.00 |
| 7710.03 Repair and Maintenance | 777.30 |
| **Total 7710 Vehicle Expenses** | **813.48** |
| 7900 Depreciation Expense | |
| 7900.11 Depreciation-Dental Equipment | 14,935.70 |
| 7900.12 Depreciation-Office Equipment | 2,395.76 |
| **Total 7900 Depreciation Expense** | **17,331.46** |
| **Total 7000 Admin Expenses** | **233,503.89** |
| 8000 Miscellaneous Expenses | -1,154.91 |
| 8500 Taxes & Licenses | 164.34 |
| **Total Expenses** | **420,892.64** |
| NET OPERATING INCOME | **-69,332.39** |
| OTHER INCOME | |
| 9020 Donations | |
| 9021 Individuals | 11,757.05 |
| 9022 Business | 13,500.00 |
| 9023 Foundations | 7,572.57 |
| 9023.02 Foundations Unrestricted | 29.99 |
| **Total 9023 Foundations** | **7,602.56** |
| 9024 Clubs/Civic | 1,155.00 |
| 9025 Local Funds | 2,500.00 |

| | Total |
|---|---|
| 9025.01 Town of Orange | 2,500.00 |
| 9025.02 County of Orange | 5,000.00 |
| 9025.03 County of Greene | 2,500.00 |
| 9025.04 Town of Gordonsville | 1,000.00 |
| 9025.06 County of Culpeper | 1,500.00 |
| **Total 9025 Local Funds** | **15,000.00** |
| 9026 Faith Based Donations | 1,315.00 |
| **Total 9020 Donations** | **50,329.61** |
| 9040 Grants | |
| 9040.03 Other Miscellaneous Income | 9,364.73 |
| **Total 9040 Grants** | **9,364.73** |
| 9080 Restricted Funds | 4,000.00 |
| 9990 Interest Income | 122.66 |
| 9999 Miscellaneous Income | 424.93 |
| **Total Other Income** | **64,241.93** |
| OTHER EXPENSES | |
| 9991 Gain/Loss Disposal Assets | 1,864.32 |
| **Total Other Expenses** | **1,864.32** |
| NET OTHER INCOME | **62,377.61** |
| NET INCOME | **$ -6,954.78** |

# Balance Sheet

As of December 31, 2018

| | Total |
|---|---|
| ASSETS | |
| **Current Assets** | |
| **Bank Accounts** | |
| 1010 VNB-checking | 0.00 |
| 1010.01 Operating Account | 6,872.66 |
| 1010.04 Suspended Credit Account | 30,257.42 |
| 1010.05 Escrow Account | 10,811.43 |
| **Total 1010 VNB-checking** | **47,941.51** |
| 1050 Petty Cash | 165.00 |
| **Total Bank Accounts** | **48,106.51** |
| **Accounts Receivable** | |
| 1100 Accounts Receivables-Nonpatient | 5,000.00 |
| 1115 Collections | 1,252.25 |
| **Total Accounts Receivable** | **6,252.25** |
| **Other Current Assets** | |
| 1200 Accounts Receivable | |
| 1201 Medicaid | 0.00 |
| 1201.01 Medicaid | 47,958.53 |
| 1201.02 Self Pay | 2,294.94 |
| **Total 1201 Medicaid** | **50,253.47** |
| 1202 Scale A | |
| 1202.01 Scale A - third party payors | 4,427.00 |
| 1202.02 Scale A -Self Pay Payment Plans | 2,729.00 |
| **Total 1202 Scale A** | **7,156.00** |
| 1204 Scale B (insured) | |
| 1204.01 Scale B - Insurance | 16,128.69 |
| 1204.03 Scale B - Self Pay | 7,472.99 |
| **Total 1204 Scale B (insured)** | **23,601.68** |
| **Total 1200 Accounts Receivable** | **81,011.15** |
| 1400 Prepaid Expenses | 1,596.42 |
| **Total Other Current Assets** | **82,607.57** |
| **Total Current Assets** | **136,966.33** |
| **Fixed Assets** | |
| 2000 Fixed Assets | |
| 2010 Mobile Dental Unit | 22,690.74 |
| 2010.01 Accumulated Depreciation-Mobile Dental Unit | -22,690.74 |
| **Total 2010 Mobile Dental Unit** | **0.00** |
| 2011 Dental Equipment | 233,980.76 |
| 2011.01 Accumulated Depreciation-Dental Equipment | -214,954.94 |
| **Total 2011 Dental Equipment** | **19,025.82** |
| 2012 Office Equipment | 71,011.96 |
| 2012.01 Accumulated Depreciation-Office Equipment | -64,267.03 |

| | Total |
|---|---|
| **Total 2012 Office Equipment** | **6,744.93** |
| **Total 2000 Fixed Assets** | **25,770.75** |
| **Total Fixed Assets** | **25,770.75** |
| **TOTAL ASSETS** | **$162,737.08** |
| LIABILITIES AND EQUITY | |
| **Liabilities** | |
| **Current Liabilities** | |
| **Accounts Payable** | |
| 2050 Accounts Payable | 19,793.74 |
| **Total Accounts Payable** | **19,793.74** |
| **Other Current Liabilities** | |
| 2060 Accrued Expenses | 0.00 |
| 2060.02 Accrued Vacation EOY | 4,573.51 |
| **Total 2060 Accrued Expenses** | **4,573.51** |
| 2500 Payroll Tax Payable | 0.00 |
| 2516 Employee AFLAC withheld | 346.14 |
| **Total 2500 Payroll Tax Payable** | **346.14** |
| 2517 Employee 403b withholding | 1,917.66 |
| 2600 Deferred Revenues | |
| 2600.10 Self Pay Prepaids - A Suspended Credit | 13,062.75 |
| 2600.15 Self Pay Prepaid - B Suspended Credits | 8,342.97 |
| 2600.16 Medicaid - Suspended Credits (Retractions) | 14,380.50 |
| 2600.30 Earned Grant Income | 25,675.00 |
| **Total 2600 Deferred Revenues** | **61,461.22** |
| **Total Other Current Liabilities** | **68,298.53** |
| **Total Current Liabilities** | **88,092.27** |
| **Total Liabilities** | **88,092.27** |
| **Equity** | |
| 3000 Retained Earnings | 66,183.63 |
| Net Income | 8,461.18 |
| **Total Equity** | **74,644.81** |
| **TOTAL LIABILITIES AND EQUITY** | **$162,737.08** |

# PIEDMONT REGIONAL DENTAL CLINIC, INC.

## Financial Statements

For the Year Ended June 30, 2018

# Piedmont Regional Dental Clinic, Inc.

## Contents


| | Page |
|---|---|
| Independent Auditors' Report | 1 |
| Financial Statements | |
| Statement of Financial Position | 2 |
| Statement of Activities | 3 |
| Statement of Functional Expenses | 4 |
| Statement of Cash Flows | 5 |
| Notes to Financial Statements | 6 - 9 |

MOREY, JONES & PFEIFFER, P.C.
CERTIFIED PUBLIC ACCOUNTANTS

MEMBER
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

3314 N. Parham Road, Suite A
Henrico, Virginia 23294-4118
Telephone (804) 527-1400 • Fax (804) 527-1499

MEMBER
VIRGINIA SOCIETY OF
CERTIFIED PUBLIC ACCOUNTANTS

## INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Piedmont Regional Dental Clinic, Inc.
Orange, Virginia

We have audited the accompanying financial statements of Piedmont Regional Dental Clinic, Inc. (a nonprofit organization), which comprise the statement of financial position as of June 30, 2018, and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements.

### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

**Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Piedmont Regional Dental Clinic, Inc. as of June 30, 2018, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

*Morey, Jones & Pfeiffer, P.C.*
Richmond, Virginia
January 21, 2019

# PIEDMONT REGIONAL DENTAL CLINIC, INC.

## Statement of Financial Position
## June 30, 2018

### Assets

| | | |
|---|---|---|
| **Assets** | | |
| Cash and cash equivalents | $ | 42,338 |
| Accounts receivable | | 100,518 |
| Prepaid expenses | | 610 |
| Property and equipment, net | | 31,051 |
| **Total Assets** | | 174,517 |

### Liabilities and Net Assets

| | | |
|---|---|---|
| **Liabilities** | | |
| Accounts payable | | 21,008 |
| Accrued expenses | | 3,201 |
| Payroll tax withholdings | | 4,410 |
| Deferred revenues | | 43,563 |
| Refundable advances | | 36,151 |
| **Total Liabilities** | | 108,333 |
| **Net Assets** | | |
| Temporarily restricted | | 6,500 |
| Unrestricted | | 59,684 |
| **Total Net Assets** | | 66,184 |
| **Total Liabilities and Net Assets** | $ | 174,517 |

See Notes to Financial Statements.

# PIEDMONT REGIONAL DENTAL CLINIC, INC.

## Statement of Activities
## Year Ended June 30, 2018

| | Unrestricted | Temporarily Restricted | Total |
|---|---|---|---|
| **Support and Revenue** | | | |
| Contributions | $ 32,598 | $ 2,500 | $ 35,098 |
| Grants | 5,000 | 4,000 | $ 9,000 |
| Local funds | 9,500 | - | 9,500 |
| Program service fees | 1,033,430 | - | 1,033,430 |
| Investment income | 78 | - | 78 |
| Net assets released from restrictions | | | |
| Restrictions satisfied by payments | 1,000 | (1,000) | - |
| **Total Support and Revenue** | 1,081,606 | 5,500 | 1,087,106 |
| **Expenses** | | | |
| Program services | 983,260 | - | 983,260 |
| Supporting services | | | |
| Management and general | 144,359 | - | 144,359 |
| Fundraising | 19,948 | - | 19,948 |
| **Total Expenses** | 1,147,567 | - | 1,147,567 |
| **Increase (Decrease) in Net Assets** | (65,961) | 5,500 | (60,461) |
| **Net Assets** | | | |
| Beginning | 125,645 | 1,000 | 126,645 |
| Ending | $ 59,684 | $ 6,500 | $ 66,184 |

See Notes to Financial Statements.

# PIEDMONT REGIONAL DENTAL CLINIC, INC.



## Statement of Functional Expenses
## Year Ended June 30, 2018

| | Program Services | Supporting Services | | |
|---|---|---|---|---|
| | Dental Clinic | Management and General | Fundraising | Total Expenses |
| Compensation and related expenses | | | | |
| Dentist salaries | $ 242,154 | $ - | $ - | $ 242,154 |
| Dentist salaries - VCU | 87,900 | - | - | 87,900 |
| Dental assistant salaries | 152,763 | - | - | 152,763 |
| Hygienist salaries | 23,324 | - | - | 23,324 |
| Administrative salaries | 117,491 | 31,754 | 9,526 | 158,771 |
| Contract dentist services | 66,371 | - | - | 66,371 |
| Payroll taxes | 42,612 | 2,291 | 917 | 45,820 |
| Student stipend - VCU | 3,033 | - | - | 3,033 |
| Employee insurance and other benefits | 27,131 | 7,235 | 1,809 | 36,175 |
| | 762,779 | 41,280 | 12,252 | 816,311 |
| Advertising and promotions | - | 7,174 | 979 | 8,153 |
| Bank charges | - | 6,537 | - | 6,537 |
| Consultants | - | 390 | - | 390 |
| Directors and officers insurance | - | 1,874 | - | 1,874 |
| IT/software | - | 30,041 | - | 30,041 |
| Lab expenses | 27,713 | - | - | 27,713 |
| Liability insurance | 7,268 | - | - | 7,268 |
| License fees | 1,454 | - | - | 1,454 |
| Miscellaneous expense | - | 212 | - | 212 |
| Occupancy | | | - | |
| Rent | 37,801 | 10,500 | 4,201 | 52,502 |
| Repairs and maintenance | 9,774 | 2,002 | - | 11,776 |
| Utilities | 9,508 | 2,641 | 1,057 | 13,206 |
| Postage | 218 | 870 | - | 1,088 |
| Professional fees | 4,633 | 17,431 | - | 22,064 |
| Staff appreciation | - | 1,793 | - | 1,793 |
| Staff training | - | 1,900 | - | 1,900 |
| Supplies | | | | |
| Cleaning | 7,542 | 4,062 | - | 11,604 |
| Dental | 83,281 | - | - | 83,281 |
| Office | 3,642 | 8,290 | 629 | 12,561 |
| Taxes and licenses | - | 272 | - | 272 |
| Travel | 1,148 | 355 | 185 | 1,688 |
| Telephone and communications | 5,257 | 1,460 | 584 | 7,301 |
| Vehicle expenses | 308 | 41 | 61 | 410 |
| Total Expenses Before Depreciation and Loss on Disposal | 962,326 | 139,125 | 19,948 | 1,121,399 |
| Loss on asset disposal | 1,491 | 373 | - | 1,864 |
| Depreciation | 19,443 | 4,861 | - | 24,304 |
| Total Expenses | $ 983,260 | $ 144,359 | $ 19,948 | $ 1,147,567 |

See Notes to Financial Statements.

# PIEDMONT REGIONAL DENTAL CLINIC, INC.

## Statement of Cash Flows
## Year Ended June 30, 2018

| | |
|---|---|
| **Cash Flows From Operating Activities** | |
| Decrease in net assets | $ (60,461) |
| Adjustments to reconcile increase (decrease) in net assets to net cash provided by operating activities: | |
| Depreciation expense | 24,304 |
| Loss of disposal of assets | 1,864 |
| (Increase) decrease in: | |
| Accounts receivable | (7,767) |
| Prepaid expenses | 6,295 |
| (Increase) decrease in: | |
| Accounts payable and accrued expenses | (32,689) |
| Payroll tax withholdings | 4,410 |
| Deferred revenues | 7,262 |
| Refundable advances | 904 |
| **Net Cash used in Operating Activities** | (55,878) |
| **Cash Flows from Investing Activities** | |
| Purchase of property and equipment | (8,558) |
| **Net Cash used in Investing Activities** | (8,558) |
| **Net Decrease in Cash** | (64,436) |
| **Cash** | |
| Beginning of year | 106,774 |
| End of year | $ 42,338 |

See Notes to Financial Statements.

# PIEDMONT REGIONAL DENTAL CLINIC, INC.

## Notes to Financial Statements
## Year Ended June 30, 2018

### Note 1 - Nature of Activities

Piedmont Regional Dental Clinic, Inc. (the Clinic) is a nonprofit corporation organized under the laws of the Commonwealth of Virginia. The Clinic's mission is to provide affordable dental care to underserved residents in the Piedmont region of Virginia.

### Note 2 - Summary of Significant Accounting Policies

The summary of significant accounting policies of Piedmont Regional Dental Clinic, Inc. is presented to assist in understanding the Clinic's financial statements. These financial statements and notes are representations of the Clinic's management, who are responsible for their integrity and objectivity. These accounting policies conform to accounting principles generally accepted in the United States of America and have been consistently applied in the preparation of the financial statements.

*Basis of Presentation*

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

The Clinic reports amounts for total assets, liabilities and net assets in a statement of financial position, changes in net assets in a statement of activities and changes in its cash and cash equivalents in a statement of cash flows. The Clinic classifies net assets in three classes: unrestricted, temporarily restricted and permanently restricted based on the existence or absence of donor-imposed restrictions. There are currently no permanently restricted net assets.

Unrestricted net assets are not subject to donor-imposed restrictions and are presently available for use by the Clinic at the discretion of the Board of Directors. If the Board specifies a purpose where none has been stated by a donor, such assets are classified as Board-designated net assets.

*Cash and Cash Equivalents*

For purposes of the statement of cash flows, the Clinic considers all highly liquid debt instruments purchased with a maturity of three months or less to be cash equivalents.

*Use of Estimates*

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

*Deferred revenue*

Deferred revenue consists primarily of patient payments received in advance of the time the dental services are provided.

# PIEDMONT REGIONAL DENTAL CLINIC, INC.

## Notes to Financial Statements
## Year Ended June 30, 2018

### Note 2 - Summary of Significant Accounting Policies (Concluded)

*Property and Equipment*

The Clinic capitalizes property and equipment at acquisition cost. Donations of property and equipment are recorded at their estimated fair value. Such donations are recorded as unrestricted contributions unless the donor has restricted the asset to a specific purpose. Property and equipment are depreciated using declining-balance and straight-line methods over the following estimated useful lives:

| | Years |
|---|---|
| Mobile dental unit | 5 |
| Dental equipment | 7 |
| Office equipment | 5-7 |

*Support and Revenue*

Contributions received are recognized as revenues in the period received. All contributions and grants are considered to be available for unrestricted use unless specifically restricted by the donor/grantor. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the year in which the contributions are recognized. Amounts received that are restricted by the donor for specific purposes are reported as temporarily restricted or permanently restricted support which increases that net asset class. When restrictions are satisfied upon meeting program objectives, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

*Income Tax Status*

The Internal Revenue Service has determined that the Clinic is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. The Clinic's Form 990 for the years ending June 30, 2015-2017 are subject to examination by the IRS.

*Functional Allocation of Expenses*

The costs of providing the various programs and related supporting services have been presented in the Statement of Functional Expenses. Accordingly, certain costs have been allocated among programs and supporting services benefited.

*Advertising*

The Clinic follows the policy of charging the costs of advertising to expense as incurred.

*Evaluation of Subsequent Events*

The Clinic has evaluated subsequent events through January 21, 2019, the date which the financial statements were available to be issued.

# PIEDMONT REGIONAL DENTAL CLINIC, INC.

## Notes to Financial Statements
## Year Ended June 30, 2018

### Note 3 – Property and Equipment

Property and equipment consists of the following at June 30, 2018:

| | |
|---|---|
| Mobile dental unit | $ 22,691 |
| Dental equipment | 233,981 |
| Office equipment | 71,012 |
| | 327,684 |
| Less accumulated depreciation | (296,633) |
| Property and equipment, net | $ 31,051 |

Depreciation expense amounted to $24,304 for the year ended June 30, 2018 and is included in the statement of functional expenses.

### Note 4 – Temporarily Restricted Net Assets

Temporarily restricted net assets are available for the following purposes:

| | |
|---|---|
| Veteran's Day (2018) | $ 2,500 |
| Youth Empowered Solutions | 4,000 |
| | $ 6,500 |

### Note 5 - Concentration of Credit Risk

Financial instruments, which potentially subject the Clinic to concentrations of credit risk, consist principally of cash and receivables. The Clinic maintains its cash balances in a quality financial institution located in Orange, Virginia. These balances are insured by the Federal Deposit Insurance Corporation up to $250,000. There were no uninsured balances at June 30, 2018. Receivables consist principally of amounts billed to Virginia Medicaid for dental services provided to covered patients and the Clinic's ability to collect the amounts due is dependent on the economic viability of the Virginia Medicaid program.

### Note 6 – Related Party Transactions

The Clinic leases its building from an entity controlled by its Founder and Past Chairman. Effective April 1, 2018, the lease was on a month to month basis with a monthly rental of $5,000 plus utilities.

# PIEDMONT REGIONAL DENTAL CLINIC, INC.

## Notes to Financial Statements
## Year Ended June 30, 2018

### Note 7 – Employee Benefit Plan

During the year ended June 30, 2018, the Organization entered into a nonqualified 403(b) retirement savings plan for eligible employees. The employees are allowed to make contributions up to the maximum allowed by law. The Organization is not required to match employee contributions.

### Note 8 – Affiliation with Virginia Commonwealth University

In January, 2014 Piedmont Regional Dental Clinic entered into an affiliation with Virginia Commonwealth University Pediatric Residency Department to provide pediatric dental care to the Clinic's patients on a part-time basis. The Clinic serves as an extra educational site for the students while also providing care to its patients. The affiliation agreement allows one pediatric faculty member and one pediatric first or second year resident to provide dental services.

### Note 9 – Refundable Advances

The Clinic records grant awards accounted for as exchange transactions as refundable advances until related services are performed, at which time they are recognized as revenue. The activity in the refundable advances account are reported as follows:

| | |
|---|---|
| Refundable advances, beginning of year | $ 35,247 |
| Grant awards received | 35,000 |
| Grant funds earned by performance of services | (34,096) |
| Refundable advances, end of year | $36,151 |

Form **990**

Department of the Treasury
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

A For the 2017 calendar year, or tax year beginning 07/01/17 , and ending 06/30/18

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
PIEDMONT REGIONAL DENTAL CLINIC, INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) P.O. BOX 151

Room/suite

City or town, state or province, country, and ZIP or foreign postal code ORANGE VA 22960

D Employer identification number 27-0625764

E Telephone number 540-661-0008

G Gross receipts $ 1,087,116

F Name and address of principal officer:
RICHARD POWERS, CPA
PO BOX 308
CULPEPER VA 22701

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ vaprdc.org

H(c) Group exemption number ▶

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

L Year of formation: 2009

M State of legal domicile: VA

## Part I Summary

1 Briefly describe the organization's mission or most significant activities:
Piedmont Regional Dental Clinic, Inc is a non-profit organization dedicated to providing affordable dental services to underserved residents in the Piedmont region of Virginia.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

| | | | |
|---|---|---|---|
| Activities & Governance | 3 Number of voting members of the governing body (Part VI, line 1a) | 3 | 13 |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 13 |
| | 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) | 5 | 14 |
| | 6 Total number of volunteers (estimate if necessary) | 6 | 0 |
| | 7a Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0 |
| | b Net unrelated business taxable income from Form 990-T, line 34 | 7b | 0 |

| | | Prior Year | Current Year |
|---|---|---|---|
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | 204,288 | 53,598 |
| | 9 Program service revenue (Part VIII, line 2g) | 952,930 | 1,033,440 |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 50 | 78 |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 0 |
| | 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 1,157,268 | 1,087,116 |
| Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) | | 0 |
| | 14 Benefits paid to or for members (Part IX, column (A), line 4) | | 0 |
| | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 656,461 | 749,940 |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | | 0 |
| | b Total fundraising expenses (Part IX, column (D), line 25) ▶ 19,948 | | |
| | 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 508,007 | 397,627 |
| | 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) | 1,164,468 | 1,147,567 |
| | 19 Revenue less expenses. Subtract line 18 from line 12 | -7,200 | -60,451 |

| | | Beginning of Current Year | End of Year |
|---|---|---|---|
| Net Assets or Fund Balances | 20 Total assets (Part X, line 16) | 255,090 | 174,517 |
| | 21 Total liabilities (Part X, line 26) | 128,445 | 108,323 |
| | 22 Net assets or fund balances. Subtract line 21 from line 20 | 126,645 | 66,194 |

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

▶ Signature of officer Date

▶ RICHARD POWERS, CPA TREASURER
Type or print name and title

**Paid Preparer Use Only**

| Print/Type preparer's name | Preparer's signature | Date | Check ☐ if self-employed | PTIN |
|---|---|---|---|---|
| James E. Pfeiffer, CPA | James E. Pfeiffer, CPA | 03/25/19 | | P00626893 |

Firm's name ▶ Morey, Jones and Pfeiffer, P.C. Firm's EIN ▶ 54-1867966

Firm's address ▶ 3314 N Parham Rd Ste A Henrico, VA 23294-4118 Phone no. 804-527-1400

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990** (2017)

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III ☐

1 Briefly describe the organization's mission:

Piedmont Regional Dental Clinic, Inc is a non-profit organization dedicated to providing affordable dental services to underserved residents in the Piedmont region of Virginia.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses $ 983,260 including grants of $ ) (Revenue $ )

Providing affordable dental care to underserved residents in the Piedmont region of Virginia.

4b (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

4c (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

4d Other program services (Describe in Schedule O.)

(Expenses $ including grants of $ ) (Revenue $ )

4e Total program service expenses ▶ 983,260

## Part IV Checklist of Required Schedules

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A* | 1 | X | |
| 2 | Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)? | 2 | X | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I* | 3 | | X |
| 4 | **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II* | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III* | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I* | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II* | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III* | 8 | | X |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV* | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V* | 10 | | X |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | | |
| a | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI* | 11a | X | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII* | 11b | | X |
| c | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII* | 11c | | X |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX* | 11d | | X |
| e | Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X* | 11e | X | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X* | 11f | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII* | 12a | X | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional* | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E* | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV* | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV* | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV* | 16 | | X |
| 17 | Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions) | 17 | | X |
| 18 | Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II* | 18 | | X |
| 19 | Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III* | 19 | | X |

**Part IV Checklist of Required Schedules** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| 20a | Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II* | 21 | | X |
| 22 | Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III* | 22 | | X |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J* | 23 | | X |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a* | 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | **Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I* | 25a | | X |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I* | 25b | | X |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II* | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III* | 27 | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| a | A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV* | 28a | X | |
| b | A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV* | 28b | | X |
| c | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV* | 28c | X | |
| 29 | Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M* | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M* | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I* | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II* | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I* | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1* | 34 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* | 35b | | |
| 36 | **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2* | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI* | 37 | | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O. | 38 | X | |

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V ☐

| | | | | Yes | No |
|---|---|---|---|---|---|
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | 65 | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | | | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | 2a | 14 | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | | X | |
| | **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions) | | | | |
| 3a | Did the organization have unrelated business gross income of $1,000 or more during the year? | 3a | | | X |
| b | If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* | 3b | | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | | X |
| b | If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | | X |
| c | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | | |
| 6a | Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | | |
| 7 | **Organizations that may receive deductible contributions under section 170(c).** | | | | |
| a | Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | | |
| 8 | **Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | 8 | | | |
| 9 | **Sponsoring organizations maintaining donor advised funds.** | | | | |
| a | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | | |
| 10 | **Section 501(c)(7) organizations.** Enter: | | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | | | |
| 11 | **Section 501(c)(12) organizations.** Enter: | | | | |
| a | Gross income from members or shareholders | 11a | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | 11b | | | |
| 12a | **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041? | 12a | | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | | | |
| 13 | **Section 501(c)(29) qualified nonprofit health insurance issuers.** | | | | |
| a | Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O. | 13a | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | 13b | | | |
| c | Enter the amount of reserves on hand | 13c | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | | X |
| b | If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* | 14b | | | |

**Part VI Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI ..... X

## Section A. Governing Body and Management

| | | | | Yes | No |
|---|---|---|---|---|---|
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 1a | 13 | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | 1b | 13 | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | | X |
| 6 | Did the organization have members or stockholders? | 6 | | | X |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | | | X |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | |
| a | The governing body? | 8a | | X | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* | 9 | | | X |

## Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

| | | | Yes | No |
|---|---|---|---|---|
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | X |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | | X |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a | Did the organization have a written conflict of interest policy? *If "No," go to line 13* | 12a | | X |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* | 12c | | |
| 13 | Did the organization have a written whistleblower policy? | 13 | | X |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | | X |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| a | The organization's CEO, Executive Director, or top management official | 15a | | X |
| b | Other officers or key employees of the organization | 15b | | X |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | | |

## Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ None

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

C. RICHARD POWERS P.O. BOX 308

CULPEPER VA 22701 540-727-7550

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

Check if Schedule O contains a response or note to any line in this Part VII ☐

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) JACK THOMPSON, JR, DDS | 5.00 | | | | | | | | | |
| VICE PRESIDENT | 0.00 | X | | X | | | | 0 | 0 | 0 |
| (2) RICHARD POWERS, CPA | 5.00 | | | | | | | | | |
| TREASURER | 0.00 | X | | X | | | | 0 | 0 | 0 |
| (3) MITCHELL H. BERNSTEIN | 2.00 | | | | | | | | | |
| BOARD MEMBER | 0.00 | X | | | | | | 0 | 0 | 0 |
| (4) KAREN ALLEN | 2.00 | | | | | | | | | |
| SECRETARY | 0.00 | X | | X | | | | 0 | 0 | 0 |
| (5) SHANNON BUTLER, DDS | 2.00 | | | | | | | | | |
| BOARD MEMBER | 0.00 | X | | | | | | 0 | 0 | 0 |
| (6) TEGWYN BRICKHOUSE, DDS, PhD | 2.00 | | | | | | | | | |
| BOARD MEMBER | 0.00 | X | | | | | | 0 | 0 | 0 |
| (7) ANN G. TIDBALL | 2.00 | | | | | | | | | |
| BOARD MEMBER | 0.00 | X | | | | | | 0 | 0 | 0 |
| (8) KIM ISRINGHAUSEN, RDH, MPH | 2.00 | | | | | | | | | |
| PRESIDENT | 0.00 | X | | X | | | | 0 | 0 | 0 |
| (9) TOM REYNOLDS | 2.00 | | | | | | | | | |
| BOARD MEMBER | 0.00 | X | | | | | | 0 | 0 | 0 |
| (10) GERALD KLUFT, DDS | 2.00 | | | | | | | | | |
| BOARD MEMBER | 0.00 | X | | | | | | 0 | 0 | 0 |
| (11) CAMDEN BROWN, DMD | 2.00 | | | | | | | | | |
| BOARD MEMBER | 0.00 | X | | | | | | 0 | 0 | 0 |

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (12) WILLIAM O. DAHLKE, JR, DMD | 2.00 | | | | | | | | | |
| CHAIRMAN | 0.00 | X | | | | | | 0 | 0 | 0 |
| (13) ANDRE HINTERMANN | 2.00 | | | | | | | | | |
| PAST PRESIDENT | 0.00 | X | | | | | | 0 | 0 | 0 |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 1b Sub-total ▶ | | | | | | | | | | |
| c Total from continuation sheets to Part VII, Section A ▶ | | | | | | | | | | |
| d Total (add lines 1b and 1c) ▶ | | | | | | | | | | |

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 0

| | | Yes | No |
|---|---|---|---|
| 3 | Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual* | | X |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual* | | X |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person* | | X |

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII ☐

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
|---|---|---|---|---|---|---|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a Federated campaigns | 1a | | | | |
| | b Membership dues | 1b | | | | |
| | c Fundraising events | 1c | | | | |
| | d Related organizations | 1d | | | | |
| | e Government grants (contributions) | 1e | 9,500 | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f | 44,098 | | | |
| | g Noncash contributions included in lines 1a-1f: $ | | | | | |
| | h **Total.** Add lines 1a–1f ▶ | | 53,598 | | | |
| Program Service Revenue | | Busn. Code | | | | |
| | 2a Dental services- Medicaid | | 585,231 | 585,231 | | |
| | b Dental services-Self pay | | 448,209 | 448,209 | | |
| | c | | | | | |
| | d | | | | | |
| | e | | | | | |
| | f All other program service revenue | | | | | |
| | g **Total.** Add lines 2a–2f ▶ | | 1,033,440 | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) ▶ | | 78 | | | 78 |
| | 4 Income from investment of tax-exempt bond proceeds ▶ | | | | | |
| | 5 Royalties ▶ | | | | | |
| | | (i) Real | (ii) Personal | | | |
| | 6a Gross rents | | | | | |
| | b Less: rental exps. | | | | | |
| | c Rental inc. or (loss) | | | | | |
| | d Net rental income or (loss) ▶ | | | | | |
| | | (i) Securities | (ii) Other | | | |
| | 7a Gross amount from sales of assets other than inventory | | | | | |
| | b Less: cost or other basis & sales exps. | | | | | |
| | c Gain or (loss) | | | | | |
| | d Net gain or (loss) ▶ | | | | | |
| | 8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18 a | | | | | |
| | b Less: direct expenses b | | | | | |
| | c Net income or (loss) from fundraising events ▶ | | | | | |
| | 9a Gross income from gaming activities. See Part IV, line 19 a | | | | | |
| | b Less: direct expenses b | | | | | |
| | c Net income or (loss) from gaming activities ▶ | | | | | |
| | 10a Gross sales of inventory, less returns and allowances a | | | | | |
| | b Less: cost of goods sold b | | | | | |
| | c Net income or (loss) from sales of inventory ▶ | | | | | |
| | Miscellaneous Revenue | Busn. Code | | | | |
| | 11a | | | | | |
| | b | | | | | |
| | c | | | | | |
| | d All other revenue | | | | | |
| | e **Total.** Add lines 11a–11d ▶ | | | | | |
| | 12 **Total revenue.** See instructions. ▶ | | 1,087,116 | 1,033,440 | 0 | 78 |

## Part IX Statement of Functional Expenses

*Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).*

Check if Schedule O contains a response or note to any line in this Part IX ☐

| *Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.* | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|---|---|---|---|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | | | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | | | | |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | 667,945 | 626,665 | 31,754 | 9,526 |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 Other employee benefits | 36,175 | 27,131 | 7,235 | 1,809 |
| 10 Payroll taxes | 45,820 | 42,612 | 2,291 | 917 |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | | | | |
| c Accounting | 22,064 | 4,633 | 17,431 | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) | 30,431 | | 30,431 | |
| 12 Advertising and promotion | 8,153 | | 7,175 | 978 |
| 13 Office expenses | 7,132 | 3,860 | 2,643 | 629 |
| 14 Information technology | | | | |
| 15 Royalties | | | | |
| 16 Occupancy | 77,484 | 57,083 | 15,143 | 5,258 |
| 17 Travel | 1,688 | 1,148 | 355 | 185 |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | | | | |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 24,304 | 19,443 | 4,861 | |
| 23 Insurance | 9,142 | 7,268 | 1,874 | |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a Dental supplies | 83,281 | 83,281 | | |
| b Contract services-dentist | 66,371 | 66,371 | | |
| c Lab expenses | 27,713 | 27,713 | | |
| d Cleaning supplies | 11,604 | 7,543 | 4,061 | |
| e All other expenses | 28,260 | 8,509 | 19,105 | 646 |
| 25 Total functional expenses. Add lines 1 through 24e | 1,147,567 | 983,260 | 144,359 | 19,948 |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) | | | | |

## Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

| | | | (A) Beginning of year | | (B) End of year |
|---|---|---|---|---|---|
| Assets | 1 | Cash—non-interest bearing | 57,798 | 1 | 8,613 |
| | 2 | Savings and temporary cash investments | 48,980 | 2 | 33,726 |
| | 3 | Pledges and grants receivable, net | 19,900 | 3 | 15,430 |
| | 4 | Accounts receivable, net | 72,850 | 4 | 85,087 |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L | | 6 | |
| | 7 | Notes and loans receivable, net | | 7 | |
| | 8 | Inventories for sale or use | | 8 | |
| | 9 | Prepaid expenses and deferred charges | 6,905 | 9 | 610 |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 327,684 | | | |
| | b | Less: accumulated depreciation — 10b: 296,633 | 48,657 | 10c | 31,051 |
| | 11 | Investments—publicly traded securities | | 11 | |
| | 12 | Investments—other securities. See Part IV, line 11 | | 12 | |
| | 13 | Investments—program-related. See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | 15 | |
| | 16 | **Total assets.** Add lines 1 through 15 (must equal line 34) | 255,090 | 16 | 174,517 |
| Liabilities | 17 | Accounts payable and accrued expenses | 56,897 | 17 | 24,199 |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | 71,548 | 19 | 79,714 |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | | 25 | 4,410 |
| | 26 | **Total liabilities.** Add lines 17 through 25 | 128,445 | 26 | 108,323 |
| Net Assets or Fund Balances | | **Organizations that follow SFAS 117 (ASC 958), check here ▶ ☒ and complete lines 27 through 29, and lines 33 and 34.** | | | |
| | 27 | Unrestricted net assets | 125,645 | 27 | 59,694 |
| | 28 | Temporarily restricted net assets | 1,000 | 28 | 6,500 |
| | 29 | Permanently restricted net assets | | 29 | |
| | | **Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.** | | | |
| | 30 | Capital stock or trust principal, or current funds | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| | 33 | Total net assets or fund balances | 126,645 | 33 | 66,194 |
| | 34 | Total liabilities and net assets/fund balances | 255,090 | 34 | 174,517 |

## Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI ☐

| | | | |
|---|---|---|---|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 1,087,116 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 1,147,567 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -60,451 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 126,645 |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 66,194 |

## Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☐

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | 2a | | X |
| b | Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | 2b | X | |
| c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | 2c | X | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a | | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. | 3b | | |

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

# Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

**2017**

Open to Public Inspection

Name of the organization

PIEDMONT REGIONAL DENTAL CLINIC, INC

Employer identification number

27-0625764

## Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 ☒ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1–10 above (see instructions)) | (iv) Is the organization listed in your governing document? Yes | (iv) No | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|---|---|---|---|---|---|---|
| (A) | | | | | | |
| (B) | | | | | | |
| (C) | | | | | | |
| (D) | | | | | | |
| (E) | | | | | | |
| Total | | | | | | |

**Part II** **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

## Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 **Total.** Add lines 1 through 3 | | | | | | |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 **Public support.** Subtract line 5 from line 4. | | | | | | |

## Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|---|---|---|---|---|---|---|
| 7 Amounts from line 4 | | | | | | |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 11 **Total support.** Add lines 7 through 10 | | | | | | |

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

## Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2016 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test—2017.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test—2016.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2016.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

**Part III** **Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

## Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 218,315 | 165,555 | 300,143 | 204,288 | 53,598 | 941,899 |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 958,344 | 875,639 | 782,622 | 952,930 | 1,033,440 | 4,602,975 |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 **Total.** Add lines 1 through 5 | 1,176,659 | 1,041,194 | 1,082,765 | 1,157,218 | 1,087,038 | 5,544,874 |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 **Public support.** (Subtract line 7c from line 6.) | | | | | | 5,544,874 |

## Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|---|---|---|---|---|---|---|
| 9 Amounts from line 6 | 1,176,659 | 1,041,194 | 1,082,765 | 1,157,218 | 1,087,038 | 5,544,874 |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 34 | 55 | 37 | 50 | 78 | 254 |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | 34 | 55 | 37 | 50 | 78 | 254 |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 **Total support.** (Add lines 9, 10c, 11, and 12.) | 1,176,693 | 1,041,249 | 1,082,802 | 1,157,268 | 1,087,116 | 5,545,128 |

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

## Section C. Computation of Public Support Percentage

| | | |
|---|---|---|
| 15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) | 15 | 100.00 % |
| 16 Public support percentage from 2016 Schedule A, Part III, line 15 | 16 | 100.00 % |

## Section D. Computation of Investment Income Percentage

| | | |
|---|---|---|
| 17 Investment income percentage for **2017** (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from **2016** Schedule A, Part III, line 17 | 18 | % |

19a **33 1/3% support tests—2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support tests—2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

**Schedule B**
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

# Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

**2017**

**Name of the organization**

PIEDMONT REGIONAL DENTAL CLINIC, INC

**Employer identification number**

27-0625764

**Organization type** (check one):

| Filers of: | Section: |
|---|---|
| Form 990 or 990-EZ | [X] 501(c)( 3 ) (enter number) organization |
| | [ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation |
| | [ ] 527 political organization |
| Form 990-PF | [ ] 501(c)(3) exempt private foundation |
| | [ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | [ ] 501(c)(3) taxable private foundation |

Check if your organization is covered by the **General Rule** or a **Special Rule.**
**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

[ ] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year ▶ $

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
PIEDMONT REGIONAL DENTAL CLINIC, INC

Employer identification number
27-0625764

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|---|---|---|---|
| 1 | DELTA DENTAL OF VA FOUNDATION<br>4818 STARKEY ROAD<br>ROANOKE VA 24018 | $ 5,000 | Person [X]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| 2 | DAVID AND LINDA GIBSON<br>BULL RUN FARM<br>BOX 561<br>SOMERSET VA 22972 | $ 5,000 | Person [X]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| 3 | ANN AND BILL TIDBALL<br>(NEED ADDRESS) | $ 5,000 | Person [X]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II for noncash contributions.) |

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

# Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

**2017**

Open to Public Inspection

Name of the organization

PIEDMONT REGIONAL DENTAL CLINIC, INC

Employer identification number

27-0625764

## Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

| | | (a) Donor advised funds | (b) Funds and other accounts |
|---|---|---|---|
| 1 | Total number at end of year | | |
| 2 | Aggregate value of contributions to (during year) | | |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year | | |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

## Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of a historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | | Held at the End of the Tax Year |
|---|---|---|
| a | Total number of conservation easements | 2a |
| b | Total acreage restricted by conservation easements | 2b |
| c | Number of conservation easements on a certified historic structure included in (a) | 2c |
| d | Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register | 2d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

## Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $

(ii) Assets included in Form 990, Part X ▶ $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $

b Assets included in Form 990, Part X ▶ $

## Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

## Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

| | | Amount |
|---|---|---|
| c Beginning balance | 1c | |
| d Additions during the year | 1d | |
| e Distributions during the year | 1e | |
| f Ending balance | 1f | |

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

## Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|---|---|---|---|---|
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ▶ %
- b Permanent endowment ▶ %
- c Temporarily restricted endowment ▶ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

| | | Yes | No |
|---|---|---|---|
| (i) unrelated organizations | 3a(i) | | |
| (ii) related organizations | 3a(ii) | | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | | |

4 Describe in Part XIII the intended uses of the organization's endowment funds.

## Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|---|---|---|---|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | | | |
| d Equipment | | 327,684 | 296,633 | 31,051 |
| e Other | | | | |
| **Total.** Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶ | | | | 31,051 |

**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|---|---|
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other | | |
| (A) | | |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| **Total.** *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶ | | |

**Part VIII Investments—Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|---|---|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| **Total.** *(Column (b) must equal Form 990, Part X, col. (B) line 13.)* ▶ | | |

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|---|
| (1) | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| **Total.** *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶ | |

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1. (a) Description of liability | (b) Book value |
|---|---|
| (1) Federal income taxes | |
| (2) Payroll withholdings | 4,410 |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| **Total.** *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶ | 4,410 |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

## Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | | |
|---|---|---|---|---|
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | 1,087,116 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| a | Net unrealized gains (losses) on investments | 2a | | |
| b | Donated services and use of facilities | 2b | | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines **2a** through **2d** | | 2e | |
| 3 | Subtract line **2e** from line **1** | | 3 | 1,087,116 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines **4a** and **4b** | | 4c | |
| 5 | Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)* | | 5 | 1,087,116 |

## Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | | |
|---|---|---|---|---|
| 1 | Total expenses and losses per audited financial statements | | 1 | 1,147,567 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a | Donated services and use of facilities | 2a | | |
| b | Prior year adjustments | 2b | | |
| c | Other losses | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines **2a** through **2d** | | 2e | |
| 3 | Subtract line **2e** from line **1** | | 3 | 1,147,567 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines **4a** and **4b** | | 4c | |
| 5 | Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)* | | 5 | 1,147,567 |

## Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

# Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

**2017**

Open To Public Inspection

Name of the organization

PIEDMONT REGIONAL DENTAL CLINIC, INC

Employer identification number

27-0625764

## Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

| 1 | (a) Name of disqualified person | (b) Relationship between disqualified person and organization | (c) Description of transaction | (d) Corrected? Yes | (d) Corrected? No |
|---|---|---|---|---|---|
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |
| (6) | | | | | |

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ $

## Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

| | (a) Name of interested person | (b) Relationship with organization | (c) Purpose of loan | (d) Loan to or from the org.? To | (d) Loan to or from the org.? From | (e) Original principal amount | (f) Balance due | (g) In default? Yes | (g) In default? No | (h) Approved by board or committee? Yes | (h) Approved by board or committee? No | (i) Written agreement? Yes | (i) Written agreement? No |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| (1) | | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | | |
| (5) | | | | | | | | | | | | | |
| (6) | | | | | | | | | | | | | |
| (7) | | | | | | | | | | | | | |
| (8) | | | | | | | | | | | | | |
| (9) | | | | | | | | | | | | | |
| (10) | | | | | | | | | | | | | |
| Total | | | | | | ▶ $ | | | | | | | |

## Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

| | (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of assistance | (d) Type of assistance | (e) Purpose of assistance |
|---|---|---|---|---|---|
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |
| (6) | | | | | |
| (7) | | | | | |
| (8) | | | | | |
| (9) | | | | | |
| (10) | | | | | |

## Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sharing of org. revenues? Yes | (e) Sharing of org. revenues? No |
|---|---|---|---|---|---|
| (1) HINTERMANN FAMILY FOUNDATION | LANDLORD | 52,502 | BUILDING LEASE | | X |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |
| (6) | | | | | |
| (7) | | | | | |
| (8) | | | | | |
| (9) | | | | | |
| (10) | | | | | |

## Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

**2017**

Open to Public Inspection

Name of the organization

PIEDMONT REGIONAL DENTAL CLINIC, INC

Employer identification number

27-0625764

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

Draft copies of Form 990 are reviewed by the Chairman and Treasurer.

The completed Form 990 is reviewed by the full Board of Directors.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Financial reports will be made available upon request.

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: FEB 10 2010

PIEDMONT REGIONAL DENTAL CLINIC INC
C/O SEAN D. GREGG
P.O. BOX 871
ORANGE, VA 22960

Employer Identification Number:
27-0625764
DLN:
209295042
Contact Person:
DAVID SCHAEFF ID# 31691
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
September 30
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
July 20, 2009
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

PIEDMONT REGIONAL DENTAL CLINIC INC

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

Robert Choi

Robert Choi
Director, Exempt Organizations
Rulings and Agreements

Enclosure: Publication 4221-PC

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE:** January 13, 2020

| IDENTIFICATION | |
|---|---|
| *Organization/Agency Name*: | Rappahannock Rapidan Community Services |
| *Street Name:* | 15361 Bradford Road |
| *Mailing Address:* | P.O. Box 1568, Culpeper, VA 22701 |
| *Agency Contact:* | James H. LaGraffe |
| *Telephone Number:* | 540-825-3100 |
| *E-mail Address – Agency Contact* | jlagraffe@rrcsb.org |
| *Agency's Web Address:* | www.rrcsb.org |
| *Federal Tax ID#:* | 23-7238218 |
| *Audit:* | ☒Yes ☐No |

**PURPOSE/NARRATIVE**

*Missions and Goals:*

The mission of Rappahannock Rapidan Community Services (RRCS) is to improve the quality of life in Culpeper, Fauquier, Madison, Orange, and Rappahannock Counties by providing comprehensive behavioral health, developmental disability, substance use disorder, and aging services.

*Experience and Accomplishments:*

In 1972, the local governments of Planning District 9 (Culpeper, Fauquier, Madison, Orange, and Rappahannock) formed the Rappahannock-Rapidan Community Services Board. At this same time, the Planning District Commission recommended that the newly formed Community Services Board also provide services under Title III of the Older Americans Act. These events formed and created a combined area agency on aging and community services board – a unique organization at its inception and it continues to be the only such combines agency in Virginia. Its combined statutory mission rests with its Area Plan for Aging Services (Federal Older Americans Act), and Virginia Code 37.1 through its Performance Contract with the Virginia State Department of Behavioral Health and Disability Services.

Selected Accomplishments:

- Prescription drug disposal partnership with the VA Department of Health
- Implementation of Outpatient Based Opioid Treatment (OBOT) Program
- Expansion of young adult-focused programs to include Substance use disorder treatment
- Initiated Rapid Access in RRCS outpatient clinics for same-day triage.
- Goal is to provide follow-up treatment within two weeks of assessment
- Implementation of Warmline
- As an alternative to our crisis line, the Warmline is a consumer-run phone service providing peer support, resource referrals, and shared experiences of hope and recovery.
- Our Crisis Intervention Team provides a 40-hour specialized training program to local first responders and is designed to educate and prepare first responders to recognize signs and symptoms of mental illness in order to effectively respond to those experiencing a mental health crisis.
- Permanent Supportive Housing Grant to provide housing to 26 individuals who are homeless and diagnosed with a serious mental illness.
- Virginia Insurance Counseling Assistance Program (VICAP)
    - Saved community Medicare recipients $231,524.97
- Live Well Virginia
- 70 individuals have completed the chronic disease self-management education program, which is a series of free, small workshops for persons with any chronic conditions and for caregivers of persons with chronic conditions.

*Benefits of Funding:*

Funding of RRCS will enable the organization to continue to provide the much-needed services to the individuals in the region it serves. Services allow individuals to remain in their homes and helps prevent more costly alternatives

*Intention of Use:*

Community Services Boards (CSBs) are by statute the single points of entry into publicly funded mental health, developmental, and substance abuse services. Established by local governments pursuant to the Code of Virginia beginning in 1968.

- Community Based Mental Health Services
- Crisis Services
- Case Management
- State Hospital Diversion
- Hospital Aftercare
- Substance Use Disorders
- Prevention

Area Agencies on Aging (AAA) were created by a federal law in 1974 to help older Americans and their caregivers live quality lives with independence and dignity

- Age 60+, with attention to those who are isolated, risk of institutional placement, minorities and/or low income
- No Wrong Door lead agency
- Senior Centers offering Nutrition, socialization/ recreation, disease prevention and volunteer opportunities
- Services to support "Aging in Place"
- Housing Supports
- Transportation/ Mobility Management

Funding will ensure continuation of listed above needed community services. Additionally, funding will fulfill Code required local match requirements.

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☒ *General Community/Civic*<br>☐ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 126,332 |

Signature: _____ Title: Executive Director

Printed Name: James H. LaGraffe Date: January 7, 2019

52200

**Rappahannock Rapidan**
*Community Services*
**Programs that matter. People who care.**

January 9, 2020

Ms. Mary Jane Costello
Director of Finance/Asst. County Administrator
Madison County
302 Thrift Road
Madison, VA 22727

Dear Ms. Costello,

Please find enclosed our FY21 Budget Request application and accompanying documentation. Please feel free to contact me with any questions.

- IRS letter of exemption
- FY19 audited Financial Statements
- FY19 actual revenue & expenses (detailed)
- FY20 budgeted revenue & expenses
- FY19 actual clients served by county
    - Clients served are face to face contact based on data from our electronic health record
- FY20 budgeted clients served by county

Please note our FY21 proposed revenue and expenses, as well as projected clients served are not yet available.

Thank you for your consideration of our FY21 funding request. We appreciate the ongoing support Madison County provides to our agency.

Sincerely,

James H. LaGraffe
Executive Director

**Administrative Offices: P. O. Box 1568, Culpeper, VA 22701**
**Telephone: (540) 825-3100 TDD: (540) 825-7391 FAX: (540) 825-6245**
**www.rrcsb.org**

# RAPPAHANNOCK-RAPIDAN COMMUNTY SERVICES BOARD

## BUDGET: CONSOLIDATED Pre-Audit

### AS OF 6/30/19

| ACCOUNT DESCRIPTION | ANNUAL BUDGET | YTD ACTUAL | YTD BUDGET | YTD VARIANCE | *JUN* ACTUAL | *JUN* BUDGET | *JUN* VARIANCE |
|---|---|---|---|---|---|---|---|
| STATE REVENUES | 6,610,862 | 6,651,782 | 6,610,862 | 40,920 | 694,350 | 550,905 | 143,445 |
| LOCAL REVENUES | 2,352,894 | 2,508,999 | 2,352,894 | 156,105 | 275,237 | 196,075 | 79,163 |
| FEE REVENUES | 9,566,825 | 8,761,567 | 9,566,825 | (805,258) | 843,170 | 797,235 | 45,935 |
| FEDERAL REVENUES | 2,547,470 | 3,076,947 | 2,547,470 | 529,477 | 328,291 | 212,289 | 116,002 |
| OTHER MISC REVENUES | 748,100 | 897,575 | 748,100 | 149,475 | 104,274 | 62,342 | 41,932 |
| TRANSFER REVENUES | 4,623,806 | 4,511,105 | 4,623,806 | (112,701) | 321,660 | 385,317 | (63,657) |
| **REVENUE TOTAL** | **26,449,957** | **26,407,975** | **26,449,957** | **(41,982)** | **2,566,982** | **2,204,163** | **362,819** |
| | | | | | | | |
| PERSONNEL EXPENSES | 15,744,848 | 15,563,114 | 15,744,848 | (181,734) | 1,715,293 | 1,312,071 | 403,222 |
| STAFF DEVEL EXPENSES | 184,776 | 95,141 | 184,776 | (89,635) | 12,859 | 15,398 | (2,539) |
| FACILITY EXPENSES | 985,735 | 1,454,634 | 985,735 | 468,899 | 136,653 | 82,145 | 54,508 |
| EQUIP & SUPPLIES EXP | 2,304,752 | 2,191,129 | 2,304,752 | (113,623) | 293,758 | 192,063 | 101,695 |
| TRAVEL EXPENSES | 721,682 | 705,004 | 721,682 | (16,678) | 92,501 | 60,140 | 32,361 |
| CONSULT & CONTR EXP | 1,163,530 | 1,306,015 | 1,163,530 | 142,485 | 142,163 | 96,961 | 45,202 |
| OTHER MISC EXPENSES | 795,277 | 860,496 | 795,277 | 65,219 | 80,016 | 66,273 | 13,743 |
| TRANSFER EXPENSES | 4,549,357 | 4,436,657 | 4,549,357 | (112,700) | 315,456 | 379,113 | (63,657) |
| **EXPENSE TOTAL** | **26,449,957** | **26,612,190** | **26,449,957** | **162,233** | **2,788,699** | **2,204,163** | **584,536** |
| | | | | | | | |
| **NET SURPLUS/(DEFICIT)** | - | **(204,215)** | - | **(204,215)** | **(221,717)** | - | **(221,717)** |

| ACCOUNT DESCRIPTION | REVISED BUDGET | YTD ACTUAL | MTD ACTUAL | ENCUMBRANCES | AVAILABLE BUDGET | % USED |
|---|---|---|---|---|---|---|
| 4005 VDA OAA GENERAL | -18,282 | -62,069.00 | -14,361.00 | 0.00 | 43,787 | 339.50 |
| 4008 VDA GENERAL ASSEMBLY FUND | -391,656 | -357,097.00 | -112,060.00 | 0.00 | -34,559 | 91.20 |
| 4013 DEPT. MH/MR/SA GENERAL FU | -3,090,553 | -3,093,999.00 | -288,001.00 | 0.00 | 3,446 | 100.10 |
| 4041 PART C STATE FUNDS | -243,071 | -179,006.00 | -14,908.00 | 0.00 | -64,065 | 73.60 |
| 4112 MH CHILDRENS MOBILE CRISI | -70,000 | -69,999.96 | -5,833.33 | 0.00 | 0 | 100.00 |
| 4113 MH SPQM FUNDS | 0 | -59,400.00 | 0.00 | 0.00 | 59,400 | 100.00 |
| 4115 MH CIT (CRISIS INTERVENT | -253,534 | -309,214.00 | -51,126.00 | 0.00 | 55,680 | 122.00 |
| 4116 MH PERM SUPPORT HOUSING S | -337,588 | -366,774.00 | -34,082.00 | 0.00 | 29,186 | 108.60 |
| 4126 MH STATE YOUNG ADULT SMI | -449,709 | -449,709.00 | -37,473.00 | 0.00 | 0 | 100.00 |
| 4127 MH TELEPSYCHIATRY (RESTRI | -3,050 | -3,050.00 | -256.00 | 0.00 | 0 | 100.00 |
| 4130 MH LIPOS (HPR1 REGIONAL) | -95,000 | -48,500.00 | 0.00 | 0.00 | -46,500 | 51.10 |
| 4131 MH DISCHARGE ASSISTANCE ( | -304,445 | -298,990.00 | -23,428.00 | 0.00 | -5,455 | 98.20 |
| 4132 MH CSA NON-MANDATED | -103,741 | -103,741.00 | -8,635.00 | 0.00 | 0 | 100.00 |
| 4133 MH CHILDREN'S OUTPATIENT | -75,000 | -75,000.00 | -6,250.00 | 0.00 | 0 | 100.00 |
| 4134 MH PHARMACY FUNDS RESTRIC | -200,311 | -200,311.00 | -16,699.00 | 0.00 | 0 | 100.00 |
| 4136 MH REGIONAL FUNDS | -570,408 | -570,408.00 | -47,534.00 | 0.00 | 0 | 100.00 |
| 4137 MH LAW REFORM | -331,492 | -331,492.00 | -27,628.00 | 0.00 | 0 | 100.00 |
| 4138 SA FACILITY DIVERSION RES | -39,674 | -39,674.00 | -3,308.00 | 0.00 | 0 | 100.00 |
| 4139 SA STATE SARPOS RESTRICTE | -33,348 | -33,348.00 | -2,768.00 | 0.00 | 0 | 100.00 |
| 4A STATE REVENUES | -6,610,862 | -6,651,781.96 | -694,350.33 | 0.00 | 40,920 | 100.60 |
| 4140 CONTRIBUTIONS/PHILANTHROP | -62,500 | -172,378.01 | -21,925.27 | 0.00 | 109,878 | 275.80 |
| 4141 CONTRIBUTIONS-UNITED WAY | -5,500 | -14,376.62 | -32.74 | 0.00 | 8,877 | 261.40 |
| 4142 FUNDRAISING-CCS | -9,500 | -8,078.00 | -1,831.00 | 0.00 | -1,422 | 85.00 |
| 4143 FUNDRAISING-FSC | -10,000 | -8,574.67 | -445.00 | 0.00 | -1,425 | 85.70 |
| 4144 FUNDRAISING-MSC | -60,500 | -48,595.95 | -5,179.00 | 0.00 | -11,904 | 80.30 |
| 4145 FUNDRAISING-OSC | -6,500 | -7,804.86 | -1,082.03 | 0.00 | 1,305 | 120.10 |
| 4146 FUNDRAISING-RSC | -14,000 | -15,508.55 | -3,500.00 | 0.00 | 1,509 | 110.80 |
| 4149 FUNDRAISING-BRIDGES PROGR | 0 | -904.84 | -40.00 | 0.00 | 905 | 100.00 |
| 4151 TAX-CULPEPER COUNTY | -407,471 | -407,471.00 | 0.00 | 0.00 | 0 | 100.00 |
| 4152 TAX-FAUQUIER COUNTY | -475,225 | -475,215.00 | 0.00 | 0.00 | -10 | 100.00 |
| 4153 TAX-MADISON COUNTY | -81,467 | -81,467.00 | 0.00 | 0 | 0.00 | 0 100.00 |
| 4154 TAX-ORANGE COUNTY | -242,956 | -242,956.00 | 0.00 | 0 | 0.00 | 0 100.00 |
| 4155 TAX-RAPPAHANNOCK COUNTY | -52,857 | -52,857.00 | 0.00 | 0 | 0.00 | 0 100.00 |
| 4156 PROGRAM INCOME | -886,245 | -923,204.98 | -232,641.40 | 960 | 0.00 | 36,960 104.20 |
| 4157 BRADFORD RD LUNCH BREAKRO | -14,000 | -19,838.78 | -1,710.80 | 839 | 0.00 | 5,839 141.70 |

| | | | | | | |
|---|---|---|---|---|---|---|
| 4160 REP PAYEE REVENUE | -10,200 | -9,795.00 | -850.00 | 0.00 | -405 | 96.00 |
| 4161 F&A RENT REVENUE | 0 | -6,000.00 | -6,000.00 | 0.00 | 6,000 | 100.00 |
| 4190 LOCAL OTHER - TOWN GOVTS | -13,973 | -13,973.00 | 0.00 | 0.00 | 0 | 100.00 |
| 4C LOCAL REVENUES | -2,352,894 | -2,508,999.26 | -275,237.24 | 0.00 | 156,105 | 106.60 |
| 4212 MEDICAID | -8,291,783 | -7,551,575.82 | -757,803.19 | 0.00 | -740,207 | 91.10 |
| 4213 MEDICARE TRICARE CHAMPUS | 0 | -79,996.87 | -7,639.49 | 0.00 | 79,997 | 100.00 |
| 4214 DIRECT CLIENT | -280,744 | -387,260.38 | -40,094.78 | 0.00 | 106,516 | 137.90 |
| 4219 COURTS PROBATION JAIL | -14,854 | -11,210.00 | 0.00 | 0.00 | -3,644 | 75.50 |
| 4220 ANTHEM | -7,000 | -59,764.15 | -6,933.51 | 0.00 | 52,764 | 853.80 |
| 4224 OTHER | -409,600 | -423,223.08 | -16,424.49 | 0.00 | 13,623 | 103.30 |
| 4225 OTHER INSURANCE | -335,853 | -128,282.43 | -8,506.18 | 0.00 | -207,570 | 38.20 |
| 4227 OTHER (SARPOS) | -226,992 | -120,254.75 | -5,768.00 | 0.00 | -106,737 | 53.00 |
| 4E FEE REVENUES | -9,566,825 | -8,761,567.48 | -843,169.64 | 0.00 | -805,258 | 91.60 |
| 4310 OPT-R & YSAT FBG 93.788 | -315,000 | -631,971.00 | -84,971.00 | 0.00 | 316,971 | 200.60 |
| 4311 MH FBG SMI FUNDS | -257,166 | -290,160.00 | -24,180.00 | 0.00 | 32,994 | 112.80 |
| 4312 SA FBG PREVENTION 93.959 | -128,019 | -143,155.00 | -10,671.00 | 0.00 | 15,136 | 111.80 |
| 4313 SA FBG ALCOHOL DRUG | -584,769 | -282,971.00 | -35,381.00 | 0.00 | -301,798 | 48.40 |
| 4314 SA FBG CO-OCCURING | -81,964 | -81,964.00 | -6,834.00 | 0.00 | 0 | 100.00 |
| 4316 SA FBG SARPOS | -62,823 | -62,823.00 | -5,227.00 | 0.00 | 0 | 100.00 |
| 4317 MH FBG SED C & A | -25,974 | -25,668.00 | -2,128.00 | 0.00 | -306 | 98.80 |
| 4318 SA FEDERAL FACILITY DIVER | 0 | -5,500.00 | 1,738.00 | 0.00 | 5,500 | 100.00 |
| 4319 SA FBG WOMEN | 0 | -43,898.00 | -3,660.00 | 0.00 | 43,898 | 100.00 |
| 4321 SA FBG DETOX ALCOHOL/DRUG | 0 | -252,400.00 | -11,436.00 | 0.00 | 252,400 | 100.00 |
| 4326 MH FEDERAL YOUNG ADULT PR | -145,216 | -172,434.00 | -14,364.00 | 0.00 | 27,218 | 118.70 |
| 4341 PART C FEDERAL FUNDS | -127,867 | -90,184.00 | -7,508.00 | 0.00 | -37,683 | 70.50 |
| 4350 VHDA | -116,160 | -151,312.54 | -12,393.00 | 0.00 | 35,153 | 130.30 |
| 4355 SR MED PATROL V4A (CFDA93 | -3,441 | -1,720.50 | 0.00 | 0.00 | -1,721 | 50.00 |
| 4360 OTHER FEDERAL FUNDS | -1,004 | -2,728.00 | -292.00 | 0.00 | 1,724 | 271.70 |
| 4362 VDA - C D S M P | -15,000 | -6,325.00 | 0.00 | 0.00 | -8,675 | 42.20 |
| 4363 VDA - VICAP | -34,674 | -44,968.00 | -9,936.00 | 0.00 | 10,294 | 129.70 |
| 4369 VDA - TITLE VII | -9,894 | -21,687.00 | -2,742.00 | 0.00 | 11,793 | 219.20 |
| 4371 VDA TITLE IIIB | -222,490 | -268,974.00 | -38,155.00 | 0.00 | -46,484 | 120.90 |
| 4372 VDA TITLE IIIC1 | -186,124 | -226,658.00 | -28,845.00 | 0.00 | -40,534 | 121.80 |
| 4373 VDA TITLE IIIC2 | -103,207 | -115,301.00 | -16,962.00 | 0.00 | -12,094 | 111.70 |
| 4374 VDA TITLE IIID | -13,983 | -13,306.00 | -1,689.00 | 0.00 | -677 | 95.20 |
| 4376 VDA NSIP USDA | -34,441 | -38,829.00 | -4,981.00 | 0.00 | -4,388 | 112.70 |

| | | | | | | |
|---|---|---|---|---|---|---|
| 4377 VDA TITLE IIIE | -78,254 | -102,010.00 | -7,674.00 | 0.00 | 23,756 | 130.40 |
| 4G FEDERAL REVENUES | -2,547,470 | -3,076,947.04 | -328,291.00 | 0.00 | 529,477 | 120.80 |
| 4402 MISCELLANEOUS REVENUE | 0 | -3,377.96 | -377.96 | 0.00 | 3,378 | 100.00 |
| 4403 MOTOR POOL REVENUES | -102,000 | -103,085.70 | -8,906.55 | 0.00 | 1,086 | 101.10 |
| 4405 LOGISTICARE & SOUTHEASTRA | -575,000 | -620,756.19 | -48,661.89 | 0.00 | 45,756 | 108.00 |
| 4416 PROJECT LINK FAUQUIER CO | -69,600 | -69,600.00 | -5,800.00 | 0.00 | 0 | 100.00 |
| 4420 FARE BOX - PUBLIC RIDERSH | -1,500 | -2,532.00 | -218.00 | 0.00 | 1,032 | 168.80 |
| 4440 PAYROLL ADMIN FEES | 0 | -1,045.00 | -70.00 | 0.00 | 1,045 | 100.00 |
| 4820 VENDING MACHINE REVENUE | 0 | -252.92 | 0.00 | 0.00 | 253 | 100.00 |
| 4849 SALE OF SCRAP | 0 | -33,980.25 | -25.00 | 0.00 | 33,980 | 100.00 |
| 4850 INSURANCE CLAIMS / REFUND | 0 | -41,947.14 | -39,093.76 | 0.00 | 41,947 | 100.00 |
| 4851 INTEREST | 0 | -20,997.43 | -1,121.17 | 0.00 | 20,997 | 100.00 |
| 4J OTHER MISC REVENUES | -748,100 | -897,574.59 | -104,274.33 | 0.00 | 149,475 | 120.00 |
| 4501 PROGRAM TRANSFER | -4,623,806 | -4,241,915.06 | -254,363.59 | 0.00 | -381,891 | 91.70 |
| 4508 PART C TRANSFER | 0 | -269,190.00 | -67,296.00 | 0.00 | 269,190 | 100.00 |
| 4L TRANSFER REVENUES | -4,623,806 | -4,511,105.06 | -321,659.59 | 0.00 | -112,701 | 97.60 |
| 4210 FEE REVENUE WRITE-OFFS | 0 | -1,249,855.02 | -108,240.48 | 0.00 | 1,249,855 | 100.00 |
| 4N WRITE OFF REVENUES | 0 | -1,249,855.02 | -108,240.48 | 0.00 | 1,249,855 | 100.00 |
| 5110 SALARY - STAFF | 12,650,135 | 12,044,465.14 | 1,391,875.84 | 0.00 | 605,670 | 95.20 |
| 5111 SALARY - EMERGENCY SERVIC | 30,411 | 0.00 | 0.00 | 0.00 | 30,411 | 0.00 |
| 5112 SALARY - CLIENT | 29,123 | 29,723.12 | 3,244.47 | 0.00 | -600 | 102.10 |
| 5115 SALARY - OVERTIME | 498,000 | 479,779.66 | 60,960.15 | 0.00 | 18,220 | 96.30 |
| 5131 FICA - STAFF | 958,596 | 967,415.70 | 112,442.55 | 0.00 | -8,820 | 100.90 |
| 5132 FICA - EMERGENCY SERVICES | 2,000 | 0.00 | 0.00 | 0.00 | 2,000 | 0.00 |
| 5133 FICA - CLIENT | 1,915 | 2,274.30 | 248.30 | 0.00 | -359 | 118.80 |
| 5140 RETIREMENT - VRS | 87,006 | 72,337.04 | 10,774.30 | 0.00 | 14,669 | 83.10 |
| 5150 LIFE INSURANCE - VRS | 59,036 | 145,337.01 | 11,675.04 | 0.00 | -86,301 | 246.20 |
| 5151 LONG TERM DISABILITY | 35,000 | 35,188.62 | 2,683.10 | 0.00 | -189 | 100.50 |
| 5152 SHORT TERM DISABILITY | 57,000 | 76,977.63 | 8,985.76 | 0.00 | -19,978 | 135.00 |
| 5160 MEDICAL INSURANCE | 985,461 | 1,360,991.57 | 102,357.39 | 0.00 | -375,531 | 138.10 |
| 5163 MEDICAL HSA MATCH | 111,900 | 128,837.50 | 10,425.00 | 0.00 | -16,938 | 115.10 |
| 5170 UNEMPLOYMENT COMP - STATE | 37,291 | 33,798.18 | -12.00 | 0.00 | 3,493 | 90.60 |
| 5190 WORKMEN'S COMP. INS. - ST | 201,974 | 185,988.98 | -367.02 | 0.00 | 15,985 | 92.10 |
| 5A PERSONNEL EXPENSES | 15,744,848 | 15,563,114.45 | 1,715,292.88 | 0.00 | 181,734 | 98.80 |
| 5210 DUES & MEMBERSHIPS | 22,444 | 20,268.10 | 11,213.08 | 0.00 | 2,176 | 90.30 |
| 5220 WORKSHOPS | 142,456 | 70,531.06 | 1,397.00 | 0.00 | 71,925 | 49.50 |

| | | | | | | |
|---|---|---|---|---|---|---|
| 5250 SUBSCRIPTIONS | 8,728 | 2,539.11 | 249.30 | 0.00 | 6,189 | 29.10 |
| 5260 BOOKS/PERIODICALS | 11,148 | 1,802.53 | 0.00 | 0.00 | 9,345 | 16.20 |
| 5C STAFF DEVEL EXPENSES | 184,776 | 95,140.80 | 12,859.38 | 0.00 | 89,635 | 51.50 |
| 5310 RENT | 283,162 | 450,912.15 | 42,183.49 | 0.00 | -167,750 | 159.20 |
| 5311 RENT - OTHER | 3,412 | 4,518.16 | 0.00 | 0.00 | -1,106 | 132.40 |
| 5315 RENT - ORANGE APTS SUBSID | 14,388 | 10,424.00 | 974.00 | 0.00 | 3,964 | 72.40 |
| 5318 RENT - FMHA SUBSIDIES | 824 | 0.00 | 0.00 | 0.00 | 824 | 0.00 |
| 5320 UTILITIES | 264,451 | 254,600.79 | 27,871.73 | 0.00 | 9,850 | 96.30 |
| 5330 TELEPHONE | 252,231 | 274,400.18 | 47,794.48 | 353.50 | -22,523 | 108.90 |
| 5331 TELEPHONE - EMERGENCY SVC | 17,144 | 16,546.00 | 2,525.00 | 300.00 | 298 | 98.30 |
| 5340 REPAIRS & MAINTENANCE | 116,499 | 165,147.69 | 17,662.49 | 12,156.70 | -60,805 | 152.20 |
| 5350 FACILITY INSURANCE | 26,699 | 27,080.00 | -3,046.00 | 0.00 | -381 | 101.40 |
| 5355 LICENSURE FEES | 0 | 14.00 | 0.00 | 0.00 | -14 | 100.00 |
| 5370 RENOVATIONS | 6,925 | 250,991.00 | 687.50 | 9,990.00 | -254,056 | 3,768.70 |
| 5E FACILITY EXPENSES | 985,735 | 1,454,633.97 | 136,652.69 | 22,800.20 | -491,699 | 149.90 |
| 5410 EQUIPMENT OVER $5,000 | 5,500 | 81,045.91 | 0.00 | 600.00 | -76,146 | 1,484.50 |
| 5412 EQUIPMENT UNDER $5,000 | 42,728 | 31,292.85 | -9,460.95 | 1,158.79 | 10,276 | 75.90 |
| 5413 IT HARDWARE | 150,763 | 133,543.05 | 9,642.43 | 410.97 | 16,809 | 88.90 |
| 5414 VEHICLES | 85,000 | 63,927.00 | 0.00 | 0.00 | 21,073 | 75.20 |
| 5415 EHR ELECTRONIC HEALTH REC | 134,335 | 129,730.15 | 7,892.50 | 0.00 | 4,605 | 96.60 |
| 5416 MUNIS HR/ACCOUNTING SYSTE | 134,435 | 106,029.85 | 23,346.50 | 0.00 | 28,405 | 78.90 |
| 5417 IT SOFTWARE | 97,423 | 92,425.80 | 38,981.34 | 41,982.84 | -36,986 | 138.00 |
| 5418 IT SERVICE CONTRACTS | 72,924 | 54,291.93 | 4,731.32 | 2,478.78 | 16,153 | 77.80 |
| 5420 MAINTENANCE SERVICE/CONTR | 537,858 | 539,444.86 | 74,930.17 | 45,203.99 | -46,791 | 108.70 |
| 5430 OFFICE SUPPLIES | 43,291 | 36,366.50 | 2,928.59 | 2,780.87 | 4,144 | 90.40 |
| 5432 FACILITY SUPPLIES | 98,545 | 97,589.61 | 18,935.33 | 4,290.43 | -3,335 | 103.40 |
| 5433 FURNITURE & FIXTURES | 58,735 | 33,463.59 | -633.80 | 7,075.03 | 18,196 | 69.00 |
| 5440 IT SUPPLIES | 27,737 | 21,478.11 | 2,907.30 | 465.24 | 5,794 | 79.10 |
| 5450 EDUCATIONAL REC. SUPPLIES | 12,517 | 4,242.18 | 240.00 | 179.79 | 8,095 | 35.30 |
| 5457 SHELF STABLE MEALS | 30,240 | 12,810.00 | 0.00 | 15,834.00 | 1,596 | 94.70 |
| 5458 FROZEN MEALS | 65,904 | 70,597.00 | 11,269.00 | 0.00 | -4,693 | 107.10 |
| 5459 NUTRITIONAL SUPPLMT (ENSU | 1,781 | 4,396.09 | 1,054.50 | 0.00 | -2,615 | 246.80 |
| 5460 FOOD | 708,086 | 472,179.07 | 71,509.05 | 339.53 | 235,567 | 66.70 |
| 5461 RECOGNITION | 112,149 | 85,214.63 | 9,056.17 | 0.00 | 26,934 | 76.00 |
| 5470 MEDICAL SUPPLIES DRUGS | 185,399 | 97,502.24 | 23,557.87 | 17,985.99 | 69,911 | 62.30 |
| 5471 MEDICAL EXAMS | 19,402 | 23,558.74 | 2,871.25 | 0.00 | -4,157 | 121.40 |

| | | | | | | |
|---|---|---|---|---|---|---|
| 5G EQUIP & SUPPLIES EXP | 2,624,752 | 2,191,129.16 | 293,758.57 | 140,786.25 | 292,837 | 88.80 |
| 5510 STAFF TRAVEL | 121,853 | 102,969.97 | 21,648.80 | 0.00 | 18,883 | 84.50 |
| 5512 BOARD MEMBERS TRAVEL | 1,607 | 338.08 | 0.00 | 0.00 | 1,269 | 21.00 |
| 5519 VEHICLE LEASE | 85,546 | 102,416.06 | 7,706.09 | 0.00 | -16,870 | 119.70 |
| 5520 MOTOR POOL | 102,000 | 102,896.90 | 8,906.55 | 0.00 | -897 | 100.90 |
| 5521 VEHICLE FUEL & OIL | 206,800 | 236,887.17 | 39,746.91 | 0.00 | -30,087 | 114.50 |
| 5522 VEHICLE TIRES | 13,728 | 11,378.94 | 0.00 | 2,799.00 | -450 | 103.30 |
| 5523 VEHICLE PARTS & LABOR | 78,166 | 68,120.65 | 9,789.25 | 175.00 | 9,870 | 87.40 |
| 5530 VEHICLE INSURANCE | 40,664 | 41,656.00 | 0.00 | 0.00 | -992 | 102.40 |
| 5540 EMPLOYEE FOOD & LODGING | 56,290 | 25,281.21 | 2,939.65 | 0.00 | 31,009 | 44.90 |
| 5542 EMPLOYEE MEALS WITH CLIEN | 5,409 | 8,264.28 | 1,120.93 | 0.00 | -2,855 | 152.80 |
| 5545 PARKING & TOLLS | 619 | 602.16 | 43.00 | 0.00 | 17 | 97.30 |
| 5550 BOARD MEMBERS REIMBURSEME | 9,000 | 4,193.00 | 600.00 | 0.00 | 4,807 | 46.60 |
| 5J TRAVEL EXPENSES | 721,682 | 705,004.42 | 92,501.18 | 2,974.00 | 13,704 | 98.10 |
| 5610 AUDIT ACCOUNTING SERVICES | 33,681 | 22,200.00 | 0.00 | 0.00 | 11,481 | 65.90 |
| 5620 INFO TECHNOLOGY SERVICES | 6,588 | 1,821.10 | 660.80 | 1,178.70 | 3,588 | 45.50 |
| 5630 LEGAL SERVICES | 15,892 | 30,611.50 | 2,475.00 | 0.00 | -14,720 | 192.60 |
| 5640 CONTRACTUAL - PSYCH SERVI | 232,770 | 385,584.25 | 62,765.00 | 0.00 | -152,814 | 165.70 |
| 5650 CONTRACTUAL - ITC | 172,832 | 177,136.53 | 29,794.00 | 0.00 | -4,305 | 102.50 |
| 5660 CONTRACTUAL - CLIENT SERV | 3,780 | 4,576.37 | 263.13 | 0.00 | -796 | 121.10 |
| 5665 SOC/REC EXPENSES | 56,000 | 48,084.40 | 6,141.03 | 0.00 | 7,916 | 85.90 |
| 5670 SPECIAL SERVICES | 3,000 | 3,000.00 | 0.00 | 0.00 | 0 | 100.00 |
| 5680 TECHNICAL SERVICES | 637,979 | 632,400.31 | 40,064.29 | 0.00 | 5,579 | 99.10 |
| 5681 CONTRACTUAL - TEMP LABOR | 1,008 | 600.00 | 0.00 | 0.00 | 408 | 59.50 |
| 5L CONSULT & CONTR EXP | 1,163,530 | 1,306,014.46 | 142,163.25 | 1,178.70 | -143,663 | 112.30 |
| 5710 STAFF LIABILITY INSURANCE | 52,707 | 48,851.35 | 0.00 | 0.00 | 3,856 | 92.70 |
| 5711 VOLUNTEER INSURANCE | 1,000 | 1,000.00 | 0.00 | 0.00 | 0 | 100.00 |
| 5720 POSTAGE | 36,015 | 16,809.96 | 234.56 | 0.00 | 19,205 | 46.70 |
| 5730 PRINTING | 17,995 | 10,582.62 | 3,306.00 | 200.00 | 7,212 | 59.90 |
| 5740 TRANSCRIPTS | 2,198 | 1,903.40 | 140.00 | 0.00 | 295 | 86.60 |
| 5745 CRIMINAL CHECKS | 9,250 | 4,173.36 | 228.36 | 0.00 | 5,077 | 45.10 |
| 5751 HOME MODS ASSIST TECH | 19,178 | 46,479.98 | 2,513.84 | 0.00 | -27,302 | 242.40 |
| 5752 EMERGENCY SERVICES | 500 | 4,977.75 | 367.00 | 0.00 | -4,478 | 995.60 |
| 5753 CASH GAIN/LOSS | 275 | 923.53 | -932.43 | 0.00 | -649 | 335.80 |
| 5754 ADVERTISING-RECRUITMENT O | 40,000 | 49,417.73 | 3,896.22 | 0.00 | -9,418 | 123.50 |
| 5755 ADVERTISING - ALL OTHER N | 1,402 | 1,985.08 | 157.00 | 0.00 | -583 | 141.60 |

| | | | | | | |
|---|---|---|---|---|---|---|
| 5756 SARPOS CLIENT | 96,171 | 97,843.75 | 17,839.50 | 0.00 | -1,673 | 101.70 |
| 5757 FAN CARE EXPENSE | 5,100 | 4,742.26 | 3,249.40 | 0.00 | 358 | 93.00 |
| 5758 PURCHASE OF SERVICE | 15,000 | 0.00 | 0.00 | 0.00 | 15,000 | 0.00 |
| 5760 MISCELLANEOUS | 0 | -3.53 | -2.00 | 8.00 | -4 | 100.00 |
| 5765 BANK CHARGES | 10,065 | 11,346.45 | 1,922.73 | 0.00 | -1,281 | 112.70 |
| 5766 CLIENT SPECIAL NEEDS EXPE | 0 | 801.35 | 38.00 | 0.00 | -801 | 100.00 |
| 5861 PRINCIPAL LOAN EXPENSE | 197,258 | 185,651.16 | 15,293.38 | 0.00 | 11,607 | 94.10 |
| 5862 INTEREST EXPENSE | 291,163 | 302,986.90 | 25,547.98 | 0.00 | -11,824 | 104.10 |
| 5N OTHER MISC EXPENSES | 795,277 | 790,473.10 | 73,799.54 | 208.00 | 4,596 | 99.40 |
| 5682 ADMINISTRATIVE OVERHEAD | 3,118,739 | 3,043,082.15 | 184,237.15 | 0.00 | 75,657 | 97.60 |
| 5684 TRANSPORTATION TRANSFERS | 739,680 | 689,344.78 | 11,304.78 | 0.00 | 50,335 | 93.20 |
| 5685 CENTRAL KITCHEN TRANSFERS | 0 | 435,040.13 | 52,617.66 | 0.00 | -435,040 | 100.00 |
| 5692 PART C TRANSFER | 370,938 | 269,190.00 | 67,296.00 | 0.00 | 101,748 | 72.60 |
| 5P TRANSFER EXPENSES | 4,229,357 | 4,436,657.06 | 315,455.59 | 0.00 | -207,300 | 104.90 |
| 5900 CLIENT REFUND | 0 | 70,023.10 | 6,215.77 | 0.00 | -70,023 | 100.00 |
| 5910 CLIENT ALLOWANCE | 0 | 519,726.68 | 35,739.67 | 0.00 | -519,727 | 100.00 |
| 5911 BLUE CROSS NON-COMPLIANT | 0 | 82,962.70 | 15,641.77 | 0.00 | -82,963 | 100.00 |
| 5912 OTHER INSURANCE NON-COMPL | 0 | 575,402.69 | 50,635.13 | 0.00 | -575,403 | 100.00 |
| 5930 MEDICARE WRITEOFF | 0 | 71,762.95 | 6,223.91 | 0.00 | -71,763 | 100.00 |
| 5R WRITE OFF EXPENSES | 0 | 1,319,878.12 | 114,456.25 | 0.00 | -1,319,878 | 100.00 |
| Revenue Total | -26,449,957 | -27,657,830.41 | -2,675,222.61 | 0.00 | 1,207,873 | 104.60 |
| Expense Total | 26,449,957 | 27,862,045.54 | 2,896,939.33 | 167,947.15 | -1,580,036 | 106.00 |
| Grand Total | 0 | 204,215.13 | 221,716.72 | 167,947.15 | -372,162 | 100.00 |

RRCSB FY20 BOARD BUDGET

| Consolidated<br>Revenue Sources | BUDGET FY20 | BUDGET FY19 | NOTES |
|---|---|---|---|
| **State of Virginia** | | | |
| DBHDS State Funds | $6,219,633.00 | $6,035,924.00 | |
| VA Dept Aging State Funds | $418,870.00 | $409,938.00 | |
| LIPOS | $95,000.00 | $95,000.00 | |
| Children's Mobile Crisis | $70,000.00 | $70,000.00 | |
| **Total State Sources:** | **$6,803,503.00** | **$6,610,862.00** | |
| | | | |
| **Local Sources** | | | |
| Contributions/Philanthropy/Fund Raising | $145,000.00 | $163,000.00 | |
| United Way | $0.00 | $5,500.00 | |
| Culpeper - Tax | $418,938.00 | $407,471.00 | |
| Fauquier - Tax | $489,482.00 | $475,225.00 | |
| Madison - Tax | $93,894.00 | $81,467.00 | |
| Orange - Tax | $243,183.00 | $242,956.00 | |
| Rappahannock - Tax | $51,901.00 | $52,857.00 | |
| Local Other - Tax (Towns) | $13,973.00 | $13,973.00 | |
| Mobility Management | $114,662.00 | $110,615.00 | |
| Program Income | $747,464.00 | $758,100.00 | |
| **Total Local Sources:** | **$2,318,497.00** | **$2,311,164.00** | |
| | | | |
| **Fees for Services** | | | |
| Client Self Pay | $376,238.00 | $280,744.00 | |
| Medicaid | $8,963,376.00 | $8,291,783.00 | |
| Medicare | $0.00 | $0.00 | |
| Other | $793,142.00 | $994,298.00 | |
| **Total Fee Sources:** | **$10,132,756.00** | **$9,566,825.00** | |
| | | | |
| **Federal Sources** | | | |
| DBHDS MH Federal Funds | $488,262.00 | $428,356.00 | |
| Federal - OPT-R/YSAT Block Grant | $215,000.00 | $315,000.00 | |
| Federal - Prevention Block Grant | $128,019.00 | $128,019.00 | |
| Federal - Alcohol & Drug Block Grant | $576,869.00 | $576,869.00 | |
| Federal - SARPOS | $62,823.00 | $62,823.00 | |
| Federal - Facility Diversion | $7,900.00 | $7,900.00 | |
| Federal - Co-Occurring | $81,964.00 | $81,964.00 | |
| Part C Individuals with Disabilities | $106,261.00 | $127,867.00 | |
| VDA - Title III Funds | $733,359.00 | $623,503.00 | |
| VDA - USDA/NSIP | $39,268.00 | $34,441.00 | |
| VDA - VICAP | $32,967.00 | $34,674.00 | |
| VDA - Title VII Funds | $14,559.00 | $9,894.00 | |
| VHDA | $150,000.00 | $116,160.00 | |
| **Total Federal Funds:** | **$2,637,251.00** | **$2,547,470.00** | |
| | | | |

RRCSB FY20 BOARD BUDGET

| Consolidated | BUDGET FY20 | BUDGET FY19 | NOTES |
|---|---|---|---|
| **Other Sources** | | | |
| Program Transfers | $4,106,946.00 | $4,623,806.00 | |
| Interest Income | $12,000.00 | $0.00 | |
| Motor Pool | $100,000.00 | $102,000.00 | |
| Logisticare | $625,000.00 | $575,000.00 | |
| Fare Box | $2,500.00 | $1,500.00 | |
| Project LINK | $278,400.00 | $69,600.00 | |
| DJJ-CSU Grant | $37,015.00 | $41,730.00 | |
| MAT Revenue | $160,000.00 | $0.00 | |
| Other Funds | $0.00 | $0.00 | |
| **Total Other Funds:** | **$5,321,861.00** | **$5,413,636.00** | |
| | | | |
| **Grand Total Revenues:** | **$27,213,868.00** | **$26,449,957.00** | |

RRCSB FY20 BOARD BUDGET

| Consolidated | BUDGET FY20 | BUDGET FY19 | NOTES |
|---|---|---|---|
| **Expenditures** | | | |
| | | | |
| **Personnel** | | | |
| Staff Salaries | $13,817,280.00 | $13,207,669.00 | |
| FICA - Staff | $1,003,073.00 | $962,511.00 | |
| Retirement - VRS | $106,386.00 | $87,006.00 | |
| Group Life Insurance | $151,764.00 | $59,036.00 | |
| Health Insurance | $1,503,179.00 | $1,097,361.00 | |
| Short-Term/Long-Term Disability Insurances | $109,587.00 | $92,000.00 | |
| Unemployment Insurance | $35,056.00 | $37,291.00 | |
| Workmens Compensation | $170,921.00 | $201,974.00 | |
| **Total Personnel Expense:** | **$16,897,246.00** | **$15,744,848.00** | |
| | | | |
| **Operations - Staff Dev** | | | |
| Dues and Memberships | $7,323.00 | $22,444.00 | |
| Workshops | $122,984.00 | $142,456.00 | |
| Subscriptions | $2,702.00 | $8,728.00 | |
| Books/Periodicals | $2,461.00 | $11,148.00 | |
| **Total Staff Development:** | **$135,470.00** | **$184,776.00** | |
| | | | |
| **Operations - Facilities** | | | |
| Rent | $631,588.00 | $301,786.00 | |
| Utilities | $280,600.00 | $267,571.00 | |
| Telephone | $275,247.00 | $266,255.00 | |
| Maintenance Services | $128,227.00 | $116,499.00 | |
| Facility Insurance | $27,069.00 | $26,699.00 | |
| Renovation/Repairs | $12,298.00 | $6,925.00 | |
| **Total Facility:** | **$1,355,029.00** | **$985,735.00** | |
| | | | |
| **Operations - Equipment** | | | |
| Equipment Purchase | $575,099.00 | $586,304.00 | |
| Vehicles | $39,000.00 | $85,000.00 | |
| Maint. Service Contracts | $614,052.00 | $610,782.00 | |
| Equipment Repair | $143.00 | $0.00 | |
| Office/Facility Supplies | $160,897.00 | $219,705.00 | |
| Food | $864,263.00 | $806,011.00 | |
| Recognition | $92,812.00 | $112,149.00 | |
| Drugs/Medical Supplies/Medical Exams | $122,870.00 | $204,801.00 | |
| **Total Equipment:** | **$2,469,136.00** | **$2,624,752.00** | |
| | | | |
| **Operations - Travel** | | | |
| Private Mileage - Staff | $91,567.00 | $123,460.00 | |
| Motor Pool | $100,000.00 | $102,000.00 | |
| Vehicle Leases | $103,389.00 | $85,546.00 | |
| Vehicle Operating Costs | $334,601.00 | $339,358.00 | |
| Employee Food and Lodging | $32,421.00 | $61,699.00 | |
| Parking & Tolls | $409.00 | $619.00 | |
| Board Member Payments | $9,000.00 | $9,000.00 | |
| **Total Travel:** | **$671,387.00** | **$721,682.00** | |

RRCSB FY20 BOARD BUDGET

| Consolidated | BUDGET FY20 | BUDGET FY19 | NOTES |
|---|---|---|---|
| | | | |
| **Operations - Consultant** | | | |
| Accounting & Auditing Services | $30,488.00 | $29,561.00 | |
| IT Services | $1,050.00 | $10,708.00 | |
| Legal Services | $23,870.00 | $15,892.00 | |
| Psychiatric & Psychological Services | $380,045.00 | $232,770.00 | |
| Contractual ITC | $163,897.00 | $172,832.00 | |
| Contracted Client Services | $5,247.00 | $3,780.00 | |
| Technical and Special Services | $604,963.00 | $697,987.00 | |
| **Total Consultant:** | **$1,209,560.00** | **$1,163,530.00** | |
| | | | |
| **Ops. - Program Transfers** | | | |
| Administrative Overhead | $2,997,844.00 | $3,118,739.00 | |
| Transportation Transfer | $684,367.00 | $739,680.00 | |
| Part C Transfer | $0.00 | $370,938.00 | |
| **Total Transfers:** | **$3,682,211.00** | **$4,229,357.00** | |
| | | | |
| **Operations - Other** | | | |
| Staff/Board Liability Insurance | $55,206.00 | $53,707.00 | |
| Postage | $16,686.00 | $36,015.00 | |
| Printing / Duplicating | $8,017.00 | $17,995.00 | |
| Transcripts & Criminal Checks | $6,508.00 | $11,448.00 | |
| Advertising | $51,787.00 | $41,902.00 | |
| Flexible Funding | $0.00 | $0.00 | |
| Cash Gain/Loss, Bank Charges | $11,331.00 | $10,340.00 | |
| Mortgage P&I | $506,123.00 | $488,421.00 | |
| Other | $138,171.00 | $135,449.00 | |
| **Total: Operations Other:** | **$793,829.00** | **$795,277.00** | |
| | | | |
| **Grand Total Expenditures:** | **$27,213,868.00** | **$26,449,957.00** | |
| **Grand Total Revenues:** | **$27,213,868.00** | **$26,449,957.00** | |
| **Revenues - Expenditures:** | **$0.00** | **$0.00** | |

# Rappahannock Rapidan CSB
# FY19 Clients Served (Unduplicated)

| Service Outcomes<br>*Behavioral Health Services* | Culpeper |
|---|---|
| Acute psychiatric Inpatient Services | 3 |
| Outpatient Services | 378 |
| Medical Services | 304 |
| Case Management Services | 164 |
| Mental Health rehabilitation | 25 |
| Sponsored Placement | 0 |
| Supportive Residential Services | 11 |
| Total Supported | 885 |

# Rappahannock Rapidan CSB
# FY19 Clients Served (Unduplicated)

| Service Outcomes<br>*Developmental Services* | Culpeper |
|---|---|
| Case Management Services | 126 |
| Day Habilitation | 45 |
| Supervised Residential Services | 11 |
| Supportive Residential Services (SRAP) | 0 |
| Total Supported | 182 |

# Rappahannock Rapidan CSB
# FY19 Clients Served (Unduplicated)

| **Service Outcomes**<br>***Substance Use Disorder Services*** | **Culpeper** |
|---|---|
| Community Based Detoxification Inpatient Services | 0 |
| Outpatient Services | 128 |
| Medication Assisted Treatment | 51 |
| Case Management Services | 4 |
| Highly Intensive Residential Services (Medically managed Withdrawal) (Detox) | 29 |
| Intensive Residential Services (Boxwood) | 43 |
| Prevention Services | |
| Total Supported | 255 |

# Rappahannock Rapidan CSB
# FY19 Clients Served (Unduplicated)

| **Service Outcomes** *Emergency & Ancillary* | **Culpeper** |
|---|---|
| Emergency Services | 517 |
| Consumer Monitoring Services | 97 |
| Assessment and Evaluation | 375 |
| Total Supported | 989 |

# RRCS Aging Services
# FY19

| **Service Outcomes**<br>***Area Agency on Aging – Culpeper County*** | **Culpeper Seniors Served** |
|---|---|
| Provision of nutritious meals, health education, socialization, recreational, fundraising, and volunteerism for local seniors in local **Senior Centers**. | 124 |
| **Aging and Disability resource connection** for all information needed by seniors and caregivers needing services and supports in our area. A principle of **"No Wrong Door"** is used, meaning one call should enable someone to obtain the information they need and to start a process for support and referrals. Support Coordinators also provide insurance counseling, emergency supports, options counseling, and care coordination services. | 338 |
| An **adult day healthcare program** provides seniors meaningful activity and a break for caregivers. | 4 |
| With the assistance of local volunteers, distribute **home delivered meals** and nutritional to seniors for improved health and quality of life. | 64 |
| Human Services Transportation (CSB and AAA) provides access to needed services using a combination of professional drivers, trained volunteers, and transportation specialist for improved mobility. | 185 |
| Volunteers | 75 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| Service Outcomes<br>*Behavioral Health Services* | Fauquier |
|---|---|
| Acute psychiatric Inpatient Services | 6 |
| Outpatient Services | 287 |
| Medical Services | 281 |
| Case Management Services | 100 |
| Mental Health rehabilitation | 11 |
| Sponsored Placement | 3 |
| Supportive Residential Services | 1 |
| Total Supported | 689 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| Service Outcomes<br>*Developmental Services* | Fauquier |
|---|---|
| Case Management Services | 106 |
| Day Habilitation | 30 |
| Supervised Residential Services | 12 |
| Supportive Residential Services (SRAP) | 0 |
| Total Supported | 148 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| **Service Outcomes**<br>***Substance Use Disorder Services*** | **Fauquier** |
|---|---|
| Community Based Detoxification Inpatient Services | 1 |
| Outpatient Services | 73 |
| Medication Assisted Treatment | 14 |
| Case Management Services | 25 |
| Highly Intensive Residential Services (Medically managed Withdrawal) Detox | 27 |
| Intensive Residential Services Boxwood | 38 |
| Prevention Services | |
| Total Supported | 178 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| **Service Outcomes**<br>***Emergency & Ancillary*** | **Fauquier** |
|---|---|
| Emergency Services | 509 |
| Consumer Monitoring Services | 120 |
| Assessment and Evaluation | 280 |
| Total Supported | 909 |

# RRCS Aging Services
# FY19

| **Service Outcomes**<br>***Area Agency on Aging – Fauquier County*** | **Fauquier Seniors Served** |
|---|---|
| Provision of nutritious meals, health education, socialization, recreational, fundraising, and volunteerism for local seniors in local **Senior Centers**. | 72 |
| **Aging and Disability resource connection** for all information needed by seniors and caregivers needing services and supports in our area. A principle of "**No Wrong Door**" is used, meaning one call should enable someone to obtain the information they need and to start a process for support and referrals. Support Coordinators also provide insurance counseling, emergency supports, options counseling, and care coordination services. | 214 |
| An **adult day healthcare program** provides seniors meaningful activity and a break for caregivers. | 13 |
| With the assistance of local volunteers, distribute **home delivered meals** and nutritional to seniors for improved health and quality of life. | 57 |
| Human Services Transportation (CSB and AAA) provides access to needed services using a combination of professional drivers, trained volunteers, and transportation specialist for improved mobility. | 123 |
| Volunteers | 46 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| Service Outcomes<br>*Behavioral Health Services* | Madison |
|---|---|
| Acute psychiatric Inpatient Services | 3 |
| Outpatient Services | 59 |
| Medical Services | 60 |
| Case Management Services | 19 |
| Mental Health rehabilitation | 1 |
| Sponsored Placement | 1 |
| Supportive Residential Services | 0 |
| Total Supported | 143 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| **Service Outcomes**<br>***Developmental Services*** | **Madison** |
|---|---|
| Case Management Services | 17 |
| Day Habilitation | 5 |
| Supervised Residential Services | 0 |
| Supportive Residential Services (SRAP) | 0 |
| Total Supported | 22 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| **Service Outcomes**<br>***Substance Use Disorder Services*** | **Madison** |
|---|---|
| Community Based Detoxification Inpatient Services | 0 |
| Outpatient Services | 24 |
| Medication Assisted Treatment | 9 |
| Case Management Services | 0 |
| Highly Intensive Residential Services (Medically managed Withdrawal) Detox | 9 |
| Intensive Residential Services Boxwood | 15 |
| Prevention Services | |
| Total Supported | 57 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| Service Outcomes<br>*Emergency & Ancillary* | Madison |
|---|---|
| Emergency Services | 125 |
| Consumer Monitoring Services | 8 |
| Assessment and Evaluation | 74 |
| Total Supported | 207 |

# RRCS Aging Services
# FY19

| Service Outcomes<br>*Area Agency on Aging – Madison County* | Madison Seniors Served |
|---|---|
| Provision of nutritious meals, health education, socialization, recreational, fundraising, and volunteerism for local seniors in local **Senior Centers**. | 87 |
| **Aging and Disability resource connection** for all information needed by seniors and caregivers needing services and supports in our area. A principle of **"No Wrong Door"** is used, meaning one call should enable someone to obtain the information they need and to start a process for support and referrals. Support Coordinators also provide insurance counseling, emergency supports, options counseling, and care coordination services. | 133 |
| An **adult day healthcare program** provides seniors meaningful activity and a break for caregivers. | 0 |
| With the assistance of local volunteers, distribute **home delivered meals** and nutritional to seniors for improved health and quality of life. | 12 |
| Human Services Transportation (CSB and AAA) provides access to needed services using a combination of professional drivers, trained volunteers, and transportation specialist for improved mobility. | 52 |
| Volunteers | 50 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| Service Outcomes<br>*Behavioral Health Services* | Orange |
|---|---|
| Acute psychiatric Inpatient Services | 3 |
| Outpatient Services | 157 |
| Medical Services | 158 |
| Case Management Services | 83 |
| Mental Health rehabilitation | 16 |
| Sponsored Placement | 1 |
| Supportive Residential Services | 6 |
| Total Supported | 424 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| Service Outcomes<br>*Developmental Services* | Orange |
|---|---|
| Case Management Services | 71 |
| Day Habilitation | 16 |
| Supervised Residential Services | 9 |
| Supportive Residential Services (SRAP) | 0 |
| Total Supported | 96 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| **Service Outcomes**<br>***Substance Use Disorder Services*** | **Orange** |
|---|---|
| Community Based Detoxification Inpatient Services | 0 |
| Outpatient Services | 44 |
| Medication Assisted Treatment | 20 |
| Case Management Services | 0 |
| Highly Intensive Residential Services (Medically managed Withdrawal) Detox | 14 |
| Intensive Residential Services Boxwood | 16 |
| Prevention Services | |
| Total Supported | 94 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| Service Outcomes<br>*Emergency & Ancillary* | Orange |
|---|---|
| Emergency Services | 327 |
| Consumer Monitoring Services | 69 |
| Assessment and Evaluation | 172 |
| Total Supported | 568 |

# RRCS Aging Services
# FY19

| **Service Outcomes**<br>***Area Agency on Aging – Orange County*** | **Orange Seniors Served** |
|---|---|
| Provision of nutritious meals, health education, socialization, recreational, fundraising, and volunteerism for local seniors in local **Senior Centers**. | 66 |
| **Aging and Disability resource connection** for all information needed by seniors and caregivers needing services and supports in our area. A principle of **"No Wrong Door"** is used, meaning one call should enable someone to obtain the information they need and to start a process for support and referrals. Support Coordinators also provide insurance counseling, emergency supports, options counseling, and care coordination services. | 134 |
| An **adult day healthcare program** provides seniors meaningful activity and a break for caregivers. | 0 |
| With the assistance of local volunteers, distribute **home delivered meals** and nutritional to seniors for improved health and quality of life. | 52 |
| Human Services Transportation (CSB and AAA) provides access to needed services using a combination of professional drivers, trained volunteers, and transportation specialist for improved mobility. | 127 |
| Volunteers | 77 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| Service Outcomes<br>*Behavioral Health Services* | Rappahannock |
|---|---|
| Acute psychiatric Inpatient Services | 0 |
| Outpatient Services | 31 |
| Medical Services | 24 |
| Case Management Services | 12 |
| Mental Health rehabilitation | 1 |
| Sponsored Placement | 0 |
| Supportive Residential Services | 0 |
| Total Supported | 68 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| Service Outcomes<br>*Developmental Services* | Rappahannock |
|---|---|
| Case Management Services | 8 |
| Day Habilitation | 1 |
| Supervised Residential Services | 0 |
| Supportive Residential Services (SRAP) | 0 |
| Total Supported | 9 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| **Service Outcomes**<br>***Substance Use Disorder Services*** | **Rappahannock** |
|---|---|
| Community Based Detoxification Inpatient Services | 0 |
| Outpatient Services | 9 |
| Medication Assisted Treatment | 0 |
| Case Management Services | 0 |
| Highly Intensive Residential Services (Medically managed Withdrawal) Detox | 2 |
| Intensive Residential Services Boxwood | 4 |
| Prevention Services | |
| Total Supported | 15 |

# Rappahannock Rapidan CSB
# FY19 Clients Served - Unduplicated

| Service Outcomes<br>*Emergency & Ancillary* | Rappahannock |
|---|---|
| Emergency Services | 46 |
| Consumer Monitoring Services | 8 |
| Assessment and Evaluation | 30 |
| Total Supported | 84 |

# RRCS Aging Services
# FY19

| **Service Outcomes**<br>***Area Agency on Aging – Rappahannock County*** | **Rappahannock Seniors Served** |
|---|---|
| Provision of nutritious meals, health education, socialization, recreational, fundraising, and volunteerism for local seniors in local **Senior Centers**. | 42 |
| **Aging and Disability resource connection** for all information needed by seniors and caregivers needing services and supports in our area. A principle of "**No Wrong Door**" is used, meaning one call should enable someone to obtain the information they need and to start a process for support and referrals. Support Coordinators also provide insurance counseling, emergency supports, options counseling, and care coordination services. | 57 |
| An **adult day healthcare program** provides seniors meaningful activity and a break for caregivers. | 1 |
| With the assistance of local volunteers, distribute **home delivered meals** and nutritional to seniors for improved health and quality of life. | 8 |
| Human Services Transportation (CSB and AAA) provides access to needed services using a combination of professional drivers, trained volunteers, and transportation specialist for improved mobility. | 27 |
| Volunteers | 41 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Behavioral Health Services* | Culpeper |
|---|---|
| Acute psychiatric Inpatient Services | 4 |
| Outpatient Services | 400 |
| Medical Services | 382 |
| Case Management Services | 174 |
| Mental Health rehabilitation | 27 |
| Sponsored Placement | 1 |
| Supportive Residential Services | 11 |
| Total Supported | 999 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Developmental Services* | Culpeper |
|---|---|
| Case Management Services | 130 |
| Day Habilitation | 43 |
| Supervised Residential Services | 10 |
| Supportive Residential Services (SRAP) | 0 |
| Total Supported | 183 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| **Service Outcomes**<br>***Substance Use Disorder Services*** | **Culpeper** |
|---|---|
| Community Based Detoxification Inpatient Services | 0 |
| Outpatient Services | 128 |
| Medication Assisted Treatment | 53 |
| Case Management Services | 2 |
| Highly Intensive Residential Services (Medically managed Withdrawal) (Detox) | 31 |
| Intensive Residential Services (Boxwood) | 45 |
| Prevention Services | |
| Total Supported | 259 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Emergency & Ancillary* | Culpeper |
|---|---|
| Emergency Services | 542 |
| Consumer Monitoring Services | 87 |
| Assessment and Evaluation | 386 |
| Total Supported | 1,015 |

# RRCS Aging Services

| **Service Outcomes**<br>***Area Agency on Aging – Culpeper County*** | **Culpeper Seniors Served** |
|---|---|
| Provision of nutritious meals, health education, socialization, recreational, fundraising, and volunteerism for local seniors in local **Senior Centers**. | 128 |
| **Aging and Disability resource connection** for all information needed by seniors and caregivers needing services and supports in our area. A principle of **"No Wrong Door"** is used, meaning one call should enable someone to obtain the information they need and to start a process for support and referrals. Support Coordinators also provide insurance counseling, emergency supports, options counseling, and care coordination services. | 330 |
| An **adult day healthcare program** provides seniors meaningful activity and a break for caregivers. | 6 |
| With the assistance of local volunteers, distribute **home delivered meals** and nutritional to seniors for improved health and quality of life. | 67 |
| Human Services Transportation (CSB and AAA) provides access to needed services using a combination of professional drivers, trained volunteers, and transportation specialist for improved mobility. | 186 |
| Volunteers | 75 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Behavioral Health Services* | Fauquier |
|---|---|
| Acute psychiatric Inpatient Services | 6 |
| Outpatient Services | 305 |
| Medical Services | 329 |
| Case Management Services | 94 |
| Mental Health rehabilitation | 11 |
| Sponsored Placement | 2 |
| Supportive Residential Services | 1 |
| Total Supported | 748 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Developmental Services* | Fauquier |
|---|---|
| Case Management Services | 107 |
| Day Habilitation | 31 |
| Supervised Residential Services | 13 |
| Supportive Residential Services (SRAP) | 0 |
| Total Supported | 151 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Substance Use Disorder Services* | Fauquier |
|---|---|
| Community Based Detoxification Inpatient Services | 1 |
| Outpatient Services | 73 |
| Medication Assisted Treatment | 17 |
| Case Management Services | 29 |
| Highly Intensive Residential Services (Medically managed Withdrawal) Detox | 28 |
| Intensive Residential Services Boxwood | 38 |
| Prevention Services | |
| Total Supported | 186 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Emergency & Ancillary* | Fauquier |
|---|---|
| Emergency Services | 511 |
| Consumer Monitoring Services | 122 |
| Assessment and Evaluation | 333 |
| Total Supported | 966 |

# RRCS Aging Services

| **Service Outcomes**<br>***Area Agency on Aging – Fauquier County*** | **Fauquier Seniors Served** |
|---|---|
| Provision of nutritious meals, health education, socialization, recreational, fundraising, and volunteerism for local seniors in local **Senior Centers**. | 70 |
| **Aging and Disability resource connection** for all information needed by seniors and caregivers needing services and supports in our area. A principle of **"No Wrong Door"** is used, meaning one call should enable someone to obtain the information they need and to start a process for support and referrals. Support Coordinators also provide insurance counseling, emergency supports, options counseling, and care coordination services. | 212 |
| An **adult day healthcare program** provides seniors meaningful activity and a break for caregivers. | 14 |
| With the assistance of local volunteers, distribute **home delivered meals** and nutritional to seniors for improved health and quality of life. | 56 |
| Human Services Transportation (CSB and AAA) provides access to needed services using a combination of professional drivers, trained volunteers, and transportation specialist for improved mobility. | 120 |
| Volunteers | 45 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Behavioral Health Services* | Madison |
|---|---|
| Acute psychiatric Inpatient Services | 4 |
| Outpatient Services | 57 |
| Medical Services | 60 |
| Case Management Services | 19 |
| Mental Health rehabilitation | 1 |
| Sponsored Placement | 1 |
| Supportive Residential Services | 0 |
| Total Supported | 142 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Developmental Services* | Madison |
|---|---|
| Case Management Services | 17 |
| Day Habilitation | 5 |
| Supervised Residential Services | 0 |
| Supportive Residential Services (SRAP) | 0 |
| Total Supported | 22 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Substance Use Disorder Services* | Madison |
|---|---|
| Community Based Detoxification Inpatient Services | 0 |
| Outpatient Services | 24 |
| Medication Assisted Treatment | 9 |
| Case Management Services | 0 |
| Highly Intensive Residential Services (Medically managed Withdrawal) Detox | 7 |
| Intensive Residential Services<br>Boxwood | 13 |
| Prevention Services | |
| Total Supported | 53 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Emergency & Ancillary* | Madison |
|---|---|
| Emergency Services | 121 |
| Consumer Monitoring Services | 9 |
| Assessment and Evaluation | 74 |
| Total Supported | 204 |

# RRCS Aging Services

| Service Outcomes<br>*Area Agency on Aging – Madison County* | Madison Seniors Served |
|---|---|
| Provision of nutritious meals, health education, socialization, recreational, fundraising, and volunteerism for local seniors in local **Senior Centers**. | 85 |
| **Aging and Disability resource connection** for all information needed by seniors and caregivers needing services and supports in our area. A principle of **"No Wrong Door"** is used, meaning one call should enable someone to obtain the information they need and to start a process for support and referrals. Support Coordinators also provide insurance counseling, emergency supports, options counseling, and care coordination services. | 132 |
| An **adult day healthcare program** provides seniors meaningful activity and a break for caregivers. | 0 |
| With the assistance of local volunteers, distribute **home delivered meals** and nutritional to seniors for improved health and quality of life. | 11 |
| Human Services Transportation (CSB and AAA) provides access to needed services using a combination of professional drivers, trained volunteers, and transportation specialist for improved mobility. | 53 |
| Volunteers | 50 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Behavioral Health Services* | Orange |
|---|---|
| Acute psychiatric Inpatient Services | 3 |
| Outpatient Services | 158 |
| Medical Services | 191 |
| Case Management Services | 92 |
| Mental Health rehabilitation | 18 |
| Sponsored Placement | 1 |
| Supportive Residential Services | 8 |
| Total Supported | 471 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Developmental Services* | Orange |
|---|---|
| Case Management Services | 74 |
| Day Habilitation | 16 |
| Supervised Residential Services | 8 |
| Supportive Residential Services (SRAP) | 0 |
| Total Supported | 98 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| **Service Outcomes**<br>***Substance Use Disorder Services*** | **Orange** |
|---|---|
| Community Based Detoxification Inpatient Services | 0 |
| Outpatient Services | 49 |
| Medication Assisted Treatment | 23 |
| Case Management Services | 0 |
| Highly Intensive Residential Services (Medically managed Withdrawal) Detox | 12 |
| Intensive Residential Services Boxwood | 22 |
| Prevention Services | |
| Total Supported | 106 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Emergency & Ancillary* | Orange |
|---|---|
| Emergency Services | 328 |
| Consumer Monitoring Services | 70 |
| Assessment and Evaluation | 174 |
| Total Supported | 572 |

# RRCS Aging Services

| Service Outcomes<br>*Area Agency on Aging – Orange County* | Orange Seniors Served |
|---|---|
| Provision of nutritious meals, health education, socialization, recreational, fundraising, and volunteerism for local seniors in local **Senior Centers**. | 63 |
| **Aging and Disability resource connection** for all information needed by seniors and caregivers needing services and supports in our area. A principle of **"No Wrong Door"** is used, meaning one call should enable someone to obtain the information they need and to start a process for support and referrals. Support Coordinators also provide insurance counseling, emergency supports, options counseling, and care coordination services. | 130 |
| An **adult day healthcare program** provides seniors meaningful activity and a break for caregivers. | 0 |
| With the assistance of local volunteers, distribute **home delivered meals** and nutritional to seniors for improved health and quality of life. | 51 |
| Human Services Transportation (CSB and AAA) provides access to needed services using a combination of professional drivers, trained volunteers, and transportation specialist for improved mobility. | 121 |
| Volunteers | 69 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Behavioral Health Services* | Rappahannock |
|---|---|
| Acute psychiatric Inpatient Services | 0 |
| Outpatient Services | 34 |
| Medical Services | 28 |
| Case Management Services | 9 |
| Mental Health rehabilitation | 1 |
| Sponsored Placement | 0 |
| Supportive Residential Services | 0 |
| Total Supported | 72 |

# Rappahannock Rapidan CSB
# FY20 Client Served - Budgeted

| Service Outcomes<br>*Developmental Services* | Rappahannock |
|---|---|
| Case Management Services | 8 |
| Day Habilitation | 1 |
| Supervised Residential Services | 0 |
| Supportive Residential Services (SRAP) | 0 |
| Total Supported | 9 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Substance Use Disorder Services* | Rappahannock |
|---|---|
| Community Based Detoxification Inpatient Services | 0 |
| Outpatient Services | 9 |
| Medication Assisted Treatment | 0 |
| Case Management Services | 0 |
| Highly Intensive Residential Services (Medically managed Withdrawal) Detox | 2 |
| Intensive Residential Services Boxwood | 3 |
| Prevention Services | |
| Total Supported | 14 |

# Rappahannock Rapidan CSB
# FY20 Clients Served - Budgeted

| Service Outcomes<br>*Emergency & Ancillary* | Rappahannock |
|---|---|
| Emergency Services | 50 |
| Consumer Monitoring Services | 9 |
| Assessment and Evaluation | 36 |
| Total Supported | 95 |

# RRCS Aging Services

| **Service Outcomes**<br>***Area Agency on Aging – Rappahannock County*** | **Rappahannock Seniors Served** |
|---|---|
| Provision of nutritious meals, health education, socialization, recreational, fundraising, and volunteerism for local seniors in local **Senior Centers.** | 42 |
| **Aging and Disability resource connection** for all information needed by seniors and caregivers needing services and supports in our area. A principle of "**No Wrong Door**" is used, meaning one call should enable someone to obtain the information they need and to start a process for support and referrals. Support Coordinators also provide insurance counseling, emergency supports, options counseling, and care coordination services. | 59 |
| An **adult day healthcare program** provides seniors meaningful activity and a break for caregivers. | 1 |
| With the assistance of local volunteers, distribute **home delivered meals** and nutritional to seniors for improved health and quality of life. | 8 |
| Human Services Transportation (CSB and AAA) provides access to needed services using a combination of professional drivers, trained volunteers, and transportation specialist for improved mobility. | 28 |
| Volunteers | 42 |

RECEIVED APR 19 2004

Internal Revenue Service

Date: April 13, 2004

Department of the Treasury
P. O. Box 2508
Cincinnati, OH 45201

Rappahannock-Rapidian Community Services Board
PO Box 1568
Culpeper, VA 22701-6568

Person to Contact:
Richard E. Owens 31-07974
Customer Service Representative
Toll Free Telephone Number:
8:00 a.m. to 6:30 p.m. EST
877-829-5500
Fax Number:
513-263-3756
Federal Identification Number:
23-7238218

Dear Sir or Madam:

This is in response to your request of April 13, 2004, regarding your organization's tax-exempt status.

In November 1995 we issued a determination letter that recognized your organization as exempt from federal income tax. Our records indicate that your organization is currently exempt under section 501(c)(3) of the Internal Revenue Code.

Based on information subsequently submitted, we classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Code because it is an organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

This classification was based on the assumption that your organization's operations would continue as stated in the application. If your organization's sources of support, or its character, method of operations, or purposes have changed, please let us know so we can consider the effect of the change on the exempt status and foundation status of your organization.

Your organization is required to file Form 990, Return of Organization Exempt from Income Tax, only if its gross receipts each year are normally more than $25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of the organization's annual accounting period. The law imposes a penalty of $20 a day, up to a maximum of $10,000, when a return is filed late, unless there is reasonable cause for the delay.

All exempt organizations (unless specifically excluded) are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of $100 or more paid to each employee during a calendar year. Your organization is not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, these organizations are not automatically exempt from other federal excise taxes.

Donors may deduct contributions to your organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to your organization or for its use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Alternative transportation goes Live Jan. 21st
- A Hub will be in Culpeper

**Rappahannock Rapidan**
*Community Services*

CULPEPER, VIRGINIA

FINANCIAL STATEMENTS AND
SUPPLEMENTARY INFORMATION

As of and for the Years Ended
June 30, 2019 and 2018

munis - financial software

- 6 Huds audits plus this one

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

TABLE OF CONTENTS


| | Page(s) |
|---|---|
| **INTRODUCTORY SECTION** | |
| BOARD OF DIRECTORS AND MANAGEMENT STAFF | I |
| ORGANIZATIONAL CHART | II |
| **INDEPENDENT AUDITORS' REPORT** | 1-3 |
| **MANAGEMENT'S DISCUSSION AND ANALYSIS** | 4-10 |
| **BASIC FINANCIAL STATEMENTS** | |
| Statements of Net Position | 11-12 |
| Statements of Revenues, Expenses, and Changes in Net Position | 13 |
| Statements of Cash Flows | 14-15 |
| Notes to the Financial Statements | 16-53 |
| **REQUIRED SUPPLEMENTARY INFORMATION** | |
| Pension Schedules | 54-55 |
| **OTHER SUPPLEMENTARY INFORMATION** | |
| **COMBINING FINANCIAL STATEMENTS** | |
| Combining Statement of Net Position | 56-57 |
| Combining Statement of Revenues, Expenses, and Changes in Net Position | 58-59 |
| Combining Statement of Cash Flows | 60-61 |
| **OTHER INFORMATION** | |
| Legend of Expense Categories | 62 |
| Department of Aging and Rehabilitative Services (DARS) Schedules | |
| Supplemental Schedule of Status of DARS Funds | 63 |
| Supplemental Schedule of DARS Costs by Program Activity | 64-66 |
| Supplemental Schedule of Status of DARS Inventories | 67 |

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

TABLE OF CONTENTS


| | Page(s) |
|---|---|
| **COMPLIANCE SECTION** | |
| INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS* | 68-69 |
| INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR THE MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE | 70-72 |
| Schedule of Expenditures of Federal Awards | 73-75 |
| Schedule of Findings and Questioned Costs | 76 |
| Summary Schedule of Prior Audit Findings | 77 |

# INTRODUCTORY SECTION

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

CULPEPER, VIRGINIA

## BOARD MEMBERS

Elizabeth Davis, Chair
*Culpeper*

Robert Weigel, Vice - Chair
*Fauquier*

Donalda Lovelace, Secretary
*Orange*

*Culpeper*
Christopher Jenkins
Elizabeth Davis
Dawn Lovelace Klemann, Psy.D.

*Fauquier*
Pat Balasco-Barr
Jack Ledden, Jr.
Robert Weigel

*Madison*
Amber Foster
Clare Lillard
Valerie Ward

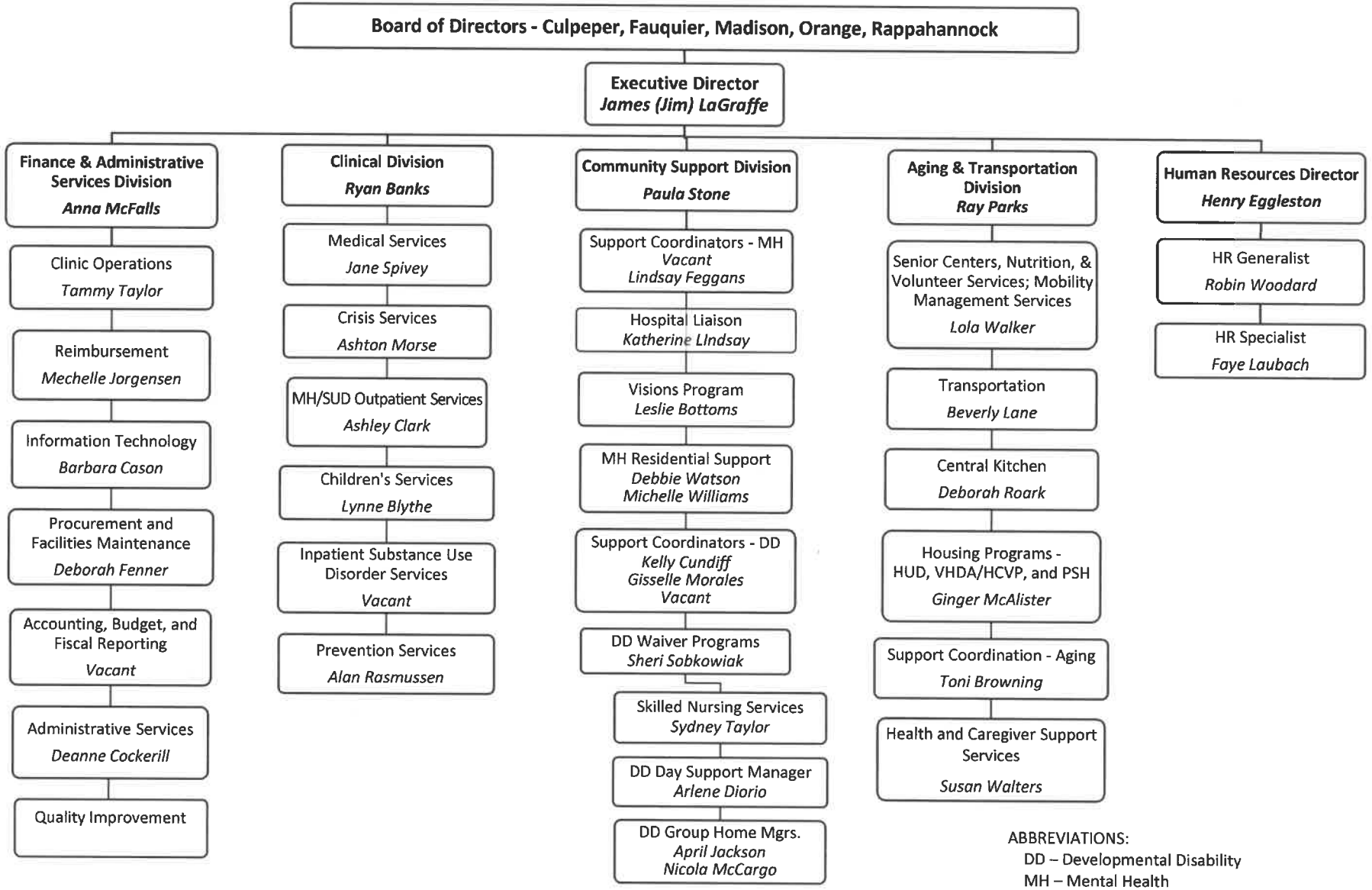
*Orange*
Marcia Brose
David Francis
Donalda Lovelace

*Rappahannock*
Eve Brooks
Demaris Miller, Ph.D.
Ann Baumgardner, Ph.D.

## MANAGEMENT STAFF

| | |
|---|---|
| James LaGraffe | Executive Director |
| Anna McFalls | Director of Finance & Administrative Services |
| Paula Stone | Director of Community Support Services |
| Ray Parks | Director of Nutrition & Transportation Services |

# Rappahannock Rapidan Community Services
# Organization
# Fiscal Year 2019




ABBREVIATIONS:
- DD – Developmental Disability
- MH – Mental Health
- HCVP - Housing Choice Voucher Program
- SUD – Substance Use Disorder
- VHDA – Virginia Housing Development Authority

This page is intentionally left blank.

# INDEPENDENT AUDITORS' REPORT

To the Honorable Members of the Board of Directors
**Rappahannock Rapidan Community Services**
Culpeper, Virginia

## Report on the Financial Statements

We have audited the accompanying financial statements of **Rappahannock Rapidan Community Services** (the **Agency**), as of and for the years ended June 30, 2019 and 2018, and the related Notes to the Financial Statements, which collectively comprise the **Agency's** Basic Financial Statements as listed in the Table of Contents.

## Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

## Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and *Specifications for Audit of Authorities, Boards and Commissions* issued by the Auditor of Public Accounts of the Commonwealth of Virginia. Those standards and specifications require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the **Agency's** preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the **Agency's** internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

To the Honorable Members of the Board of Directors
**Rappahannock Rapidan Community Services**

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

**Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the **Agency** as of June 30, 2019 and 2018, and the respective changes in financial position and cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

**Emphasis of Matter**

As described in Note 18 to the financial statements, the **Agency** has restated its 2018 financial statements due to the implementation of GASB Statement No. 75 and other items. Our opinion is not modified with respect to this matter.

**Other Matters**

*Required Supplementary Information*

Accounting principles generally accepted in the United States of America require that the Management's Discussion and Analysis and Pension Schedules, as listed in the accompanying Table of Contents, be presented to supplement the Basic Financial Statements. Such information, although not a part of the Basic Financial Statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the Basic Financial Statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the Required Supplementary Information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the Basic Financial Statements, and other knowledge we obtained during our audit of the Basic Financial Statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

*Other Information*

Our audit was conducted for the purpose of forming an opinion on the financial statements that collectively comprise the **Agency's** Basic Financial Statements. The accompanying information listed in the Introductory Section and Other Supplementary Information in the Table of Contents is presented for purposes of additional analysis and is not a required part of the Basic Financial Statements. The Department of Aging and Rehabilitative Services (DARS) Schedules are

To the Honorable Members of the Board of Directors
**Rappahannock Rapidan Community Services**

presented for the year ended September 30, 2018, as required by DARS. The accompanying Schedule of Expenditures of Federal Awards, as required by Title 2 U.S. *Code of Federal Regulations* (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the Basic Financial Statements of the **Agency**.

The accompanying information listed as Other Supplementary Information and Schedule of Expenditures of Federal Awards in the Table of Contents are the responsibility of management and were derived from and relate directly to the underlying accounting and other records used to prepare the Basic Financial Statements. Such information has been subjected to the auditing procedures applied in the audit of the Basic Financial Statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the Basic Financial Statements or to the Basic Financial Statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the accompanying information listed as Other Supplementary Information and the Schedule of Expenditures of Federal Awards in the Table of Contents are fairly stated in all material respects in relation to the Basic Financial Statements as a whole.

The Introductory Section, as listed in the Table of Contents, has not been subjected to the auditing procedures applied in the audit of the Basic Financial Statements and, accordingly, we do not express an opinion nor provide any assurance on them.

*Other Reporting Required by Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated November 19, 2019, on our consideration of the **Agency's** internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, grant agreements, and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the **Agency's** internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the **Agency's** internal control over financial reporting and compliance.

Snead Williams and Mayhew PLLC

Danville, Virginia
November 19, 2019

This page is intentionally left blank.

**MANAGEMENT'S**
**DISCUSSION AND ANALYSIS**

received
(40,000)
- debt set off
- after 180 days

uncollectable
accounts
(medicaid reimbursements)
(medicaid billing)
- are written off
(estimate how many will)
management estt.

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

## MANAGEMENT'S DISCUSSION AND ANALYSIS
## Years Ended June 30, 2019 and 2018

The following discussion and analysis of **Rappahannock Rapidan Community Services'** (the **Agency**) financial performance provides an overview of the **Agency's** financial activities for the fiscal years ended June 30, 2019 and 2018. Please read this information in conjunction with the **Agency's** financial statements.

### Overview of the Financial Statements

The **Agency** presents three basic financial statements. These are: (1) Statements of Net Position; (2) Statements of Revenues, Expenses, and Changes in Net Position; and (3) Statements of Cash Flows.

The **Agency's** financial position is measured in terms of resources (assets) which the **Agency** owns and obligations (liabilities) that the **Agency** owes on a given date. This information is reported on the Statements of Net Position, which reflects the **Agency's** assets and deferred outflows of resources, in relation to its liabilities which include its debts to its suppliers, employees and other creditors, and deferred inflows of resources. The excess of the **Agency's** assets over liabilities is its equity, or net position. The Statements of Revenues, Expenses, and Changes in Net Position reports the changes in the **Agency's** net position. The Statements of Cash Flows reports the **Agency's** cash transaction activity and reconciles this activity to the net excess (deficiency) of revenues over expenses.

As described in Note 18 to the financial statements, the **Agency** has restated its 2018 financial statements due to the implementation of GASB Statement No. 75 and other items.

### Financial Summary

Financial Position

A summary of the **Agency's** Statements of Net Position for 2019, 2018, and 2017 is presented as follows:

CONDENSED STATEMENTS OF NET POSITION

| | 2019 | Restated 2018 | 2017 |
|---|---|---|---|
| Current Assets | $ 5,148,526 | $ 6,389,761 | $ 6,521,317 |
| Current Assets Restricted | 407,105 | 414,414 | 408,731 |
| Capital Assets, Net | 20,569,822 | 18,630,535 | 17,613,848 |
| Noncurrent Assets | 9,045,859 | 8,253,398 | 5,206,383 |
| Total Assets | $ 35,171,312 | $ 33,688,108 | $ 29,750,279 |
| Deferred Outflows | $ 130,189 | $ 136,252 | $ 958,122 |
| Current Liabilities | $ 2,047,460 | $ 2,134,831 | $ 2,045,622 |
| Current Liabilities Payable from Restricted Assets | 36,099 | 44,012 | 57,211 |
| Long-Term Liabilities | 8,915,475 | 8,848,277 | 7,619,938 |
| Total Liabilities | $ 10,999,034 | $ 11,027,120 | $ 9,722,771 |

## Financial Summary

Financial Position (Continued)

CONDENSED STATEMENTS OF NET POSITION (CONTINUED)

| | 2019 | Restated 2018 | 2017 |
|---|---|---|---|
| Deferred Inflows | $ 2,158,142 | $ 3,999,350 | $ 3,287,228 |
| Investment in Capital Assets, Net of Related Capital Debt | $ 12,485,852 | $ 10,363,743 | $ 10,004,649 |
| Temporarily Restricted Net Position | 7,602,824 | 6,197,383 | 5,894,097 |
| Unrestricted Net Position | 2,055,649 | 2,236,764 | 1,799,656 |
| Total Net Position | $ 22,144,325 | $ 18,797,890 | $ 17,698,402 |

The current financial position of the **Agency** is stable. This is evidenced by the **Agency's** liquidity. The Current Ratio (Current Assets/Current Liabilities) of the **Agency** was 2.52, 3.12, and 3.30 for 2019, 2018, and 2017, respectively.

The portion of net position which represents the amount the **Agency** has invested in capital assets, net of related capital debt, increased approximately 3.59% from 2017 to 2018 and increased approximately 21% from 2018 to 2019. Temporarily restricted net position primarily consists of the **Agency's** net pension asset and other associated balances. From 2017 to 2018, temporarily restricted net position increased by approximately 6% and increased approximately 23% from 2018 to 2019.

Changes in Net Position

A summary of the **Agency's** Statements of Revenues, Expenses, and Changes in Net Position for 2019, 2018, and 2017 is presented as follows:

**Financial Summary**
Changes in Net Position (Continued)

CONDENSED STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION

| | 2019 | Restated 2018 | 2017 |
|---|---|---|---|
| Total Operating Revenues | $ 8,893,454 | $ 8,677,308 | $ 9,690,677 |
| Total Operating Expenses | (22,283,272) | (21,170,248) | (20,906,354) |
| Operating (Loss) | (13,389,818) | ( 12,492,940) | (11,215,677) |
| Nonoperating Revenues (Expenses) | | | |
| Appropriations from governments | 11,244,403 | 11,188,745 | 10,567,409 |
| Interest and investment income (loss) | 21,036 | 30,393 | 148 |
| In-kind donations | - | - | 158,138 |
| Contributions | 1,199,426 | 994,116 | 916,790 |
| Other, net | 4,576,249 | 2,520,256 | 1,532,751 |
| Interest expense on capital note | ( 304,861) | ( 298,087) | ( 263,041) |
| Net Nonoperating Revenues | 16,736,253 | 14,435,423 | 12,912,195 |
| Excess of Revenues Over Expenses | 3,346,435 | 1,942,483 | 1,696,518 |
| Net Position - Beginning of Year | 18,797,890 | 16,855,407 | 16,001,884 |
| Net Position - End of Year | $ 22,144,325 | $ 18,797,890 | $ 17,698,402 |

The following data is intended to provide a comparison of all major revenue sources for the fiscal years ended June 30:

| | 2019 | Restated 2018 | 2017 |
|---|---|---|---|
| Revenues | | | |
| Net individual service revenue | $ 8,893,454 | $ 8,677,308 | $ 9,690,677 |
| State | 6,651,782 | 7,001,457 | 6,708,111 |
| Federal | 3,332,655 | 2,927,322 | 2,695,729 |
| Local | 1,259,966 | 1,259,966 | 1,163,569 |
| Interest and investment income (loss) | 21,036 | 30,393 | 148 |
| In-kind donations | - | - | 158,138 |
| Contributions | 1,199,426 | 994,116 | 916,790 |
| Other, net | 4,576,249 | 2,520,256 | 1,532,751 |

**Financial Summary**
Changes in Net Position (Continued)

The following data provides a comparison of all expenditures by line item for the fiscal years ended June 30:

| | 2019 | Restated 2018 | 2017 |
|---|---|---|---|
| Expenses | | | |
| Personnel | $ 15,463,327 | $ 14,658,897 | $ 14,933,174 |
| Staff development | 95,141 | 108,981 | 106,109 |
| Facilities | 1,431,107 | 1,102,328 | 1,281,869 |
| Minor equipment and supplies | 2,054,061 | 2,195,412 | 1,796,838 |
| Travel | 705,004 | 709,607 | 639,572 |
| Contractual and consulting | 1,306,014 | 1,384,941 | 1,127,025 |
| Depreciation | 938,095 | 728,925 | 702,268 |
| Other | 290,523 | 281,157 | 319,499 |
| Interest expense on capital note | 304,861 | 298,087 | 263,041 |

Operating revenue is defined as the amount of revenue received from providing individual services. The vast majority of those funds are received from Medicaid. From 2017 to 2018, the **Agency** had a decrease in operating revenue of approximately 10.46%. From 2018 to 2019, the **Agency** had an increase in operating revenue of approximately 2.49%.

Operating expenses are comprised of the direct expenses of operating the **Agency**. These include salaries and benefits, occupancy, payments to contracting other agencies, and depreciation. From 2017 to 2018, operating expenses increased by approximately 1.27%. From 2018 to 2019, operating expenses increased by approximately 5.26%.

Nonoperating revenue is comprised of income received as appropriations or grants as well as miscellaneous income. For 2019, appropriations from the State of Virginia constitute approximately 39.04% of nonoperating revenue, while grants from the Federal Government and appropriations from local governments constitute approximately 19.56% and 7.40%, respectively.

From 2017 to 2018, nonoperating revenue increased by approximately 11.83%. From 2018 to 2019, nonoperating revenue increased by approximately 15.67%.

Cash Flows

A summary of the **Agency's** Statements of Cash Flows for 2019, 2018, and 2017 is presented as follows:

### Financial Summary

Cash Flows (Continued)

CONDENSED STATEMENTS OF CASH FLOWS

| | 2019 | Restated 2018 | 2017 |
|---|---|---|---|
| Net Cash (Used) by Operating Activities | $ (12,534,664) | $ (11,927,828) | $ (10,768,960) |
| Net Cash Provided by Noncapital Financing Activities | 13,338,504 | 12,992,490 | 12,544,394 |
| Net Cash (Used) Provided by Capital and Financing Activities | (2,263,201) | (1,174,958) | 2,080,829 |
| Net Cash Provided by Investing Activities | 21,036 | 30,393 | 148 |
| Net (Decrease) Increase in Cash and Cash Equivalents | (1,438,325) | ( 79,903) | 3,856,411 |
| Cash and Cash Equivalents - Beginning of Year | 5,589,408 | 5,669,311 | 1,812,900 |
| Cash and Cash Equivalents - End of Year | $ 4,151,083 | $ 5,589,408 | $ 5,669,311 |

The above represents the actual changes (flows) in cash.

Cash flows from operating activities reconcile the operating (loss) recorded on the Statements of Revenues, Expenses, and Changes in Net Position to cash used by operating activities. In this process, the operating (loss) is decreased by the amount of any noncash transactions (i.e. depreciation) and adjusted for changes in assets and liabilities. Please see the Statements of Cash Flows for a full listing of these transactions.

Cash flows from noncapital financing activities are comprised of income received as appropriations or grants. Please see the Changes in Net Position discussion section above. Cash flows from capital and financing activities are comprised of capital assets purchased and sold by the **Agency**. Please see Note 5 for a full listing of capital assets. Cash flows from investing activities are comprised of interest transactions and the purchase or sale of investments.

Economic Factors

Current economic factors which affected the **Agency** the most were conditions that continue to affect a large write-off of Medicaid accounts receivable which are due in part to changes in billing and collection procedures.

Future economic conditions will affect the **Agency's** net position. Future changes in various state regulations will affect how the **Agency** will provide its services. However, it is unclear at this time whether or not these future changes will have a positive or negative effect on the **Agency's** net position.

## Capital Asset and Debt Administration

Capital Assets

The **Agency's** gross total of capital assets approximately consists of the following asset types at June 30:

| | 2019 | Restated 2018 | 2017 |
|---|---|---|---|
| Land | 8% | 9% | 8% |
| Construction in Progress | 9% | 1% | 13% |
| Buildings and Improvements | 70% | 77% | 65% |
| Furniture, Fixtures, and Equipment | 3% | 3% | 3% |
| Vehicles | 10% | 10% | 11% |

In 2017, the **Agency** received a $3,000,000 grant from the Department of Behavioral Health and Developmental Services (DBHDS) for the construction of two new group homes. Construction is in progress for the group homes. The grant has been recorded as deferred inflows on the Statements of Net Position. As the **Agency** utilizes the grant funds for construction of the group homes, it will recognize grant income, accordingly. The **Agency** recognized $2,241,409 in grant income for the year ended June 30, 2019.

Long-Term Debt

The **Agency** received a Rural Development (FmHA) loan on July 5, 2016, with only interest payable until July 2017. The proceeds of the loan were used for the construction of the Bridges Consolidation Project. The outstanding balance owed on this loan was $3,679,707 at June 30, 2019. Additional details of this loan are described in Note 10.

The **Agency** issued a public facility refunding mortgage bond in the amount of $805,000 on August 28, 2015. The proceeds of the bond were used to pay in full all of the outstanding principal balance of the **Agency's** loan with Rural Development that was originally used to finance the purchase and renovation of the **Agency's** administrative offices. The outstanding balance of the bond issue was $595,844 at June 30, 2019.

The **Agency** has two other loans with Rural Development for the construction of the Boxwood Treatment Facility. The balance owed on these loans was $3,747,388 at June 30, 2019.

The Agency has a loan with a local bank dated January 17, 2019 secured by real estate at 6067 Dumfries Road, Warrenton, Virginia. The balance at June 30, 2019 is $289,534.

Additional details of long-term debt are described in Note 10.

## Summary

The Statements of Net Position reflect that on June 30, 2019, the **Agency** had 2.52 times more current assets than current liabilities.

**Summary (Continued)**

The Statements of Revenues, Expenses, and Changes in Net Position report that the net position of the **Agency** increased by $3,346,435 during 2019 as a result of operations.

The Statements of Cash Flows report that cash decreased by $1,438,325 in 2019.

As stated above, the financial position of the **Agency** is measured in terms of resources (assets and deferred outflows) which are owned and obligations (liabilities and deferred inflows) which are owed on a given date. The **Agency's** liquidity displays a stable and secure financial position.

# BASIC
# FINANCIAL STATEMENTS

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

STATEMENTS OF NET POSITION
June 30, 2019 and 2018

| | Notes | 2019 | Restated 2018 |
|---|---|---|---|
| ASSETS | | | |
| Current Assets | | | |
| Cash and cash equivalents | 1 | $ 3,770,303 | $ 5,209,140 |
| Accounts receivable, net of allowance for uncollectible accounts | 3 | 1,279,338 | 1,092,604 |
| Accrued revenue | 3 | 30,518 | 19,707 |
| Prepaid items | 4 | 68,367 | 68,310 |
| Total Current Assets | | 5,148,526 | 6,389,761 |
| Current Assets Restricted | | | |
| Cash and cash equivalents | 1 | 380,780 | 380,268 |
| Client funds | | 26,325 | 34,146 |
| Total Current Assets Restricted | | 407,105 | 414,414 |
| Capital Assets | 5 | | |
| Land | | 2,299,354 | 2,299,354 |
| Construction in progress | | 2,603,080 | 119,412 |
| Capital assets (net of accumulated depreciation) | | 15,667,388 | 16,211,769 |
| Total Capital Assets, Net | | 20,569,822 | 18,630,535 |
| Noncurrent Assets | | | |
| Net pension asset | 8 | 9,045,859 | 8,253,398 |
| Total Noncurrent Assets | | 9,045,859 | 8,253,398 |
| Total Assets | | $ 35,171,312 | $ 33,688,108 |
| DEFERRED OUTFLOWS | 1 | | |
| Deferred post-employment benefits outflows | 9 | $ 82,015 | $ 54,000 |
| Deferred pension outflows | 8 | 21,740 | 52,908 |
| Bond issuance costs | 10 | 26,434 | 29,344 |
| Total Deferred Outflows | | $ 130,189 | $ 136,252 |

The accompanying Notes to the Financial Statements are an integral part of these statements.

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

STATEMENTS OF NET POSITION (CONTINUED)
June 30, 2019 and 2018

| | Notes | 2019 | Restated 2018 |
|---|---|---|---|
| LIABILITIES | | | |
| Current Liabilities | | | |
| Accounts payable and accruals | | $ 1,020,119 | $ 793,505 |
| Current portion of long-term capital note | 10 | 136,526 | 417,518 |
| Current portion of bonds payable | 10 | 74,472 | 74,432 |
| Current portion of compensated absences | 10 | 816,343 | 849,376 |
| Total Current Liabilities | | 2,047,460 | 2,134,831 |
| Current Liabilities Payable from Restricted Assets | | | |
| Client funds | | 26,325 | 34,146 |
| Security deposits | | 9,774 | 9,866 |
| Total Current Liabilities Payable from Restricted Assets | | 36,099 | 44,012 |
| Long-Term Liabilities | | | |
| Long-term capital note, net of current portion | 10 | 7,580,103 | 7,427,129 |
| Long-term bonds payable, net of current portion | 10 | 521,372 | 576,148 |
| Post-employment benefits liability | 9 | 814,000 | 845,000 |
| Total Long-Term Liabilities | | 8,915,475 | 8,848,277 |
| Total Liabilities | | $ 10,999,034 | $ 11,027,120 |
| DEFERRED INFLOWS | 1 | | |
| Deferred post-employment benefits inflows | 9 | $ 118,000 | $ 104,000 |
| Deferred pension inflows | 8 | 932,951 | 1,373,007 |
| Deposit on construction of group homes | 17 | 1,107,191 | 2,522,343 |
| Total Deferred Inflows | | $ 2,158,142 | $ 3,999,350 |
| NET POSITION | | | |
| Investment in capital assets, net of related capital debt | | $ 12,485,852 | $ 10,363,743 |
| Restricted net position | 16 | 7,602,824 | 6,197,383 |
| Unrestricted net position | | 2,055,649 | 2,236,764 |
| Total Net Position | | $ 22,144,325 | $ 18,797,890 |

The accompanying Notes to the Financial Statements are an integral part of these statements.

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION
Years Ended June 30, 2019 and 2018

| | Notes | 2019 | Restated 2018 |
|---|---|---|---|
| Operating Revenues | | | |
| Revenues | | | |
| Net individual service revenue | 1 | $ 8,893,454 | $ 8,677,308 |
| Total Operating Revenues | | 8,893,454 | 8,677,308 |
| Operating Expenses | | | |
| Personnel | | 15,463,327 | 14,658,897 |
| Staff development | | 95,141 | 108,981 |
| Facilities | | 1,431,107 | 1,102,328 |
| Minor equipment and supplies | | 2,054,061 | 2,195,412 |
| Travel | | 705,004 | 709,607 |
| Contractual and consulting | | 1,306,014 | 1,384,941 |
| Depreciation | 5 | 938,095 | 728,925 |
| Other | | 290,523 | 281,157 |
| Total Operating Expenses | | 22,283,272 | 21,170,248 |
| Operating (Loss) | | (13,389,818) | (12,492,940) |
| Nonoperating Revenues (Expenses) | | | |
| Appropriations from governments | | | |
| State | | 6,651,782 | 7,001,457 |
| Federal | | 3,332,655 | 2,927,322 |
| Local | | 1,259,966 | 1,259,966 |
| Interest and investment income | | 21,036 | 30,393 |
| Contributions | | 1,199,426 | 994,116 |
| Other, net | | 4,576,249 | 2,520,256 |
| Interest expense on capital note | 10 | (304,861) | (298,087) |
| Net Nonoperating Revenues | | 16,736,253 | 14,435,423 |
| Excess of Revenues Over Expenses | | 3,346,435 | 1,942,483 |
| Net Position - Beginning of Year | | 18,797,890 | 16,855,407 |
| Net Position - End of Year | | $ 22,144,325 | $ 18,797,890 |

The accompanying Notes to the Financial Statements are an integral part of these statements.

This page is intentionally left blank.

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

STATEMENTS OF CASH FLOWS
Years Ended June 30, 2019 and 2018

| | 2019 | Restated 2018 |
|---|---|---|
| Cash Flows (Uses) from Operating Activities | | |
| Receipts from individuals | $ 8,719,040 | $ 8,592,710 |
| Payments to suppliers | (5,690,590) | (5,850,274) |
| Payments to and for employees | (15,563,114) | (14,670,264) |
| Net Cash (Used) by Operating Activities | (12,534,664) | (11,927,828) |
| Cash Flows (Uses) from Noncapital Financing Activities | | |
| Government grants | 10,988,695 | 10,989,677 |
| Other | 2,349,809 | 2,002,813 |
| Net Cash Provided by Noncapital Financing Activities | 13,338,504 | 12,992,490 |
| Cash Flows (Uses) from Capital and Financing Activities | | |
| Purchase of capital assets and deposits thereon | (2,637,472) | (1,561,424) |
| Deposit on construction of group homes | 826,257 | - |
| Debt proceeds | 295,000 | 837,373 |
| Proceeds from sale of capital assets | 33,755 | 24,335 |
| Interest on long-term debt | (302,987) | (295,531) |
| Principal payments on long-term debt | (477,754) | (179,711) |
| Net Cash (Used) by Capital and Financing Activities | (2,263,201) | (1,174,958) |
| Cash Flows (Uses) from Investing Activities | | |
| Interest and investment income | 21,036 | 30,393 |
| Net Cash Provided by Investing Activities | 21,036 | 30,393 |
| Net (Decrease) in Cash and Cash Equivalents | (1,438,325) | (79,903) |
| Cash and Cash Equivalents - Beginning of Year | 5,589,408 | 5,669,311 |
| Cash and Cash Equivalents - End of Year | $ 4,151,083 | $ 5,589,408 |
| Cash and Cash Equivalents | | |
| Unrestricted | $ 3,770,303 | $ 5,209,140 |
| Restricted | 380,780 | 380,268 |
| Cash and Cash Equivalents - End of Year | $ 4,151,083 | $ 5,589,408 |

The accompanying Notes to the Financial Statements are an integral part of these statements.

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

STATEMENTS OF CASH FLOWS (CONTINUED)
Years Ended June 30, 2019 and 2018

| | 2019 | Restated 2018 |
|---|---|---|
| Reconciliation of Changes in Net Position to Net Cash (Used) by Operating Activities | | |
| Operating (Loss) | $ (13,389,818) | $ (12,492,940) |
| Adjustments to Reconcile Changes in Net Position to Net Cash (Used) by Operating Activities | | |
| Depreciation | 938,095 | 728,925 |
| Net (gain) on sale of capital assets | (14,210) | (14,089) |
| Changes in assets and liabilities | | |
| Accounts receivable | (181,978) | 11,491 |
| Accrued revenue | (66,941) | (1,534) |
| Prepaid items | (57) | 8,969 |
| Accounts payable and accrued expenses | 277,033 | (133,144) |
| Compensated absences | (33,033) | (8,459) |
| Third party claim reserve | - | (24,139) |
| Contributions for post-employment benefits | (42,015) | 50,000 |
| Contributions to pension plan | (21,740) | (52,908) |
| Net Cash (Used) by Operating Activities | $ (12,534,664) | $ (11,927,828) |
| Noncash Investing, Capital and Financing Activities | | |
| Grant Received for Vehicles | $ 255,708 | $ 199,068 |

The accompanying Notes to the Financial Statements are an integral part of these statements.

## Note 1 - Summary of Significant Accounting Policies

### Description and Purpose of Agency

**Rappahannock Rapidan Community Services** (the **Agency**) operates as an agent for the Counties of Culpeper, Fauquier, Madison, Orange, and Rappahannock in the establishment and operation of community mental health, mental retardation and substance abuse programs as provided for in Chapter 10 of Title 37.1 of the *Code of Virginia (1950)*, as amended, relating to the Virginia Department of Behavioral Health and Developmental Services. In addition, the **Agency** provides a system of community mental health, mental retardation and substance abuse services which relate to and are integrated with existing and planned programs. The **Agency** also serves as the local Area Agency on Aging, which provides programs and activities to senior persons under the *Older Americans Act* and other programs.

### Financial Reporting Entity

For financial reporting purposes, in conformance with the Governmental Accounting Standards Board (GASB) Statement No. 39, *Determining Whether Certain Organizations are Component Units,* and GASB Statement No. 61, *The Financial Reporting Entity: Omnibus,* the **Agency** includes all organizations for which it is considered financially accountable or which exclusively benefit the **Agency**. All component units included in these financial statements have years which end on June 30.

*Blended Component Units*

Blended component units, although legally separate entities are, in substance, part of the **Agency's** operations, and so data from these units are combined with data of the **Agency**. The **Agency** has the following blended component units:

The Orange Group Home Corporation, High Point Group Home Corporation, Canterbury Group Home Corporation, Rappahannock Elder Housing Corporation, and Developmental Housing Corporation have been included as part of the reporting entity. All of these entities are not-for-profit organizations exempt under Section 501(c)(3) of the *Internal Revenue Code* and were organized to own and operate facilities for handicapped individuals. The **Agency's** Board of Director's members also serve as a majority of the Board of Directors for these organizations.

Significant intercompany transactions and accounts have been eliminated in the financial statements. Separate financial statements for the individual component units may be obtained from the **Agency's** Finance Department.

### Deferred Outflows/Inflows of Resources

In addition to assets, the statements of net position will sometimes report a separate section for deferred outflows of resources. This separate financial statement element represents a consumption of net position that applies to a future period(s) and so will

**Note 1 - Summary of Significant Accounting Policies (Continued)**

Deferred Outflows/Inflows of Resources (Continued)

not be recognized as an outflow of resources (expense) until then. **Agency** contributions that have been made into the Virginia Retirement System (see Notes 8 and 9), investment experience in the Virginia Retirement System, as well as bond issuance costs (see Note 10) are the only items that qualify for reporting in this category.

In addition to liabilities, the statements of net position may report a separate section for deferred inflows of resources. This separate financial statement element represents an acquisition of net position that applies to a future period(s) and so will not be recognized as an inflow of resources (revenue) until that time. The net difference between projected and actual earnings on investments and investment experience in the Virginia Retirement System (see Notes 8 and 9) are the only items that qualify for reporting in this category.

Basis of Accounting

The **Agency** is funded by federal, state, and local funds. Its accounting policies are governed by applicable provisions of these grants and applicable pronouncements and publications of the grantors. The **Agency** utilizes the accrual basis of accounting where revenues are recorded when earned and expenses recorded when due.

Financial Statement Presentation

The accompanying financial statements are prepared in accordance with pronouncements issued by the Governmental Accounting Standards Board. The principles prescribed by GASB represent generally accepted accounting principles applicable to governmental units.

Enterprise Fund Accounting

The **Agency** is a governmental health care entity and is required to follow the accounting and reporting practices of the Governmental Accounting Standards Board. For financial reporting purposes, the **Agency** utilizes the enterprise fund method of accounting whereby revenue and expenses are recognized on the accrual basis. Substantially all revenues and expenses are subject to accrual.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

**Note 1 - Summary of Significant Accounting Policies (Continued)**

Cash and Cash Equivalents

The **Agency** maintains cash accounts with financial institutions in accordance with the *Virginia Security for Public Deposits Act* of the *Code of Virginia (1950),* as amended. The Act requires financial institutions to meet specific collateralization requirements. Cash and cash equivalents include investments in highly liquid debt instruments with an original maturity of three months or less from the date of acquisition.

Investments

Investments are reported at fair value.

Net Individual Service Revenue

Net individual service revenue is reported at the estimated net realizable amounts from individuals, third-party payers, and others for services rendered. Revenue under third-party payer agreements is subject to audit and retroactive adjustment. Retroactive adjustments are reported in operations in the year of settlement.

Financial Assistance

The **Agency** is required to collect the cost of services from third-party sources and those individuals who are able to pay. However, the payment of amounts charged is based on individual circumstances and unpaid balances are pursued to the extent of the individual's ability to pay. The **Agency** has established procedures for granting financial assistance in cases of hardship. The granting of financial assistance results in a substantial reduction and/or elimination of charges to individuals. Because the **Agency** does not pursue the collection of amounts determined to qualify for financial assistance, they are not reported as revenue.

The vast majority of fees collected result from Medicaid billings.

Capital Assets

Capital asset acquisitions with a cost of $5,000 or more are capitalized and are recorded at cost. Depreciation is provided over the estimated useful life of each class of depreciable assets ranging from 5 to 39 years and is computed using the straight-line method. Donated capital assets are recorded at their estimated fair market value at the time of the gift. Depreciation expense for the years ended June 30, 2019 and 2018, was 938,095 and $728,925, respectively.

Restricted Assets

The **Agency** segregates monies held on behalf of third parties, restricted donations, and grants which have not yet been totally expended for their intended purposes.

**Note 1 - Summary of Significant Accounting Policies (Continued)**

Compensated Absences

Employees are entitled to certain compensated absences based upon length of employment. Paid time off (PTO) includes vacation and certain other compensated absences that vest with the employee. Provision for the estimated liability for these compensated absences has been recorded in the financial statements.

Budgetary Accounting

The **Agency** follows these procedures in establishing its budgets:

1. In response to Letters of Notification received from the Department of Behavioral Health and Developmental Services (the Department), the **Agency** submits a Performance Contract to the Department. This application contains complete budgets for all Core Services.
2. The **Agency's** Performance Contract is filed with the Department during the fiscal year, 45 working days after the end of the second quarter. The final quarterly report is due by August 31 following the end of the fiscal year, unless extended.
3. If any changes are made during the fiscal year in state or federal block grants or local match funds, the **Agency** submits Performance Contract revisions which reflect these changes in time to be received by the Department by required deadlines.

Operating and Nonoperating Revenues and Expenses

Operating revenues and expenses are defined as those items that result from providing services and include all transactions and events which are not capital and related financing, noncapital financing or investing activities. Nonoperating revenues are defined as grants, investments and other income. Nonoperating expenses are defined as noncapital related financing and other expenses.

Net Position

Net position is the difference between a) assets and deferred outflows of resources, and b) liabilities and deferred inflows of resources. Net investment in capital assets represents capital assets, less accumulated depreciation, less any outstanding debt related to the acquisition, construction, or improvement of those assets. Deferred outflows of resources and deferred inflows of resources that are attributable to the acquisition, construction, or improvement of those assets or related debt are also included in this component of net position.

Net Position Flow Assumption

The **Agency** may fund outlays for a particular purpose from both restricted and unrestricted resources. In order to calculate the amounts to report as restricted net position and unrestricted net position in the financial statements, a flow assumption must be made about the order in which the resources are considered to be applied. It is the **Agency's** policy to consider restricted net position to have been depleted or used before unrestricted net position is applied.

**Note 1 - Summary of Significant Accounting Policies (Continued)**

Rental Income

The component unit organizations receive rental income from tenants eligible for certain U.S. Department of Housing and Urban Development (HUD) programs. Tenant lease agreements are generally for one-year terms and rental income is recorded when earned. This revenue is reported in other nonoperating income for financial reporting.

Fiscal Agent

The **Agency** serves as its own fiscal agent.

Pension Plan

The Virginia Retirement System (VRS) Political Subdivision Retirement Plan is a multi-employer, agent plan. For purposes of measuring the net pension liability, deferred outflows of resources and deferred inflows of resources related to pensions, and pension expense, information about the fiduciary net position of the **Agency's** Retirement Plan and the additions to/deductions from the **Agency's** Retirement Plan's net fiduciary position have been determined on the same basis as they were reported by the Virginia Retirement System (VRS). For this purpose, benefit payments (including refunds of employee contributions) are recognized when due and payable in accordance with the benefit terms. Investments are reported at fair value.

Group Life Insurance Program

The Virginia Retirement System (VRS) Group Life Insurance Program is a multiple employer, cost-sharing plan. It provides coverage to state employees, teachers, and employees of participating political subdivisions. The Group Life Insurance Program was established pursuant to Section 51.1-500 et seq. of the *Code of Virginia (1950)*, as amended, and which provides the authority under which benefit terms are established or may be amended. The Group Life Insurance Program is a defined benefit plan that provides a basic group life insurance benefit for employees of participating employers. For purposes of measuring the net Group Life Insurance Program OPEB liability, deferred outflows of resources and deferred inflows of resources related to the Group Life Insurance Program OPEB, and Group Life Insurance Program OPEB expense, information about the fiduciary net position of the Virginia Retirement System (VRS) Group Life Insurance Program OPEB and the additions to/deductions from the VRS Group Life Insurance Program OPEB's net fiduciary position have been determined on the same basis as they were reported by VRS. In addition, benefit payments are recognized when due and payable in accordance with the benefit terms. Investments are reported at fair value.

## Note 2 - Deposits and Investments

### Deposits

Deposits with banks are covered by the Federal Deposit Insurance Corporation (FDIC) and collateralized in accordance with the *Virginia Security for Public Deposits Act* (the Act) Section 2.2-4400 et. Seq. of the *Code of Virginia (1950),* as amended. Under the Act, banks and savings institutions holding public deposits in excess of the amount insured by the FDIC must pledge collateral to the Commonwealth of Virginia Treasury Board. Financial institutions may choose between two collateralization methodologies and, depending upon that choice, will pledge collateral that ranges in the amounts from 50% to 130% of excess deposits. Accordingly, all deposits are considered fully collateralized.

### Restricted Cash Funds

Restricted cash consists of debt reserve funds and amounts held by component unit organizations which are restricted for allowable HUD program activities. A summary of these amounts are as follows:

| | 2019 | 2018 |
|---|---|---|
| Restricted cash and cash equivalents | | |
| Debt reserve funds | $ 228,503 | $ 228,435 |
| HUD programs | 152,277 | 151,833 |
| Total restricted cash and cash equivalents | $ 380,780 | $ 380,268 |

### Investments

Statutes authorize the **Agency** to invest in obligations of the United States or agencies thereof, obligations of the Commonwealth of Virginia or political subdivisions thereof, obligations of the International Bank for Reconstruction and Development (World Bank), the Asian Development Bank, the African Development Bank, "prime quality" commercial paper and certain corporate notes, banker's acceptances, repurchase agreements, and the State Treasurer's Local Government Investment Pool (LGIP).

### Cash and Cash Equivalents

| | 2019 | 2018 |
|---|---|---|
| Reconciliation of cash and cash equivalents | | |
| Cash on hand | $ 8,635 | $ 8,845 |
| Cash on deposit with banks | 4,142,448 | 5,580,563 |
| Total cash and cash equivalents | $ 4,151,083 | $ 5,589,408 |

**Note 3 - Accounts Receivable and Accrued Revenue**

Deposits

At June 30, 2019 and 2018, the **Agency** had accounts receivable and accrued revenue due, net of allowance for uncollectible accounts of $1,626,925 and $1,453,808, respectively, from the following primary sources:

| | 2019 | 2018 |
|---|---|---|
| Virginia Dept. of Medical Assistance Services (Medicaid) | $ 558,194 | $ 567,370 |
| Direct individual, third party, and other | 715,154 | 521,523 |
| Other | 36,508 | 23,418 |
| Total | $ 1,309,856 | $ 1,112,311 |

Other than the amounts due for Medicaid charges, there are no other individually significant sources of receivables.

**Note 4 - Prepaid Items**

Prepaid items consist of the following:

| | 2019 | 2018 |
|---|---|---|
| Prepayment on vehicle purchase | $ 76,380 | $ 63,927 |
| Prepayment of insurance | 1,800 | 1,743 |
| Prepayment of construction-related expenses | - | 2,640 |
| Conference | ( 9,813) | - |
| Total | $ 68,367 | $ 68,310 |

## Note 5 - Capital Assets

The following is a summary of the changes in capital assets for the fiscal year ended June 30, 2019:

| | Beginning Balance | Increases | Decreases | Ending Balance |
|---|---|---|---|---|
| Capital assets not being depreciated | | | | |
| Land | $ 2,299,354 | $ - | $ - | $ 2,299,354 |
| Construction in progress | 119,412 | 2,499,250 | 15,582 | 2,603,080 |
| Total capital assets not being depreciated | 2,418,766 | 2,499,250 | 15,582 | 4,902,434 |
| Capital assets being depreciated | | | | |
| Buildings and improvements | 19,200,261 | 53,281 | - | 19,253,542 |
| Furniture, fixtures, and equipment | 700,560 | 40,343 | - | 740,903 |
| Vehicles | 2,470,332 | 319,635 | 263,335 | 2,526,632 |
| Total capital assets being depreciated | 22,371,153 | 413,259 | 263,335 | 22,521,077 |
| Accumulated depreciation | | | | |
| Buildings and improvements | 4,136,753 | 500,054 | - | 4,636,807 |
| Furniture, fixtures, and equipment | 507,694 | 87,259 | - | 594,953 |
| Vehicles | 1,514,937 | 350,782 | 243,790 | 1,621,929 |
| Total accumulated depreciation | 6,159,384 | 938,095 | 243,790 | 6,853,689 |
| Net capital assets being depreciated | 16,211,769 | ( 524,836) | 19,545 | 15,667,388 |
| Total net capital assets | $ 18,630,535 | $ 1,974,414 | $ 35,127 | $ 20,569,822 |
| Reconciliation of increases in accumulated depreciation to depreciation and amortization expense in the Statements of Revenues, Expenses, and Changes in Net Position | | | | |
| Depreciation expense | | $ 938,095 | | |

**Note 5 - Capital Assets (Continued)**

The following is a summary of the changes in capital assets for the fiscal year ended June 30, 2018:

| | Beginning Balance | Increases | Decreases | Ending Balance |
|---|---|---|---|---|
| Capital assets not being depreciated | | | | |
| Land | $ 1,877,875 | $ 421,479 | $ - | $ 2,299,354 |
| Construction in progress | 3,048,254 | 119,412 | 3,048,254 | 119,412 |
| Total capital assets not being depreciated | 4,926,129 | 540,891 | 3,048,254 | 2,418,766 |
| Capital assets being depreciated | | | | |
| Buildings and improvements | 15,259,612 | 3,945,853 | 5,204 | 19,200,261 |
| Furniture, fixtures, and equipment | 633,538 | 68,535 | 1,513 | 700,560 |
| Vehicles | 2,540,006 | 248,834 | 318,508 | 2,470,332 |
| Total capital assets being depreciated | 18,433,156 | 4,263,222 | 325,225 | 22,371,153 |
| Accumulated depreciation | | | | |
| Buildings and improvements | 3,762,265 | 379,692 | 5,204 | 4,136,753 |
| Furniture, fixtures, and equipment | 431,926 | 76,686 | 918 | 507,694 |
| Vehicles | 1,551,246 | 272,547 | 308,856 | 1,514,937 |
| Total accumulated depreciation | 5,745,437 | 728,925 | 314,978 | 6,159,384 |
| Net capital assets being depreciated | 12,687,719 | 3,534,297 | 10,247 | 16,211,769 |
| Total net capital assets | $ 17,613,848 | $ 4,075,188 | $ 3,058,501 | $ 18,630,535 |
| Reconciliation of increases in accumulated depreciation to depreciation and amortization expense in the Statements of Revenues, Expenses, and Changes in Net Position | | | | |
| Depreciation expense | | $ 728,925 | | |

**Note 6 - Operating Lease Commitments**

The **Agency** leases office space and other facilities from various lessors. The lease terms range from monthly to five years. The future minimum lease requirements are as follows:

| Year Ending June 30 | Amount |
|---|---|
| 2020 | $ 45,122 |
| 2021 | 15,113 |
| 2022 | - |
| 2023 | - |
| 2024 | - |
| Total: | $ 60,235 |

Rent expenses totaled $465,854 for 2019 and $309,732 for 2018.

**Note 7 - Compensated Absences**

In accordance with Governmental Accounting Standards Board Statement No. 16, *Accounting for Compensated Absences,* the **Agency** has accrued the liability arising from compensated absences.

The **Agency's** employees earn leave based on length of service. The **Agency** has outstanding accrued leave pay totaling $816,343 and $849,376 at June 30, 2019 and 2018, respectively. All amounts for accrued leave are considered to be current liabilities.

**Note 8 - Pension Plan**

Plan Description

| | |
|---|---|
| Name of Plan: | Virginia Retirement System (VRS) |
| Identification of Plan: | Agent and Cost-Sharing Multiple-Employer Pension Plan |
| Administering Entity: | Virginia Retirement System (System) |

All full-time, salaried permanent employees of the **Agency** are automatically covered by VRS Retirement Plan upon employment. This plan is administered by the Virginia Retirement System (the System) along with plans for other employer groups in the Commonwealth of Virginia. Members earn one month of service credit for each month they are employed and for which they and their employer pay contributions to VRS. Members are eligible to purchase prior service, based on specific criteria as defined in the *Code of Virginia (1950)*, as amended. Eligible prior service that may be purchased includes prior public service, active military service, certain periods of leave, and previously refunded service.

The System administers three different benefit structures for covered employees - Plan 1, Plan 2, and Hybrid. Each of these benefit structures has different eligibility criteria. The specific information for each plan and the eligibility for covered groups within each plan are set out as follows:

*VRS - PLAN 1*

1. **About the Plan** - Plan 1 is a defined benefit plan. The retirement benefit is based on a member's age, creditable service and average final compensation at retirement using a formula.
2. **Eligible Members** - Employees are in Plan 1 if their membership date is before July 1, 2010, and they were vested as of January 1, 2013, and they have not taken a refund.

**Note 8 - Pension Plan (Continued)**

Plan Description (Continued)

*VRS - PLAN 1 (Continued)*

3. **Hybrid Opt-In Election** - VRS non-hazardous duty covered Plan 1 members were allowed to make an irrevocable decision to opt into the Hybrid Retirement Plan during a special election window held January 1 through April 30, 2014.

   The Hybrid Retirement Plan's effective date for eligible Plan 1 members who opted in was July 1, 2014.

   If eligible deferred members returned to work during the election window, they were also eligible to opt into the Hybrid Retirement Plan.

   Members who were eligible for an optional retirement plan (ORP) and had prior service under Plan 1 were not eligible to elect the Hybrid Retirement Plan and remain as Plan 1 or ORP.

4. **Retirement Contributions** - Employees contribute 5.00% of their compensation each month to their member contribution account through a pre-tax salary reduction. Member contributions are tax-deferred until they are withdrawn as part of a retirement benefit or as a refund. The employer makes a separate actuarially determined contribution to VRS for all covered employees. VRS invests both member and employer contributions to provide funding for the future benefit payment.

5. **Creditable Service** - Creditable service includes active service. Members earn creditable service for each month they are employed in a covered position. It also may include credit for prior service the member has purchased or additional creditable service the member was granted. A member's total creditable service is one of the factors used to determine their eligibility for retirement and to calculate their retirement benefit. It also may count toward eligibility for the health insurance credit in retirement, if the employer offers the health insurance credit.

6. **Vesting** - Vesting is the minimum length of service a member needs to qualify for a future retirement benefit. Members become vested when they have at least five years (60 months) of creditable service. Vesting means members are eligible to qualify for retirement if they meet the age and service requirements for their plan. Members also must be vested to receive a full refund of their member contribution account balance if they leave employment and request a refund.

   Members are always 100% vested in the contributions that they make.

7. **Calculating the Benefit** - The Basic Benefit is calculated based on a formula using the member's average final compensation, a retirement multiplier and total service credit at retirement. It is one of the benefit payout options available to a member at retirement.

   An early retirement reduction factor is applied to the Basic Benefit if the member retires with a reduced retirement benefit or selects a benefit payout option other than the Basic Benefit.

**Note 8 - Pension Plan (Continued)**

Plan Description (Continued)

*VRS - PLAN 1 (Continued)*

8. **Average Final Compensation** - A member's average final compensation is the average of the 36 consecutive months of highest compensation as a covered employee.
9. **Service Retirement Multiplier VRS** - The retirement multiplier is a factor used in the formula to determine a final retirement benefit. The retirement multiplier for nonhazardous duty members is 1.70%.
10. **Normal Retirement Age VRS** - Age 65.
11. **Earliest Unreduced Retirement Eligibility VRS** - Age 65 with at least five years (60 months) of creditable service or at age 50 with at least 30 years of creditable service.
12. **Earliest Reduced Retirement Eligibility VRS** - Age 55 with at least five years (60 months) of creditable service or age 50 with at least 10 years of creditable service.
13. **Cost-of-Living Adjustment (COLA) in Retirement** - The Cost-of-Living Adjustment (COLA) matches the first 3.00% increase in the Consumer Price Index for all Urban Consumers (CPI-U) and half of any additional increase (up to 4.00%) up to a maximum COLA of 5.00%.

    Eligibility - For members who retire with an unreduced benefit or with a reduced benefit with at least 20 years of creditable service, the COLA will go into effect on July 1 after one full calendar year from the retirement date.

    For members who retire with a reduced benefit and who have less than 20 years of creditable service, the COLA will go into effect on July 1 after one calendar year following the unreduced retirement eligibility date.

    Exceptions to COLA Effective Dates - The COLA is effective July 1 following one full calendar year (January 1 to December 31) under any of the following circumstances:

    - The member is within five years (60 months) of qualifying for an unreduced retirement benefit as of January 1, 2013.
    - The member retires on disability.
    - The member retires directly from short-term or long-term disability under the Virginia Sickness and Disability Program (VSDP).
    - The member is involuntarily separated from employment for causes other than job performance or misconduct and is eligible to retire under the *Workforce Transition Act* or the Transitional Benefits Program.
    - The member dies in service and the member's survivor or beneficiary is eligible for a monthly death-in-service benefit. The COLA will go into effect on July 1 following one full calendar year (January 1 to December 31) from the date the monthly benefit begins.

**Note 8 - Pension Plan (Continued)**

Plan Description (Continued)

*VRS - PLAN 1 (Continued)*

14. **Disability Coverage** - Members who are eligible to be considered for disability retirement and retire on disability, the retirement multiplier is 1.70% on all service, regardless of when it was earned, purchased or granted.

15. **Purchase of Prior Service** - Members may be eligible to purchase service from previous public employment, active duty military service, an eligible period of leave or VRS refunded service as creditable service in their plan. Prior creditable service counts toward vesting, eligibility for retirement and the health insurance credit. Only active members are eligible to purchase prior service. Members also may be eligible to purchase periods of leave without pay.

*VRS - PLAN 2*

1. **About the Plan** - Plan 2 is a defined benefit plan. The retirement benefit is based on a member's age, creditable service and average final compensation at retirement using a formula.

2. **Eligible Members** - Employees are in Plan 2 if their membership date is on or after July 1, 2010, or their membership date is before July 1, 2010, and they were not vested as of January 1, 2013.

3. **Hybrid Opt-In Election** - Eligible Plan 2 members were allowed to make an irrevocable decision to opt into the Hybrid Retirement Plan during a special election window held January 1 through April 30, 2014.

   The Hybrid Retirement Plan's effective date for eligible Plan 2 members who opted in was July 1, 2014.

   If eligible deferred members returned to work during the election window, they were also eligible to opt into the Hybrid Retirement Plan.

   Members who were eligible for an optional retirement plan (ORP) and have prior service under Plan 2 were not eligible to elect the Hybrid Retirement Plan and remain as Plan 2 or ORP.

**Note 8 - Pension Plan (Continued)**

Plan Description (Continued)

*VRS - PLAN 2 (Continued)*

4. **Retirement Contributions** – Same as Plan 1.
5. **Creditable Service** - Same as Plan 1.
6. **Vesting** - Same as Plan 1.
7. **Calculating the Benefit** - See definition under Plan 1.
8. **Average Final Compensation** - A member's average final compensation is the average of their 60 consecutive months of highest compensation as a covered employee.
9. **Service Retirement Multiplier VRS** - Same as Plan 1 for service earned, purchased or granted prior to January 1, 2013. For nonhazardous duty members, the retirement multiplier is 1.65% for creditable service earned, purchased or granted on or after January 1, 2013.
10. **Normal Retirement Age** - Normal Social Security retirement age.
11. **Earliest Unreduced Retirement Eligibility VRS** - Normal Social Security retirement age with at least five years (60 months) of creditable service or when their age and service equal 90.
12. **Earliest Reduced Retirement Eligibility VRS** - Age 60 with at least five years (60 months) of creditable service.
13. **Cost-of-Living Adjustment (COLA) in Retirement** - The Cost-of-Living Adjustment (COLA) matches the first 2.00% increase in the CPI-U and half of any additional increase (up to 2.00%), for a maximum COLA of 3.00%.

    Eligibility - Same as Plan 1.

    Exceptions to COLA Effective Dates - Same as Plan 1.
14. **Disability Coverage** - Members who are eligible to be considered for disability retirement and retire on disability, the retirement multiplier is 1.65% on all service, regardless of when it was earned, purchased or granted.
15. **Purchase of Prior Service** - Same as Plan 1.

**Note 8 - Pension Plan (Continued)**

Plan Description (Continued)

*HYBRID RETIREMENT PLAN*

1. **About the Hybrid Retirement Plan** - The Hybrid Retirement Plan combines the features of a defined benefit plan and a defined contribution plan.
   - The defined benefit is based on a member's age, creditable service and average final compensation at retirement using a formula.
   - The benefit from the defined contribution component of the plan depends on the member and employer contributions made to the plan and the investment performance of those contributions.
   - In addition to the monthly benefit payment payable from the defined benefit plan at retirement, a member may start receiving distributions from the balance in the defined contribution account, reflecting the contributions, investment gains or losses, and any required fees.
2. **Eligible Members** - Employees are in the Hybrid Retirement Plan if their membership date is on or after January 1, 2014. This includes:
   - **Agency** employees*
   - Members in Plan 1 or Plan 2 who elected to opt into the plan during the election window held January 1 - April 30, 2014; the plan's effective date for opt-in members was July 1, 2014.

   ***Non-Eligible Members** - Some employees are not eligible to participate in the Hybrid Retirement Plan. They include:
   - **Agency** employees who are covered by enhanced benefits for hazardous duty employees
   - Those employees eligible for an optional retirement plan (ORP) must elect the ORP plan or the Hybrid Retirement Plan. If these members have prior service under Plan 1 or Plan 2, they are not eligible to elect the Hybrid Retirement Plan and must select Plan 1 or Plan 2 (as applicable) or ORP.
3. **Retirement Contributions** - A member's retirement benefit is funded through mandatory and voluntary contributions made by the member and the employer to both the defined benefit and the defined contribution components of the plan. Mandatory contributions are based on a percentage of the employee's creditable compensation and are required from both the member and the employer. Additionally, members may choose to make voluntary contributions to the defined contribution component of the plan, and the employer is required to match those voluntary contributions according to specified percentages.

**Note 8 - Pension Plan (Continued)**

Plan Description (Continued)

*HYBRID RETIREMENT PLAN*

4. **Creditable Service**

Defined Benefit Component - Under the defined benefit component of the plan, creditable service includes active service. Members earn creditable service for each month they are employed in a covered position. It also may include credit for prior service the member has purchased or additional creditable service the member was granted. A member's total creditable service is one of the factors used to determine their eligibility for retirement and to calculate their retirement benefit. It also may count toward eligibility for the health insurance credit in retirement, if the employer offers the health insurance credit.

Defined Contributions Component - Under the defined contribution component, creditable service is used to determine vesting for the employer contribution portion of the plan.

5. **Vesting**

Defined Benefit Component - Defined benefit vesting is the minimum length of service a member needs to qualify for a future retirement benefit. Members are vested under the defined benefit component of the Hybrid Retirement Plan when they reach five years (60 months) of creditable service.

Plan 1 or Plan 2 members with at least five years (60 months) of creditable service who opted into the Hybrid Retirement Plan remain vested in the defined benefit component.

Defined Contributions Component - Defined contribution vesting refers to the minimum length of service a member needs to be eligible to withdraw the employer contributions from the defined contribution component of the plan.

Members are always 100% vested in the contributions that they make.

Upon retirement or leaving covered employment, a member is eligible to withdraw a percentage of employer contributions to the defined contribution component of the plan, based on service.

- After two years (24 months), a member is 50% vested and may withdraw 50% of employer contributions.
- After three years (36 months), a member is 75% vested and may withdraw 75% of employer contributions.
- After four (4) or more years, a member is 100% vested and may withdraw 100% of employer contributions.

Distribution is not required by law until age 70½.

**Note 8 - Pension Plan (Continued)**

Plan Description (Continued)

*HYBRID RETIREMENT PLAN (Continued)*

7. **Calculating the Benefit**

   Defined Benefit Component - See definition under Plan 1.

   Defined Contribution Component - The benefit is based on contributions made by the member and any matching contributions made by the employer, plus net investment earnings on those contributions.

8. **Average Final Compensation** - Same as Plan 2. It is used in the retirement formula for the defined benefit component of the plan.

9. **Service Retirement Multiplier**

   Defined Benefit Component VRS: The retirement multiplier for the defined benefit component is 1.00%.

   For members who opted into the Hybrid Retirement Plan from Plan 1 or Plan 2, the applicable multipliers for those plans will be used to calculate the retirement benefit for service credited in those plans.

   Defined Contribution Component - Not applicable.

10. **Normal Retirement Age**

    Defined Benefit Component VRS - Same as Plan 2.

    Defined Contribution Component - Members are eligible to receive distributions upon leaving employment, subject to restrictions.

11. **Earliest Unreduced Retirement Eligibility**

    Defined Benefit Component VRS - Normal Social Security retirement age and have at least five years (60 months) of creditable service or when their age and service equal 90.

    Defined Contribution Component - Members are eligible to receive distributions upon leaving employment, subject to restrictions.

12. **Earliest Reduced Retirement Eligibility**

    Defined Benefit Component VRS - Age 60 with at least five years (60 months) of creditable service.

    Defined Contribution Component - Members are eligible to receive distributions upon leaving employment, subject to restrictions.

**Note 8 - Pension Plan (Continued)**

Plan Description (Continued)

*HYBRID RETIREMENT PLAN (Continued)*

13. **Cost-of-Living Adjustment (COLA) in Retirement**

Defined Benefit Component - Same as Plan 2.

Defined Contribution Component - Not applicable.

Eligibility - Same as Plan 1 and Plan 2.

Exceptions to COLA Effective Dates - Same as Plan 1 and Plan 2.

16. **Disability Coverage** - Employees of **Agency** (including Plan 1 and Plan 2 opt-ins) participate in the Virginia Local Disability Program (VLDP) unless their local governing body provides an employer-paid comparable program for its members.

Hybrid members (including Plan 1 and Plan 2 opt-ins) covered under VLDP are subject to a one-year waiting period before becoming eligible for non-work-related disability benefits.

17. **Purchase of Prior Service**

Defined Benefit Component - Same as Plan 1 with the following exceptions:

- Hybrid Retirement Plan members are ineligible for ported service.

Defined Contribution Component - Not applicable.

Employees Covered by Benefit Terms

As of the June 30, 2017, actuarial valuation, the following employees were covered by the benefit terms of the pension plan:

| | Number | |
|---|---|---|
| | 2017 | 2016 |
| Inactive members or their beneficiaries currently receiving benefits | 119 | 112 |
| Inactive members | | |
| Vested inactive members | 65 | 61 |
| Non-vested inactive members | 147 | 143 |
| Inactive members active elsewhere in VRS | 97 | 93 |
| Total inactive members | 309 | 297 |
| Active members | 260 | 264 |
| Total covered employees | 688 | 673 |

**Note 8 - Pension Plan (Continued)**

Contributions

The contribution requirement for active employees is governed by Section 51.1-145 of the *Code of Virginia (1950),* as amended, but may be impacted as a result of funding options provided to political subdivisions by the Virginia General Assembly. Employees are required to contribute 5.00% of their compensation toward their retirement.

The **Agency's** contractually required employer contribution rate for the year ended June 30, 2019 was 0.77% of covered employee compensation. This rate was based on an actuarially determined rate from an actuarial valuation as of June 30, 2017.

This rate, when combined with employee contributions, was expected to finance the costs of benefits earned by employees during the year, with an additional amount to finance any unfunded accrued liability. Contributions to the pension plan from the **Agency** were $21,740 and $52,908 for the years ended June 30, 2019, and June 30, 2018, respectively.

Net Pension Liability

The net pension liability (NPL) is calculated separately for each employer and represents that particular employer's total pension liability determined in accordance with GASB statement No. 68, less that employer's fiduciary net position. For the **Agency**, the net pension liability was measured as of June 30, 2018. The total pension liability used to calculate the net pension liability was determined by an actuarial valuation performed as of June 30, 2017, rolled forward to the measurement date of June 30, 2018.

Actuarial Assumptions - General Employees

The total pension liability for General Employees in the **Agency's** Retirement Plan was based on an actuarial valuation as of June 30, 2017, using the Entry Age Normal actuarial cost method and the following assumptions, applied to all periods included in the measurement and rolled forward to the measurement date of June 30, 2018.

| | | |
|---|---|---|
| Inflation | 2.50% | |
| Salary increases, including inflation | 3.50% - 5.35% | |
| Investment rate of return | 7.00% | net of pension plan investment expense, including inflation* |

**Note 8 - Pension Plan (Continued)**

Actuarial Assumptions - General Employees (Continued)

* Administrative expenses as a percent of the market value of assets for the last experience study were found to be approximately 0.06% of the market assets for all of the VRS plans. This would provide an assumed investment return rate for GASB purposes of slightly more than the assumed 7.00%. However, since the difference was minimal, and a more conservative 7.00% investment return assumption provided a projected plan net position that exceeded the projected benefit payments, the long-term expected rate of return on investments was assumed to be 7.00% to simplify preparation of pension liabilities.

Mortality rates:

All Others (Non 10 Largest) - Non-Hazardous Duty: 15.00% of deaths are assumed to be service related

Pre-Retirement:
RP-2014 Employee Rates to age 80, Healthy Annuitant Rates at ages 81 and older projected with scale BB to 2020; males 95.00% of rates; females 105.00% of rates.

Post-Retirement:
RP-2014 Employee Rates to age 49, Healthy Annuitant Rates at ages 50 and older projected with scale BB to 2020; males set forward 3 years (36 months); females 1.00% increase compounded from ages 70 to 90.

Post-Disablement:
RP-2014 Disability Mortality Rates projected with scale BB to 2020; males set forward 2 years (24 months), 110.00% of rates; females 125.00% of rates.

The actuarial assumptions used in the June 30, 2017, valuation were based on the results of an actuarial experience study for the period from July 1, 2012, through June 30, 2016. Changes to the actuarial assumptions as a result of the experience study are as follows:

**Note 8 - Pension Plan (Continued)**

Actuarial Assumptions - General Employees (Continued)

All Others (Non 10 Largest) – Non-Hazardous Duty:

| | |
|---|---|
| Mortality Rates (Pre-retirement, post-retirement healthy, and disabled | Update to a more current mortality table - RP-2014 projected to 2020 |
| Retirement Rates | Lowered rates at older ages and changed final retirement from 70 to 75 |
| Withdrawal Rates | Adjusted rates to better fit experience at each year age and service through 9 years of service |
| Disability Rates | Lowered rates |
| Salary Scale | No change |
| Line of Duty Disability | Increase rate from 14.00% to 15.00% |

Long-Term Expected Rate of Return

The long-term expected rate of return on pension System investments was determined using a log-normal distribution analysis in which best-estimate ranges of expected future real rates of return (expected returns, net of pension System investment expense and inflation) are developed for each major asset class. These ranges are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by the target asset allocation percentage and by adding expected inflation. The target asset allocation and best estimate of arithmetic real rates of return for each major asset class are summarized in the following table:

| Asset Class (Strategy) | Target Allocation | Arithmetic Long-Term Expected Rate of Return | Weighted Average Long-Term Expected Rate of Return |
|---|---|---|---|
| Public Equity | 40.00% | 4.54% | 1.82% |
| Fixed Income | 15.00% | 0.69% | 0.10% |
| Credit Strategies | 15.00% | 3.96% | 0.59% |
| Real Assets | 15.00% | 5.76% | 0.86% |
| Private Equity | 15.00% | 9.53% | 1.43% |
| Total | 100.00% | | 4.80% |
| | Inflation | | 2.50% |
| | *Expected arithmetic nominal return | | 7.30% |

**Note 8 - Pension Plan (Continued)**

Long-Term Expected Rate of Return (Continued)

* The above allocation provides a one-year return of 7.30%. However, one-year returns do not take into account the volatility present in each of the asset classes. In setting the long-term expected return for the system, stochastic projections are employed to model future returns under various economic conditions. The results provide a range of returns over various time periods that ultimately provide a median return of 6.83%, including expected inflation of 2.50%

Discount Rate

The discount rate used to measure the total pension liability was 7.00%. The projection of cash flows used to determine the discount rate assumed that System member contributions will be made per the VRS Statutes and the employer contributions will be made in accordance with the VRS funding policy at rates equal to the difference between actuarially determined contribution rates adopted by the VRS Board of Trustees and the member rate. Consistent with the phased-in funding provided by the General Assembly for state and teacher employer contributions, the **Agency** was also provided with an opportunity to use an alternative employer contribution rate. For the year ended June 30, 2018, the alternate rate was the employer contribution rate used in FY 2012 or 90.00% of the actuarially determined employer contribution rate from the June 30, 2015, actuarial valuations, whichever was great. From July 1, 2018, on, participating employers are assumed to continue to contribute 100.00% of the actuarially determined contribution rates. Based on those assumptions, the pension plan's fiduciary net position was projected to be available to make all projected future benefit payments of current active and inactive employees. Therefore, the Long-term expected rate of return was applied to all periods of projected benefit payments to determine the total pension liability.

**Note 8 - Pension Plan (Continued)**

Changes in Net Pension Liability (Asset)

| | Increase (Decrease) | | |
|---|---|---|---|
| | Total Pension Liability (a) | Plan Fiduciary Net Position (b) | Net Pension Liability (Asset) (a) - (b) |
| Balances at June 30, 2016 | $ 28,122,266 | $ 33,328,649 | $ ( 5,206,383) |
| Changes for the year | | | |
| Service cost | 901,142 | - | 901,142 |
| Interest | 1,919,004 | - | 1,919,004 |
| Changes of assumptions | ( 376,797) | - | ( 376,797) |
| Differences between expected and actual experience | ( 729,560) | - | ( 729,560) |
| Contributions - employer | - | 60,304 | ( 60,304) |
| Contributions - employee | - | 673,999 | ( 673,999) |
| Net investment income | - | 4,053,758 | ( 4,053,758) |
| Benefit payments, including refunds of employee contributions | ( 1,415,840) | ( 1,415,840) | - |
| Administrative expenses | - | ( 23,673) | 23,673 |
| Other changes | - | ( 3,584) | 3,584 |
| Net changes | 297,949 | 3,344,964 | ( 3,047,015) |
| Balances at June 30, 2017 | 28,420,215 | 36,673,613 | ( 8,253,398) |
| Changes for the year | | | |
| Service cost | 856,857 | - | 856,857 |
| Interest | 1,943,185 | - | 1,943,185 |
| Differences between expected and actual experience | ( 381,868) | - | ( 381,868) |
| Contributions - employer | - | 52,986 | ( 52,986) |
| Contributions - employee | - | 484,223 | ( 484,223) |
| Net investment income | - | 2,699,308 | ( 2,699,308) |
| Benefit payments, including refunds of employee contributions | ( 1,320,860) | ( 1,320,860) | - |
| Administrative expenses | - | ( 23,489) | 23,489 |
| Other changes | - | ( 2,393) | 2,393 |
| Net changes | 1,097,314 | 1,889,775 | ( 792,461) |
| Balances at June 30, 2018 | $ 29,517,529 | $ 38,563,388 | $( 9,045,859) |

**Note 8 - Pension Plan (Continued)**

Sensitivity of the Net Pension Liability (Asset) to Changes in the Discount Rate

The following presents the net pension liability (asset) of the **Agency** using the discount rate of 7.00%, as well as what the **Agency's** net pension liability (asset) would be if it were calculated using a discount rate that is one percentage point lower (6.00%) or one percentage point higher (8.00%) than the current rate:

| | 1.00% Decrease (6.00%) | Current Discount Rate (7.00%) | 1.00% Increase (8.00%) |
|---|---|---|---|
| **Agency's** | | | |
| Net Pension Liability (Asset) | $( 5,308,884) | $( 9,045,859) | $( 12,155,139) |

Pension Income and Deferred Outflows of Resources and Deferred Inflows of Resources Related to Pensions

For the year ended June 30, 2019, the **Agency** recognized pension income of $1,179,531. At June 30, 2019, the **Agency** reported deferred outflows of resources and deferred inflows of resources related to pensions from the following sources:

| | Deferred Outflows of Resources | Deferred Inflows of Resources |
|---|---|---|
| Differences between expected and actual experience | $ - | $ 484,141 |
| Change in assumptions | - | 113,303 |
| Net difference between projected and actual earnings on pension plan investments | - | 335,507 |
| Employer contributions subsequent to the measurement date | 21,740 | - |
| Total | $ 21,740 | $ 932,951 |

For the year ended June 30, 2018, the **Agency** recognized pension income of $1,035,235. At June 30, 2018, the **Agency** reported deferred outflows of resources and deferred inflows of resources related to pensions from the following sources:

**Note 8 - Pension Plan (Continued)**

Pension Income and Deferred Outflows of Resources and Deferred Inflows of Resources Related to Pensions (Continued)

| | Deferred Outflows of Resources | Deferred Inflows of Resources |
|---|---|---|
| Differences between expected and actual experience | $ - | $ 584,467 |
| Change in assumptions | - | 245,050 |
| Net difference between projected and actual earnings on pension plan investments | - | 543,490 |
| Employer contributions subsequent to the measurement date | 52,908 | - |
| Total | $ 52,908 | $ 1,373,007 |

$21,740 reported as deferred outflows of resources related to pensions resulting from the **Agency's** contributions subsequent to the measurement date will be recognized as a reduction of the Net Pension Liability (Asset) in the Fiscal Year ending June 30, 2020. Other amounts reported as deferred outflows of resources and deferred inflows of resources related to pensions will be recognized in pension expense in future reporting periods as follows:

| Year ending June 30 | |
|---|---|
| 2020 | $ ( 385,124) |
| 2021 | $ ( 134,519) |
| 2022 | $ ( 381,211) |
| 2023 | $ ( 32,097) |
| 2024 | $ - |
| Thereafter | $ - |

Pension Plan Data

Information about the VRS Political Subdivision Retirement Plan's is also available in the separately issued VRS 2018 Comprehensive Annual Financial Report (CAFR). A copy of the 2018 VRS CAFR may be downloaded from the VRS website at http://www.varetire.org/Pdf/Publications/2018-annual-report.pdf, or by writing to the System's Chief Financial Officer at P.O. Box 2500, Richmond, VA 23218-2500.

**Note 9 - Group Life Insurance Program**

Plan Description

All full-time, salaried permanent employees of the state agencies, teachers and employees of participating political subdivisions are automatically covered by the VRS Group Life Insurance Program upon employment. This plan is administered by the Virginia Retirement System (the System), along with pensions and other OBEB plans, for public employer groups in the Commonwealth of Virginia.

**Note 9 - Group Life Insurance Program (Continued)**

Plan Description (Continued)

In addition to the Basic Group Life Insurance benefit, members are also eligible to elect additional coverage for themselves as well as a spouse or dependent children through the Optional Group Life Insurance Program. For members who elect the optional group life insurance coverage, the insurer bills employers directly for the premiums. Employers deduct these premiums from members' paychecks and pay the premiums to the insurer. Since this is a separate and fully insured program, it is not included as part of the Group Life Insurance Program OPEB.

The specific information for Group Life Insurance Program OPEB, including eligibility, coverage and benefits is set out below:

*GROUP LIFE INSURANCE PROGRAM PLAN PROVISIONS*

1. **Eligible Employees** - The Group Life Insurance Program was established July 1, 1960 for state employee, teachers and political subdivisions that elect the program.

   Basic group life insurance coverage is automatic upon employment. Coverage ends for employees who leave their position before retirement eligibility or who take a refund of their accumulated retirement member contributions and accrued interest.

2. **Benefits Amounts** - The benefits payable under the Group Life Insurance Program have several components:

   Natural Death Benefit - The natural death benefit is equal to the employee's covered compensation rounded to the next highest thousand and then doubled.

   Accidental Death Benefit - The accidental death benefit is double the natural death benefit.

   Other Benefit Provisions - In addition to the basic natural and accidental death benefits, the program provides additional benefits provided under specific circumstances. These include:

   - Accidental dismemberment benefit
   - Safety belt benefit
   - Repatriation benefit
   - Felonious assault benefit
   - Accelerated death benefit option

3. **Reduction in Benefit Amounts** - The benefit amounts provided to members covered under the Group Life Insurance Program are subject to a reduction factor. The benefit amount reduces by 25% on January 1 following one calendar year of separation. The benefit amount reduces by an additional 25% on each subsequent January 1 until it reaches 25% of its original value.

4. **Minimum Benefit Amount and Cost-of-Living Adjustment (COLA)** - For covered members with at least 30 years of creditable service, there is a minimum benefit payable under the Group Life Insurance Program. The minimum benefit was set at $8,000 by statute. This amount is increased annually based on the VRS Plan 2 cost-of-living adjustment and was increased to $8,279 effective July 1, 2018.

**Note 9 - Group Life Insurance Program (Continued)**

Contributions

The contribution requirements for the Group Life Insurance Program are governed by Section 51.1-506 and Section 51.1-508 of the *Code of Virginia (1950)*, as amended, but may be impacted as a result of funding provided to state agencies and school divisions by the Virginia General Assembly. The total rate for the Group Life Insurance Program was 1.31% of covered employee compensation. This was allocated into an employee and an employer component using a 60/40 split. The employee component was 0.79% (1.31% x 60%) and the employer component was 0.52% (1.31% x 40%). Employers may elect to pay all or part of the employee contribution, however the employer must pay all of the employer contribution. Each employer's contractually required employer contribution rate for the year ended June 30, 2019 was 0.52% of covered employee compensation. This rate was based on an actuarially determined rate from an actuarial valuation as of June 30, 2017. The actuarially determined rate, when combined with employee contributions, was expected to finance the costs of benefits payable during the year, with an additional amount to finance any unfunded accrued liability. Contribution to the Group Life Insurance Program from the **Agency** was $42,015 and $54,000 for the years ended June 30, 2019 and June 30, 2018, respectively.

GLI OPEB Liabilities, GLI OPEB Expense, and Deferred Outflows of Resources and Deferred Inflows of Resources Related to the Group Life Insurance Program OPEB

At June 30, 2019, the **Agency** reported a liability of $814,000 for its proportionate share of the Net GLI OPEB Liability. The Net GLI OPEB Liability was measured as of June 30, 2018 and the total GLI OPEB liability used to calculate the Net GLI OPEB Liability was determined by an actuarial valuation as of that date. The **Agency's** proportion of the Net GLI OPEB Liability was based on the **Agency's** actuarially determined employer contributions to the Group Life Insurance Program for the year ended June 30, 2018 relative to the total of the actuarially determined employer contributions for all participating employers. At June 30, 2018, the **Agency's** proportion was 0.05359% as compared to 0.05614% at June 30, 2017.

For the year ended June 30, 2019, the **Agency** recognized GLI OPEB income of $3,000. Since there was a change in proportionate share between measurement dates, a portion of the GLI OPEB income was related to deferred amounts from changes in proportion.

**Note 9 - Group Life Insurance Program (Continued)**

GLI OPEB Liabilities, GLI OPEB Expense, and Deferred Outflows of Resources and Deferred Inflows of Resources Related to the Group Life Insurance Program OPEB (Continued)

At June 30, 2019, the **Agency** reported deferred outflows of resources and deferred inflows of resources related to the GLI OPEB from the following sources:

| | Deferred Outflows of Resources | Deferred Inflows of Resources |
|---|---|---|
| Differences between expected and actual experience | $ - | $ 15,000 |
| Net difference between projected and actual earnings on GLI OPEB program investments | 40,000 | 26,000 |
| Change in assumptions | - | 34,000 |
| Changes in proportion | - | 43,000 |
| Employer contributions subsequent to the measurement date | 42,015 | - |
| Total | $ 82,015 | $ 118,000 |

$42,015 reported as deferred outflows of resources related to the GLI OPEB resulting from the **Agency's** contributions subsequent to the measurement date will be recognized as a reduction of the Net GLI OPEB Liability in the fiscal year ending June 30, 2020. Other amounts reported as deferred outflows of resources and deferred inflows of resources related to the GLI OPEB will be recognized in the GLI OPEB expense in future reporting periods as follows:

| Year ending June 30 | |
|---|---|
| 2020 | $ ( 21,000) |
| 2021 | $ ( 21,000) |
| 2022 | $ ( 21,000) |
| 2023 | $ ( 13,000) |
| 2019 | $ ( 5,000) |
| Thereafter | $ 3,000 |

Actuarial Assumptions

The total GLI OPEB liability was based on an actuarial valuation as of June 30, 2017, using the Entry Age Normal actuarial cost method and the following assumptions, applied to all periods included in the measurement and rolled forward to the measurement date of June 30, 2018.

**Note 9 - Group Life Insurance Program (Continued)**

Actuarial Assumptions (Continued)

| | |
|---|---|
| Inflation | 2.5 % |
| Salary increases, including inflation – | |
| General state employees | 3.5 % - 5.35 % |
| Teachers | 3.5 % - 5.95 % |
| SPORS employees | 3.5 % - 4.75 % |
| VaLORS employees | 3.5 % - 4.75 % |
| JRS employees | 4.5 % |
| Locality - General employees | 3.5 % - 5.35 % |
| Locality - Hazardous Duty employees | 3.5 % - 4.75 % |
| Investment rate of return | 7.00%, net of investment expenses, including inflation* |

* Administrative expenses as a percent of the market value of assets for the last experience study were found to be approximately 0.06% of the market assets for all of the VRS plans. This would provide an assumed investment return rate for GASB purposes of slightly more than the assumed 7.00%. However, since the difference was minimal, and a more conservative 7.00% investment return assumption provided a projected plan net position that exceeded the projected benefit payments, the long-term expected rate of return on investments was assumed to be 7.00% to simplify preparation of the OPEB liabilities.

Mortality rates - Non-Largest Ten Locality Employers - General Employees

Pre-Retirement:

RP-2014 Employee Rates to age 80, Healthy Annuitant Rates to 81 and older projected with scale BB to 2020; males 95.00% of rates; females 105.00% of rates

Post-Retirement:

RP-2014 Employee Rates to age 49, Healthy Annuitant Rates at ages 50 and older projected with scale BB to 2020; males set forward 3 years; females 1.00% increase compounded from ages 70 to 90.

Post-Disablement:

RP-2014 Disability Life Mortality Table projected with Scale BB to 2020; males set forward 2 years, 110.00% of rates; females 125.00% of rates.

The actuarial assumptions used in the June 30, 2017, valuation were based on the results of an actuarial experience study for the period from July 1, 2012, through June 30, 2016. Changes to the actuarial assumptions as a result of the experience study are as follows:

**Note 9 - Group Life Insurance Program (Continued)**

Actuarial Assumptions (Continued)

| | |
|---|---|
| Mortality Rates (Pre-retirement, post-retirement healthy, and disabled) | Update to a more current mortality table - RP-2014 projected to 2020 |
| Retirement Rates | Lowered retirement rates at older ages and extended final retirement age from 70 to 75 |
| Withdrawal Rates | Adjusted termination rates to better fit experience at each age and service year |
| Disability Rates | Lowered disability rates |
| Salary Scale | No change |
| Line of Duty Disability | Increased rate from 14.00% to 15.00% |

Net GLI OPEB Liability

The net OPEB liability (NOL) for the Group Life Insurance Program represents the program's total OPEB liability determined in accordance with GASB Statement No. 74, less the associated fiduciary net position. As of the measurement date of June 30, 2018, NOL amounts for the Group Life Insurance Program is as follows (amounts expressed in thousands):

| | Group Life Insurance OPEB Program |
|---|---|
| Total GLI OPEB Liability | $ 3,113,508 |
| Plan Fiduciary Net Position | 1,594,773 |
| Employer's Net GLI OPEB Liability (Asset) | $ 1,518,735 |
| Plan Fiduciary Net Position as a Percentage of the Total GLI OPEB Liability | 51.22% |

The total GLI OPEB liability is calculated by the System's actuary, and each plan's fiduciary net position is reported in the System's financial statements. The net GLI OPEB liability is disclosed in accordance with the requirements of GASB Statement No. 74 in the System's notes to the financial statements and required supplementary information.

**Note 9 - Group Life Insurance Program (Continued)**

Long-Term Expected Rate of Return

The long-term expected rate of return on the System's investments was determined using a log-normal distribution analysis in which best-estimate ranges of expected future real rates of return (expected returns, net of System's investment expense and inflation) are developed for each major asset class. These ranges are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by the target asset allocation percentage and by adding expected inflation. The target asset allocation and best estimate of arithmetic real rates of return for each major asset class are summarized in the following table:

| Asset Class (Strategy) | Target Allocation | Arithmetic Long-Term Expected Rate of Return | Weighted Average Long-Term Expected Rate of Return |
|---|---|---|---|
| Public Equity | 40.00% | 4.54% | 1.82% |
| Fixed Income | 15.00% | 0.69% | 0.10% |
| Credit Strategies | 15.00% | 3.96% | 0.59% |
| Real Assets | 15.00% | 5.76% | 0.86% |
| Private Equity | 15.00% | 9.53% | 1.43% |
| Total | 100.00% | | 4.80% |
| | Inflation | | 2.50% |
| *Expected arithmetic nominal return | | | 7.30% |

* The above allocation provides a one-year return of 7.30%. However, one-year returns do not take into account the volatility present in each of the asset classes. In setting the long-term expected return for the system, stochastic projections are employed to model future returns under various economic conditions. The results provide a range of returns over various time periods that ultimately provide a median return of 6.83%, including expected inflation of 2.50%.

Discount Rate

The discount rate used to measure the total GLI OPEB liability was 7.00%. The projection of cash flows used to determine the discount rate assumed that member contributions will be made per the VRS guidance and the employer contributions will be made in accordance with the VRS funding policy at rates equal to the difference between actuarially determined contribution rates adopted by the VRS Board of Trustees and the member rate. Through the fiscal year ending June 30, 2018, the rate contributed by the **Agency** for the GLI OPEB will be subject to the portion of the VRS Board-certified rates that are funded by the Virginia General Assembly which was 100.00% of the actuarially determined contribution rate. From July 1, 2018 on, employers are assumed to contribute 100% of the actuarially determined contribution rates. Based on those assumptions, the GLI OPEB's fiduciary net position was projected to be available to make all projected future benefit payments of eligible employees. Therefore, the long-term expected rate of return was applied to all periods of projected benefit payments to determine the total GLI OPEB liability.

**Note 9 - Group Life Insurance Program (Continued)**

Sensitivity of the Agency's Proportionate Share of the Net GLI OPEB Liability to Changes in the Discount Rate

The following presents the **Agency's** proportionate share of the net GLI OPEB liability using the discount rate of 7.00%, as well as what the **Agency's** proportionate share of the net GLI OPEB liability would be if it were calculated using a discount rate that is one percentage point lower (6.00%) or one percentage point higher (8.00%) than the current rate:

| | 1.00% Decrease (6.00%) | Current Discount Rate (7.00%) | 1.00% Increase (8.00%) |
|---|---|---|---|
| **Agency's** proportionate share of the Group Life Insurance Program Net OPEB Liability | $ 1,063,000 | $ 814,000 | $ 611,000 |

Group Life Insurance Program Fiduciary Net Position

Detailed information about the Group Life Insurance Program's Fiduciary Net Position is available in the separately issued VRS 2018 Comprehensive Annual Financial Report (CAFR). A copy of the 2018 VRS CAFR may be downloaded from the VRS website at http://www.varetire.org/Pdf/Publications/2018-annual-report.pdf, or by writing to the System's Chief Financial Officer at P.O. Box 2500, Richmond, VA, 23218-2500.

**Note 10 - Long-Term Obligations**

Summary of Changes in Long-Term Obligations

| | Mortgages Payable | Compensated Absences |
|---|---|---|
| Balance at July 1, 2017 | $ 7,134,081 | $ 857,835 |
| Add: Issuances / additions | 837,373 | - |
| Deduct: Retirements | 126,807 | 8,459 |
| Balance at July 1, 2018 | 7,844,647 | 849,376 |
| Add: Issuances / additions | 295,000 | - |
| Deduct: Retirements | 423,018 | 33,033 |
| Balance at June 30, 2019 | $ 7,716,629 | $ 816,343 |
| Current Portion | $ 136,526 | $ 816,343 |

Additional detail for compensated absences is reported in Note 7.

Long-Term Debt

| Year ending June 30, | Principal | Interest |
|---|---|---|
| 2020 | $ 136,526 | $ 279,108 |
| 2021 | 141,788 | 273,846 |
| 2022 | 147,266 | 268,368 |
| 2023 | 152,968 | 262,666 |
| 2024-2028 | 994,734 | 1,198,750 |
| 2025-2033 | 918,840 | 1,016,340 |
| 2034-2038 | 1,105,902 | 829,278 |
| 2039-2043 | 1,333,249 | 601,931 |
| 2044-2048 | 1,541,106 | 326,975 |
| 2049-2053 | 796,697 | 112,398 |
| 2054-2058 | 447,553 | 18,931 |
| Total | $ 7,716,629 | $ 5,188,591 |

Total interest cost for fiscal years 2019 and 2018 was $304,861 and $298,087, respectively, of which none was capitalized.

The **Agency** is in compliance with applicable federal arbitrage regulations.

**Note 10 - Long-Term Obligations (Continued)**

Summary of Changes in Long-Term Obligations (Continued)

*Mortgage Loans*

The **Agency** has mortgage loans payable incurred to purchase office and outpatient treatment facilities. Details of the mortgage loans are as follows:

| | Total | Current Portion |
|---|---|---|
| $3,200,000 Rural Development (FmHA) loan dated April 30, 2009, interest only payable in April 2010 and 2011, with monthly installments of $14,432 beginning in May 2011, which includes principal and interest through April 2049, interest at 4.375%, secured by real estate at 15511 Guinn Lane, Culpeper, Virginia | $ 2,874,824 | $ 48,374 |
| $1,000,000 Rural Development (FmHA) loan dated April 30, 2009, interest only payable in April 2010 and 2011, with monthly installments of $4,590 beginning in May 2011, which includes principal and interest through April 2049, interest at 4.50%, secured by real estate at 15511 Guinn Lane, Culpeper, Virginia | 872,564 | 16,145 |
| $3,791,000 Rural Development (FmHA) loan dated July 5, 2016, interest only payable in July 2017, with monthly installments of $13,231 beginning in August 2017, which includes principal and interest at 2.75%, secured by real estate at 13523 Beverly Ford Road, Elkwood, Virginia | 3,679,707 | 58,280 |
| $295,000 Union loan dated January 17, 2019, with monthly installments of $2,383.13 beginning February 2019, which includes principal and interest through January 2026, interest of 5.25%, secured by real estate at 6067 Dumfries Road, Warrenton, Virginia | 289,534 | 13,727 |
| Total | $ 7,716,629 | $ 136,526 |

*Public Facility Refunding Mortgage Bond*

In August 2015, the **Agency** issued an $805,000 public facility refunding mortgage bond (the bond). The bond bears an interest rate of 3.20%. The bond was issued by the **Agency** in order to refund all of the outstanding principal amount of indebtedness reflected by its $1,230,000 Rural Development (FmHA) loan and to pay related administrative and financing costs. The bond is secured by real estate at 15361 Bradford Road, Culpeper, Virginia.

The difference between the bond's issuance amount and the net carrying amount of the debt that was refunded, $37,590, has been reported as a deferred outflow of resources. Each year a portion of deferred outflow of resources is reported as a component of interest expense. For the years ended June 30, 2019, and 2018, the amount reported as a deferred outflow of resources was $26,434 and $29,344, respectively, and the amount reported as a component of interest expense was $2,910 and $2,911 for each year, respectively.

**Note 10 - Long-Term Obligations (Continued)**

The bond's purchase agreement specifies that the **Agency** maintain a certain debt service coverage ratio. As of June 30, 2019, and 2018, the **Agency** has met this requirement.

The outstanding principal balance of the bond at June 30, 2019, was $595,844.

Bond debt service requirements to maturity are as follows:

| Year ending June 30 | Principal | Interest |
|---|---|---|
| 2020 | $ 55,782 | $ 18,690 |
| 2021 | 57,521 | 16,892 |
| 2022 | 59,420 | 15,036 |
| 2023 | 61,280 | 13,119 |
| 2024-2028 | 337,661 | 34,621 |
| 2029-2033 | 24,180 | 421 |
| Total | $ 595,844 | $ 98,779 |

**Note 11 - Commitments and Contingencies**

Federal programs in which the **Agency** participates were audited in accordance with the provisions of *Government Auditing Standards*, issued by the Comptroller General of the United States, and the Uniform Guidance. Pursuant to the provisions, all major programs were tested for compliance with applicable grant requirements. While no matters of noncompliance were disclosed by audit, the Federal Government may subject grant programs to additional compliance tests which may result in disallowed expenditures. In the opinion of management, any future disallowances of current grant program expenditures, if any, would be immaterial.

In 2017, the Department of Behavioral Health and Developmental Services (DBHDS) partnered with the **Agency** to address additional service and support needs in the continuum of care for individuals with developmental disabilities who also have co-occurring behavioral health needs. DBHDS awarded the **Agency** a total of $3,000,000 solely for the development of the two group homes in Northern Virginia. If the **Agency** decides to convert the home(s) for an alternate use or sell within the first twenty years, they will be responsible for paying back a prorated amount for the remaining years, unless DBHDS has agreed to convert the building(s) for another use upon bilateral agreement. The **Agency** will retain title to the group homes.

The **Agency** has entered into a service agreement with a software company for their accounting software system. The software company retains all ownership and intellectual property rights to the software services. The term of the service agreement is seven years beginning September 1, 2016, unless earlier terminated. After August 31, 2023, the service agreement will renew automatically each year. The approximate cost per year of the service agreement unless terminated

**Note 11 - Commitments and Contingencies (Continued)**

is $94,000. However, the **Agency** may incur additional costs based on startup, service label, and other optional service items.

**Note 12 - Risk Management**

The **Agency** insures its potential losses from property casualties, worker's compensation, directors and officers, and professional staff liability with various commercial insurance carriers. All of the policies have low deductible amounts. Automobile and general liability policies have $5,000,000 insured limits. The directors and officers liability policy has a $1,000,000 insured limit and the medical malpractice coverage has a $2,200,000 insured limit. Property damage is insured to $18,390,334. Worker's compensation claims are insured to $1,000,000 per accident and $1,000,000 for total disease coverage. The **Agency** does not require or carry surety bonds on its members. There were no settlements which exceeded insurance coverage in the last three fiscal years.

**Note 13 - Contribution from Local Participating Governmental Units**

The participating local governmental units' appropriated funds for the **Agency's** operations are as follows:

| | 2019 | 2018 |
|---|---|---|
| County of Culpeper | $ 407,471 | $ 407,471 |
| County of Fauquier | 475,215 | 475,215 |
| County of Madison | 81,467 | 81,467 |
| County of Orange | 242,956 | 242,956 |
| County of Rappahannock | 52,857 | 52,857 |
| Total | $ 1,259,966 | $ 1,259,966 |

**Note 14 - Net Individual Revenue Sources**

Net individual revenues for 2019 and 2018 were from the following sources:

| | 2019 | 2018 |
|---|---|---|
| Medicaid | $ 7,498,565 | $ 6,987,957 |
| Direct individual | 432,330 | 464,984 |
| Third Party and other | 962,559 | 1,224,367 |
| Total | $ 8,893,454 | $ 8,677,308 |

**Note 15 - Line of Credit**

The **Agency** has a line of credit with Union Bank and Trust in the amount of $1,000,000.

## Note 16 - Restricted Net Position

Net assets are restricted for the following purposes:

| | 2019 | 2018 |
|---|---|---|
| Property taxes, insurance and other reserves | $ ( 52,750) | $ ( 1,912) |
| Pension plan | 8,134,648 | 6,933,299 |
| Post-employment benefits | ( 849,985) | ( 895,000) |
| Federal and/or state funds not expended at year end | 370,911 | 160,996 |
| Total restricted net position | $ 7,602,824 | $ 6,197,383 |

## Note 17 - Construction of Group Homes

The **Agency** was the recipient of a governmental award from the Commonwealth of Virginia's Department of Behavioral Health and Developmental Services to aid in the construction of two group homes for individuals with developmental disabilities who also have co-occurring behavioral health needs. In accordance with its accounting policy, the **Agency** recognized the grant as follows:

| | |
|---|---|
| Balance at June 30, 2017, reported as deferred inflows | $ 3,000,000 |
| Grant revenue recognized in 2018 | ( 477,657) |
| Balance at June 30, 2018, reported as deferred inflows | 2,522,343 |
| Receipts in 2019 reported as deferred inflows | 826,257 |
| Grant revenue recognized in 2019 | ( 2,241,409) |
| Balance at June 30, 2019, reported as deferred inflows | $ 1,107,191 |

Grant revenue is recognized as the funds are utilized for the construction of the group homes.

## Note 18 - Implementation of New Accounting Standards and Prior Period Adjustments

The **Agency** implemented the financial reporting provisions of Governmental Accounting Standards Board Statement No. 75, *Accounting and Financial Reporting for Postemployment Benefits Other Than Pensions*, during the fiscal year ended June 30, 2018. This Statement establishes standards for measuring and recognizing liabilities, deferred outflows of resources, deferred inflows of resources, and expense/expenditures related to postemployment benefits other than pensions (other postemployment benefits or OPEB). Note disclosure and required supplementary information requirements about OPEB are also addressed. The requirements of this Statement will improve accounting and financial reporting by governmental entities for OPEB. Accordingly, the **Agency** has adjusted its beginning net position balance as follows:

**Note 18 - Implementation of New Accounting Standards and Prior Period Adjustments (Continued)**

| | As Previously Reported | Adjustments | Restated |
|---|---|---|---|
| Deferred post-employment benefits outflows | $ - | $ 54,000 | $ 54,000 |
| Post-employment benefits liability | $ - | $ 845,000 | $ 845,000 |
| Deferred post-employment benefit inflows | $ - | $ 104,000 | $ 104,000 |
| Restricted net position | $ 7,092,383 | $ ( 895,000) | $ 6,197,383 |
| Personnel operating expenses | $ 14,608,897 | $ 50,000 | $ 14,658,897 |

This page is intentionally left blank.

# REQUIRED
# SUPPLEMENTARY INFORMATION

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

PENSION SCHEDULES
Year Ended June 30, 2019

## Schedule of Changes in Net Pension Liability (Asset) and Related Ratios

| | 2018 | 2017 | 2016 | 2015 | 2014 |
|---|---|---|---|---|---|
| Total pension liability (asset) | | | | | |
| Service cost | $ 856,857 | $ 901,142 | $ 966,693 | $ 974,294 | $ 965,751 |
| Interest | 1,943,185 | 1,919,004 | 1,823,011 | 1,727,947 | 1,607,844 |
| Changes in assumptions | - | (376,797) | - | - | - |
| Differences between expected and actual experience | (381,868) | (729,560) | (202,372) | (380,143) | - |
| Benefit payments, including refunds of employee contributions | (1,320,860) | (1,415,840) | (1,016,168) | (911,895) | (803,797) |
| Net change in total pension liability (asset) | 1,097,314 | 297,949 | 1,571,164 | 1,410,203 | 1,769,798 |
| Total pension liability (asset) - beginning | 28,420,215 | 28,122,266 | 26,551,102 | 25,140,899 | 23,371,101 |
| Total pension liability (asset) - ending (a) | $ 29,517,529 | $ 28,420,215 | $ 28,122,266 | $ 26,551,102 | $25,140,899 |
| Plan fiduciary net position | | | | | |
| Contributions - employer | $ 52,986 | $ 60,304 | $ 315,865 | $ 322,538 | $ 304,020 |
| Contributions - employee | 484,223 | 673,999 | 501,632 | 491,619 | 480,982 |
| Net investment income | 2,699,308 | 4,053,758 | 577,080 | 1,455,520 | 4,327,081 |
| Benefit payments, including refunds of employee contributions | (1,320,860) | (1,415,840) | (1,016,168) | (911,895) | (803,797) |
| Administrative expenses | (23,489) | (23,673) | (20,435) | (19,736) | (23,099) |
| Other | (2,393) | (3,584) | (244) | (307) | 228 |
| Net change in fiduciary net position | 1,889,775 | 3,344,964 | 357,730 | 1,337,739 | 4,285,415 |
| Plan fiduciary net position - beginning | 36,673,613 | 33,328,649 | 32,970,919 | 31,633,180 | 27,347,765 |
| Plan fiduciary net position - ending (b) | $ 38,563,388 | $ 36,673,613 | $ 33,328,649 | $ 32,970,919 | $31,633,180 |
| Net pension liability (asset) - ending (a) - (b) | $ (9,045,859) | $ (8,253,398) | $ (5,206,383) | $ (6,419,817) | $ (6,492,281) |
| Plan fiduciary net position as a percentage of the total pension liability (asset) | 130.65% | 129.04% | 118.51% | 124.18% | 125.82% |
| Covered payroll | $ 10,143,368 | $ 10,229,478 | $ 10,179,505 | $ 10,043,691 | $ 9,548,973 |
| Net pension liability (asset) as a percentage of covered-employee payroll | 89.18% | 80.68% | 51.15% | 63.92% | 67.99% |

PENSION SCHEDULES (CONTINUED)
Year Ended June 30, 2019

Schedule of Employer Contributions
For the Years Ended June 30, 2013 through 2019

| Date | Contractually Required Contribution | Contributions in Relation to Contractually Required Contribution | Contribution Deficiency (Excess) | Employer's Covered Employee Payroll | Contributions as a % of Covered Employee Payroll |
|---|---|---|---|---|---|
| 2019 | $ 21,740 | $ 21,740 | $ - | $ 10,525,578 | 0.21% |
| 2018 | 52,908 | 52,908 | - | 10,143,368 | 0.52% |
| 2017 | 60,304 | 60,304 | - | 10,229,478 | 0.59% |
| 2016 | 315,865 | 315,865 | - | 10,179,505 | 3.10% |
| 2015 | 322,388 | 322,538 | (150) | 10,043,691 | 3.21% |
| 2014 | 295,063 | 294,687 | 376 | 9,548,973 | 3.09% |
| 2013 | 210,772 | 210,562 | 210 | 6,821,116 | 3.09% |

Notes to Pension Schedules
For the Year Ended June 30, 2019

**Prior years' contribution information** - The Agency is required to report 10 years of contribution information. However, the Agency does not have this information for years prior to 2013.

**Changes of benefit terms** - There have been no actuarially material changes to the System benefit provisions since the prior actuarial valuation.

**Changes of assumptions** - The following changes in actuarial assumptions were made effective June 30, 2016, based on the most recent experience study of the System for the four-year period ended June 30, 2016:

Largest 10 - Non-Hazardous Duty:

| | |
|---|---|
| Mortality Rates (Pre-retirement, post-retirements healthy, and disabled) | Update to a more current mortality table - RP-2014 projected to 2020 |
| Retirement Rates | Lowered rates at older ages and changed final retirement from 70 to 75 |
| Withdrawal Rates | Adjusted rates to better fit experience at each year age and service through 9 years of service |
| Disability Rates | Lowered rates |
| Salary Scale | No Changes |
| Line of Duty Disability | Increase rate from 14% to 20% |

This page is intentionally left blank.

# OTHER
# SUPPLEMENTARY INFORMATION

This page is intentionally left blank.

# COMBINING
# FINANCIAL STATEMENTS

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

## COMBINING STATEMENT OF NET POSITION
## Year Ended June 30, 2019

| | Rappahannock Rapidan Community Services | Orange Group Home Corporation | High Point Group Home Corporation |
|---|---|---|---|
| ASSETS | | | |
| Current Assets | | | |
| Cash and cash equivalents | $ 3,770,303 | $ - | $ - |
| Accounts receivable, net of allowance for uncollectible accounts | 1,273,078 | 1,447 | 4,468 |
| Accrued revenue | 232,031 | - | - |
| Prepaid items | 68,367 | - | - |
| Total Current Assets | 5,343,779 | 1,447 | 4,468 |
| Current Assets Restricted | | | |
| Cash and cash equivalents | 228,503 | 13,698 | 14,573 |
| Client funds | 26,325 | - | - |
| Total Current Assets Restricted | 254,828 | 13,698 | 14,573 |
| Capital Assets | | | |
| Land | 2,021,830 | 20,940 | 33,483 |
| Construction in progress | 2,603,080 | - | - |
| Capital assets, net of accumulated depreciation | 13,466,139 | 112,376 | 134,076 |
| Total Capital Assets, Net | 18,091,049 | 133,316 | 167,559 |
| Noncurrent Assets | | | |
| Net pension asset | 9,045,859 | - | - |
| Total Noncurrent Assets | 9,045,859 | - | - |
| Total Assets | $ 32,735,515 | $ 148,461 | $ 186,600 |
| DEFERRED OUTFLOWS | | | |
| Deferred post-employment benefits outflows | $ 82,015 | $ - | $ - |
| Deferred pension outflows | 21,740 | - | - |
| Bond issuance costs | 26,434 | - | - |
| Total Deferred Outflows | $ 130,189 | $ - | $ - |
| LIABILITIES | | | |
| Current Liabilities | | | |
| Accounts payable and accruals | $ 1,020,119 | $ - | $ - |
| Current portion of long-term capital note | 136,526 | - | - |
| Current portion of bonds payable | 74,472 | - | - |
| Current portion of compensated absences | 816,343 | - | - |
| Total Current Liabilities | 2,047,460 | - | - |
| Current Liabilities Payable from Restricted Assets | | | |
| Client funds | 26,325 | - | - |
| Accounts payable | - | 26,586 | 30,406 |
| Security deposits | - | 710 | 656 |
| Total Current Liabilities Payable from Restricted Assets | 26,325 | 27,296 | 31,062 |
| Long-Term Liabilities | | | |
| Long-term capital note, net of current portion | 7,580,103 | - | - |
| Long-term bonds payable, net of current portion | 521,372 | - | - |
| Post-employment benefits liability | 814,000 | - | - |
| Total Long-Term Liabilities | 8,915,475 | - | - |
| Total Liabilities | $ 10,989,260 | $ 27,296 | $ 31,062 |
| DEFERRED INFLOWS | | | |
| Deferred post-employment benefits inflows | $ 118,000 | $ - | $ - |
| Deferred pension inflows | 932,951 | - | - |
| Deposit on contruction of group homes | 1,107,191 | - | - |
| Total Deferred Inflows | $ 2,158,142 | $ - | $ - |
| NET POSITION | | | |
| Investment in capital assets net of related capital debt | $ 10,007,079 | $ 133,316 | $ 167,559 |
| Restricted net position | 7,655,574 | (12,151) | (12,021) |
| Unrestricted net position | 2,055,649 | - | - |
| Total Net Position | $ 19,718,302 | $ 121,165 | $ 155,538 |

| Canterbury Group Home Corporation | Rappahannock Elder Housing Corporation | Developmental Housing Corporation | Inter-Company Eliminations | Total |
|---|---|---|---|---|
| $ - | $ - | $ - | $ - | $ 3,770,303 |
| - | 345 | - | - | 1,279,338 |
| - | - | - | (201,513) | 30,518 |
| - | - | - | - | 68,367 |
| - | 345 | - | (201,513) | 5,148,526 |
| 14,478 | 94,527 | 15,001 | - | 380,780 |
| - | - | - | - | 26,325 |
| 14,478 | 94,527 | 15,001 | - | 407,105 |
| 28,236 | 129,885 | 64,980 | - | 2,299,354 |
| - | - | - | - | 2,603,080 |
| 144,111 | 1,358,981 | 451,705 | - | 15,667,388 |
| 172,347 | 1,488,866 | 516,685 | - | 20,569,822 |
| - | - | - | - | 9,045,859 |
| - | - | - | - | 9,045,859 |
| $ 186,825 | $ 1,583,738 | $ 531,686 | $ (201,513) | $ 35,171,312 |
| $ - | $ - | $ - | $ - | $ 82,015 |
| - | - | - | - | 21,740 |
| - | - | - | - | 26,434 |
| $ - | $ - | $ - | $ - | $ 130,189 |
| $ - | $ - | $ - | $ - | $ 1,020,119 |
| - | - | - | - | 136,526 |
| - | - | - | - | 74,472 |
| - | - | - | - | 816,343 |
| - | - | - | - | 2,047,460 |
| - | - | - | - | 26,325 |
| 11,251 | 74,185 | 59,085 | (201,513) | - |
| 902 | 6,471 | 1,035 | - | 9,774 |
| 12,153 | 80,656 | 60,120 | (201,513) | 36,099 |
| - | - | - | - | 7,580,103 |
| - | - | - | - | 521,372 |
| - | - | - | - | 814,000 |
| - | - | - | - | 8,915,475 |
| $ 12,153 | $ 80,656 | $ 60,120 | $ (201,513) | $ 10,999,034 |
| $ - | $ - | $ - | $ - | $ 118,000 |
| - | - | - | - | 932,951 |
| - | - | - | - | 1,107,191 |
| $ - | $ - | $ - | $ - | $ 2,158,142 |
| $ 172,347 | $ 1,488,866 | $ 516,685 | $ - | $ 12,485,852 |
| 2,325 | 14,216 | (45,119) | - | 7,602,824 |
| - | - | - | - | 2,055,649 |
| $ 174,672 | $ 1,503,082 | $ 471,566 | $ - | $ 22,144,325 |

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

## COMBINING STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION
Year Ended June 30, 2019

| | Rappahannock Rapidan Community Services | Orange Group Home Corporation | High Point Group Home Corporation |
|---|---|---|---|
| Operating Revenues | | | |
| Revenues | | | |
| Net individual service revenue | $ 8,893,454 | $ - | $ - |
| Total Operating Revenues | 8,893,454 | - | - |
| Operating Expenses | | | |
| Personnel | 15,463,327 | - | - |
| Staff development | 95,141 | - | - |
| Facilities | 1,203,643 | 36,247 | 25,958 |
| Minor equipment and supplies | 2,054,061 | - | - |
| Travel | 705,004 | - | - |
| Contractual and consulting | 1,306,014 | - | - |
| Depreciation | 844,371 | 7,589 | 6,794 |
| Other | 290,523 | - | - |
| Total Operating Expenses | 21,962,084 | 43,836 | 32,752 |
| Operating (Loss) | (13,068,630) | (43,836) | (32,752) |
| Nonoperating Revenues (Expenses) | | | |
| Appropriations from governments | | | |
| State | 6,651,782 | - | - |
| Federal | 3,332,655 | - | - |
| Local | 1,259,966 | - | - |
| Interest and investment income | 20,997 | 3 | 3 |
| Contributions | 1,199,426 | - | - |
| Other, net | 4,394,762 | 28,080 | 21,218 |
| Interest expense on capital note | (304,861) | - | - |
| Net Nonoperating Revenues | 16,554,727 | 28,083 | 21,221 |
| Excess (Deficiency) of Revenues Over Expenses | 3,486,097 | (15,753) | (11,531) |
| Net Position - Beginning of Year | 16,232,205 | 136,918 | 167,069 |
| Net Position - End of Year | $ 19,718,302 | $ 121,165 | $ 155,538 |

| Canterbury Group Home Corporation | Rappahannock Elder Housing Corporation | Developmental Housing Corporation | Inter-Company Eliminations | Total |
|---|---|---|---|---|
| $ - | $ - | $ - | $ - | $ 8,893,454 |
| - | - | - | - | 8,893,454 |
| - | - | - | - | 15,463,327 |
| - | - | - | - | 95,141 |
| 25,450 | 104,480 | 35,329 | - | 1,431,107 |
| - | - | - | - | 2,054,061 |
| - | - | - | - | 705,004 |
| - | - | - | - | 1,306,014 |
| 8,879 | 53,842 | 16,620 | - | 938,095 |
| - | - | - | - | 290,523 |
| 34,329 | 158,322 | 51,949 | - | 22,283,272 |
| (34,329) | (158,322) | (51,949) | - | (13,389,818) |
| - | - | - | - | 6,651,782 |
| - | - | - | - | 3,332,655 |
| - | - | - | - | 1,259,966 |
| 4 | 25 | 4 | - | 21,036 |
| - | - | - | - | 1,199,426 |
| 28,262 | 82,391 | 21,536 | - | 4,576,249 |
| - | - | - | - | (304,861) |
| 28,266 | 82,416 | 21,540 | - | 16,736,253 |
| (6,063) | (75,906) | (30,409) | - | 3,346,435 |
| 180,735 | 1,578,988 | 501,975 | - | 18,797,890 |
| $ 174,672 | $ 1,503,082 | $ 471,566 | $ - | $ 22,144,325 |

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

## COMBINING STATEMENT OF CASH FLOWS
Year Ended June 30, 2019

| | Rappahannock Rapidan Community Services | Orange Group Home Corporation | High Point Group Home Corporation |
|---|---|---|---|
| Cash Flows (Uses) from Operating Activities | | | |
| Receipts from individuals | $ 8,719,040 | $ - | $ - |
| Payments to suppliers | (5,515,509) | (24,866) | (16,513) |
| Payments to and for employees | (15,563,114) | - | - |
| Net Cash (Used) by Operating Activities | (12,359,583) | (24,866) | (16,513) |
| Cash Flows (Uses) from Noncapital Financing Activities | | | |
| Government grants | 10,988,695 | - | - |
| Other | 2,173,170 | 28,137 | 16,469 |
| Net Cash Provided by Noncapital Financing Activities | 13,161,865 | 28,137 | 16,469 |
| Cash Flows (Uses) from Capital and Financing Activities | | | |
| Purchase of capital assets and deposits thereon | (2,636,319) | - | - |
| Deposit on construction of group homes | 826,257 | - | - |
| Debt proceeds | 295,000 | - | - |
| Proceeds from sale of capital assets | 33,755 | - | - |
| Interest on long-term debt | (302,987) | - | - |
| Principal payments on long-term debt | (477,754) | - | - |
| Net Cash (Used) by Capital and Financing Activities | (2,262,048) | - | - |
| Cash Flows (Uses) from Investing Activities | | | |
| Interest and investment income | 20,997 | 3 | 3 |
| Net Cash Provided by Investing Activities | 20,997 | 3 | 3 |
| Net (Decrease) Increase in Cash and Cash Equivalents | (1,438,769) | 3,274 | (41) |
| Cash and Cash Equivalents - Beginning of Year | 5,437,575 | 10,424 | 14,614 |
| Cash and Cash Equivalents - End of Year | $ 3,998,806 | $ 13,698 | $ 14,573 |
| Cash and Cash Equivalents | | | |
| Unrestricted | $ 3,770,303 | $ - | $ - |
| Restricted | 228,503 | 13,698 | 14,573 |
| Cash and Cash Equivalents - End of Year | $ 3,998,806 | $ 13,698 | $ 14,573 |
| Reconciliation of Changes in Net Position to Net Cash (Used) by Operating Activities | | | |
| Operating (Loss) | $ (13,068,630) | $ (43,836) | $ (32,752) |
| Adjustments to Reconcile Changes in Net Position to Net Cash (Used) by Operating Activities | | | |
| Depreciation | 844,371 | 7,589 | 6,794 |
| Net (gain) loss on sale of capital assets | (14,210) | - | - |
| Changes in assets and liabilities | | | |
| Accounts receivable | (181,978) | - | - |
| Accrued revenue | (66,941) | - | - |
| Prepaid items | (57) | - | - |
| Accounts payable and accrued expenses | 224,650 | 11,381 | 9,445 |
| Compensated absences | (33,033) | - | - |
| Contributions for post-employment benefits | (42,015) | - | - |
| Contributions to pension plan | (21,740) | - | - |
| Net Cash (Used) by Operating Activities | $ (12,359,583) | $ (24,866) | $ (16,513) |
| Noncash Investing, Capital and Financing Activities | | | |
| Grant received for vehicles | $ 255,708 | $ - | $ - |

| Canterbury Group Home Corporation | Rappahannock Elder Housing Corporation | Developmental Housing Corporation | Inter-Company Eliminations | Total |
|---|---|---|---|---|
| $ - | $ - | $ - | $ - | $ 8,719,040 |
| (26,270) | (87,445) | (19,987) | - | (5,690,590) |
| - | - | - | - | (15,563,114) |
| (26,270) | (87,445) | (19,987) | - | (12,534,664) |
| - | - | - | - | 10,988,695 |
| 28,262 | 82,235 | 21,536 | - | 2,349,809 |
| 28,262 | 82,235 | 21,536 | - | 13,338,504 |
| - | (1,153) | - | - | (2,637,472) |
| - | - | - | - | 826,257 |
| - | - | - | - | 295,000 |
| - | - | - | - | 33,755 |
| - | - | - | - | (302,987) |
| - | - | - | - | (477,754) |
| - | (1,153) | - | - | (2,263,201) |
| 4 | 25 | 4 | - | 21,036 |
| 4 | 25 | 4 | - | 21,036 |
| 1,996 | (6,338) | 1,553 | - | (1,438,325) |
| 12,482 | 100,865 | 13,448 | - | 5,589,408 |
| $ 14,478 | $ 94,527 | $ 15,001 | $ - | $ 4,151,083 |
| $ - | $ - | $ - | $ - | $ 3,770,303 |
| 14,478 | 94,527 | 15,001 | - | 380,780 |
| $ 14,478 | $ 94,527 | $ 15,001 | $ - | $ 4,151,083 |
| $ (34,329) | $ (158,322) | $ (51,949) | $ - | $ (13,389,818) |
| 8,879 | 53,842 | 16,620 | - | 938,095 |
| - | - | - | - | (14,210) |
| - | - | - | - | (181,978) |
| - | - | - | - | (66,941) |
| - | - | - | - | (57) |
| (820) | 17,035 | 15,342 | - | 277,033 |
| - | - | - | - | (33,033) |
| - | - | - | - | (42,015) |
| - | - | - | - | (21,740) |
| $ (26,270) | $ (87,445) | $ (19,987) | $ - | $ (12,534,664) |
| $ - | $ - | $ - | $ - | $ 255,708 |

This page is intentionally left blank.

# OTHER
# INFORMATION

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

LEGEND OF EXPENSE CATEGORIES
Year Ended June 30, 2019

The following describes the various types of expenses that are in the major expense functions as presented in the **Agency's** financial statements.

**Personnel**
- Salaries and Wages
- Fringe Benefits, which include Payroll Taxes, Retirement and Health Insurance and Related Costs

**Staff Development**
- Dues/Memberships
- Workshops
- Conventions
- In-Service Training
- Subscriptions
- Other: Books

**Facilities**
- Rent
- Utilities
- Telephone
- Telephone-Emergency Services
- Maintenance Services
- Maintenance Services-Custodial
- Facility Insurance
- Licensure Fees
- Renovations/Repairs
- Other: Residential Start Up Costs

**Minor Equipment and Supplies**
- Equipment, less major items capitalized to fixed assets
- Data Processing Equipment, less major items capitalized to fixed assets
- Accounting System
- Maintenance/Service Contracts
- Equipment Repair
- Office/Facility Supplies
- Educational/Recreational Supplies
- Food
- Drugs/Medical Supplies
- Other: Recognition

**Travel**
- Private Mileage
- Private Mileage-Emergency Services
- Individual Transportation
- Vehicle Operating Costs
- Vehicle Insurance
- Food/Lodging
- Parking and Tolls
- Reimbursement to Board Members

**Contractual and Consulting**
- Accounting/Auditing Services
- Data Processing Services
- Legal Services
- Psychiatric/Psychological SVCS
- Contractual ITC
- Technical Services
- Other Contractual

**Other**
- Liability Insurance
- Postage
- Printing/Duplicating
- Transcripts/Criminal Background Checks
- Advertising
- Other: Fan Care; Gap Filling Funds; Bank Charges; Miscellaneous

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

## SUPPLEMENTAL SCHEDULE OF STATUS OF DARS FUNDS
Year Ended September 30, 2018

| Fund | Unencumbered Funds on Hand October 1, 2017 | Total Funds Received During Period | Funds Requested by September 30, 2018 but not received by September 30, 2018 | Total of Funds Available During Period | Accrued Costs to Contract Period | Unencumbered Funds on Hand September 30, 2018 |
|---|---|---|---|---|---|---|
| *Older Americans Act* | | | | | | |
| Title III-B | $ - | $ 222,489 | $ - | $ 222,489 | $ 222,489 | $ - |
| Title III-C (1) | - | 186,124 | - | 186,124 | 186,124 | - |
| Title III-C (2) | - | 103,206 | - | 103,206 | 103,206 | - |
| Title III-D | - | 13,983 | - | 13,983 | 13,983 | - |
| Title III-E | - | 97,005 | - | 97,005 | 97,005 | - |
| Title VII - Elder Abuse | - | 2,659 | - | 2,659 | 2,659 | - |
| Title VII - Ombudsman | - | 7,235 | - | 7,235 | 7,235 | - |
| NSIP | - | 33,887 | - | 33,887 | 33,887 | - |
| Other Federal | | | | | | |
| VICAP-(PY 03/31/18 Award) | - | 15,327 | - | 15,327 | 15,327 | - |
| VICAP-(PY 03/31/19 Award) | - | 10,035 | - | 10,035 | 10,035 | - |
| DMAS Ombudsman FY 18 | - | 1,004 | - | 1,004 | 1,004 | - |
| MIPPA - Priority 1 - SHIP | - | 12,370 | - | 12,370 | 12,370 | - |
| CDSME Grant | - | 12,375 | - | 12,375 | 12,375 | - |
| VHQC Diabities Self Mgt. Program | - | 375 | - | 375 | 375 | - |
| General Funds | | | | | | |
| Title III Match-(PY 06/30/18) | - | 50,604 | - | 50,604 | 50,604 | - |
| Community Based-(PY 06/30/18) | - | 73,698 | - | 73,698 | 73,698 | - |
| Transportation-(PY 06/30/18) | - | 43,563 | - | 43,563 | 43,563 | - |
| Home Delivered Meals-(PY 06/30/18) | - | 127,312 | - | 127,312 | 127,312 | - |
| Supplemental Nutrition-(PY 06/30/18) | - | 28,445 | - | 28,445 | 28,445 | - |
| Ombudsman-(PY 06/30/18) | - | 12,812 | - | 12,812 | 12,812 | - |
| Care Coordination CCEVP-(PY 06/30/18) | - | 65,411 | - | 65,411 | 65,411 | - |
| Senior Cool Care | - | 5,100 | - | 5,100 | 5,100 | - |
| Fees & Other Non-OAA | 543,490 | 641,475 | - | 1,184,965 | 903,939 | 281,026 |
| Totals | $ 543,490 | $ 1,766,494 | $ - | $ 2,309,984 | $ 2,028,958 | $ 281,026 |

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

SUPPLEMENTAL SCHEDULE OF DARS COSTS BY PROGRAM ACTIVITY
Year Ended September 30, 2018

| Fund | Costs to Federal III B Funds | Costs to Federal III C-1 Funds | Costs to Federal III C-2 Funds | Costs to Federal III D Funds | Costs to Federal III E Funds | Costs to Federal VII Eld. Ab. Funds | Costs to Federal VII OMB Funds | Voluntary Contribut. |
|---|---|---|---|---|---|---|---|---|
| Title III (Except III-E), *Older Americans Act* Funds | | | | | | | | |
| Adult Day Care | $ 11,130 | $ - | $ - | $ - | $ - | $ - | $ - | $ - |
| Comm. Referral Info. & Assist. | 58,607 | - | - | - | - | - | - | - |
| Options Counseling | - | - | - | - | - | - | - | - |
| Transportation | 87,940 | - | - | - | - | - | - | - |
| Congregate Meals | - | 186,124 | - | - | - | - | - | 122,844 |
| Home Delivered Meals | - | - | 103,206 | - | - | - | - | 12,724 |
| Disease Prevention | - | - | - | 13,983 | - | - | - | - |
| Emergency Services | 4,433 | - | - | - | - | - | - | - |
| Public Information & Education | 14,153 | - | - | - | - | - | - | - |
| Socialization/Recreation | - | - | - | - | - | - | - | 56,763 |
| Volunteer Programs | - | - | - | - | - | - | - | 371 |
| Legal Assistance | 2,225 | - | - | - | - | - | - | - |
| Elder Abuse Prevention | - | - | - | - | - | 2,659 | - | - |
| LTC Ombudsman Program | 3,239 | - | - | - | - | - | 7,235 | - |
| Prep. and Admin. | 40,762 | - | - | - | - | - | - | - |
| Title III-E, *Older Americans Act* Funds | | | | | | | | |
| Adult Day Care | - | - | - | - | 97,005 | - | - | - |
| Total Title III & Title VII | $ 222,489 | $ 186,124 | $ 103,206 | $ 13,983 | $ 97,005 | $ 2,659 | $ 7,235 | $ 192,702 |

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

## SUPPLEMENTAL SCHEDULE OF DARS COSTS BY PROGRAM ACTIVITY (CONTINUED)
Year Ended September 30, 2018

| Fund | Costs to Other Non-Fed Funds | Fees | DMAS Ombudsman | Costs to NSIP Funds | Costs to G.F. T III Match Funds | Costs to G.F. Comm. Based Funds | Costs to G.F. Transport Funds |
|---|---|---|---|---|---|---|---|
| Title III (Except III-E), *Older Americans Act* Funds | | | | | | | |
| Adult Day Care | $ - | $ 23,896 | $ - | $ - | $ - | $ 73,698 | $ - |
| Comm. Referral Info. & Assist. | 20,271 | - | - | - | - | - | - |
| Options Counseling | 2,096 | - | - | - | - | - | - |
| Transportation | 86,031 | - | - | - | - | - | 43,563 |
| Congregate Meals | 295,915 | - | - | 33,887 | 29,391 | - | - |
| Home Delivered Meals | 105,596 | - | - | - | 6,452 | - | - |
| Disease Prevention | 5,880 | - | - | - | - | - | - |
| Emergency Services | 5,100 | - | - | - | - | - | - |
| Public Information & Education | 4,806 | - | - | - | - | - | - |
| Socialization/Recreation | - | - | - | - | - | - | - |
| Volunteer Programs | - | - | - | - | 14,761 | - | - |
| Legal Assistance | - | - | - | - | - | - | - |
| Elder Abuse Prevention | 11,874 | - | - | - | - | - | - |
| LTC Ombudsman Program | 20,320 | - | 1,004 | - | - | - | - |
| Prep. and Admin. | 25,135 | - | - | - | - | - | - |
| Title III-E, *Older Americans Act* Funds | | | | | | | |
| Adult Day Care | 32,425 | 3,000 | - | - | - | - | - |
| Total Title III & Title VII | $ 615,449 | $ 26,896 | $ 1,004 | $ 33,887 | $ 50,604 | $ 73,698 | $ 43,563 |

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

## SUPPLEMENTAL SCHEDULE OF DARS COSTS BY PROGRAM ACTIVITY (CONTINUED)
Year Ended September 30, 2018

| Fund | Costs to G.F. HD Meals Funds | Costs to G.F. Supp Nutrition Funds | Costs to G.F. Ombuds Funds | Costs to G.F. Census Adjust. | Total Title III & VII Costs |
|---|---|---|---|---|---|
| Title III (Except III-E), *Older Americans Act* Funds | | | | | |
| Adult Day Care | $ - | $ - | $ - | $ - | $ 108,724 |
| Comm. Referral Info. & Assist. | - | - | - | - | 78,878 |
| Options Counseling | - | - | - | 65,411 | 67,507 |
| Transportation | - | - | - | - | 217,534 |
| Congregate Meals | - | 28,445 | - | - | 696,606 |
| Home Delivered Meals | 127,312 | - | - | - | 355,290 |
| Disease Prevention | - | - | - | - | 19,863 |
| Emergency Services | - | - | - | - | 9,533 |
| Public Information & Education | - | - | - | - | 18,959 |
| Socialization/Recreation | - | - | - | - | 56,763 |
| Volunteer Programs | - | - | - | - | 15,132 |
| Legal Assistance | - | - | - | - | 2,225 |
| Elder Abuse Prevention | - | - | - | - | 14,533 |
| LTC Ombudsman Program | - | - | 12,812 | - | 44,610 |
| Prep. and Admin. | - | - | - | - | 65,897 |
| Title III-E, *Older Americans Act* Funds | | | | | |
| Adult Day Care | - | - | - | - | 132,430 |
| Total Title III & Title VII | $ 127,312 | $ 28,445 | $ 12,812 | $ 65,411 | $ 1,904,484 |

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

SUPPLEMENTAL SCHEDULE OF STATUS OF DARS INVENTORIES
Year Ended September 30, 2018

| Fund Source and Type of Inventory | Value on Hand October 1, 2017 | Increase (Decrease) During Period | Value on Hand September 30, 2018 |
|---|---|---|---|
| Title III-C(1) *Older Americans Act* | $ 12,053 | $ (1,824) | $ 10,229 |
| Title III-C(2) *Older Americans Act* | 5,672 | 274 | 5,946 |
| Other Funds - Transportation | 40,907 | - | 40,907 |
| Totals | $ 58,632 | $ (1,550) | $ 57,082 |

This page is intentionally left blank.

**COMPLIANCE**
**SECTION**

This page is intentionally left blank.

# INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS*

To the Honorable Members of the Board of Directors
**Rappahannock Rapidan Community Services**
Culpeper, Virginia

We have audited in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Governmental Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the **Rappahannock Rapidan Community Services** (the **Agency**), which are comprised of the Statements of Net Position as of June 30, 2019, and the related Statements of Revenues, Expenses, and Changes in Net Position, the Statements of Cash Flows for the year then ended, and the related Notes to the Financial Statements, and have issued our report thereon dated November 19, 2019.

## Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the **Agency's** internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the **Agency's** internal control. Accordingly, we do not express an opinion on the effectiveness of the **Agency's** control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the **Agency's** financial statements will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

To the Honorable Members of the Board of Directors
**Rappahannock Rapidan Community Services**

**Compliance and Other Matters**

As part of obtaining reasonable assurance about whether the **Agency's** financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

**Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the **Agency's** internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the **Agency's** internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Snead Williams and Mayhew PLLC

Danville, Virginia
November 19, 2019

# INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

To the Honorable Members of the Board of Directors
**Rappahannock Rapidan Community Services**
Culpeper, Virginia

## Report on Compliance for Each Major Federal Program

We have audited **Rappahannock Rapidan Community Services'** (the **Agency**) compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of the major federal programs for the year ended June 30, 2019. The **Agency's** major federal programs are identified in the Summary of Auditors' Results section of the accompanying Schedule of Findings and Questioned Costs.

The **Agency's** financial statements include the operations of component unit organizations Orange Group Home Corporation, High Point Group Home Corporation, Canterbury Group Home Corporation, Rappahannock Elder Housing Corporation, and Developmental Housing Corporation, which received, in the aggregate, a total of $3,498,029 in federal awards which are not included in the Schedule of Expenditures of Federal Awards during the year ended June 30, 2019. Our audit, described below, did not include the operations of the above component units because each of the component units issues separate financial statements, and audits in accordance with the Uniform Guidance are performed at the component unit level, where applicable.

### *Management's Responsibility*

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

### *Auditors' Responsibility*

Our responsibility is to express an opinion on compliance for each of the **Agency's** major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform

To the Honorable Members of the Board of Directors
**Rappahannock Rapidan Community Services**

Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above could have a direct and material effect on a major federal program that occurred. An audit includes examining, on a test basis, evidence about the **Agency's** compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of the **Agency's** compliance.

***Opinion on Each Major Federal Program***

In our opinion, the **Agency**, complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2019.

**Report on Internal Control Over Compliance**

Management of the **Agency** is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered the **Agency's** internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the **Agency's** internal control over compliance.

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

To the Honorable Members of the Board of Directors
**Rappahannock Rapidan Community Services**

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Snead Williams and Mayhew PLLC

Danville, Virginia
November 19, 2019

This page is intentionally left blank.

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

## SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended June 30, 2019

| Federal Granting Agency/ Recipient State Agency/ Grant Program/Grant Number | Federal Catalogue Number | Pass-through Entity Identifying Number | | Federal Expenditures ($) |
|---|---|---|---|---|
| United States Department of Housing and Urban Development | | | | |
| Pass-Through Payments | | | | |
| Virginia Housing Development Authority | | | | |
| Section 8 Housing Choice Vouchers | 14.871 | Not Available | | 151,313 |
| Total United States Department of Housing and Urban Development | | | | 151,313 |
| United States Department of Education | | | | |
| Pass-Through Payments | | | | |
| Virginia Department of Behavioral Health and Developmental Services | | | | |
| Special Education-Grants for Infants and Families | 84.181 | Not Available | | 90,184 |
| Total United States Department of Education | | | | 90,184 |
| United States Department of Health and Human Services | | | | |
| Pass-Through Payments | | | | |
| Virginia Department of Mental Health, Mental Retardation and Substance Abuse | | | | |
| Substance Abuse and Mental Health Services - Projects of Regional and National Significance | 93.243 | Not Available | | 145,000 |
| Opioid STR | 93.788 | Not Available | | 171,740 |
| Block Grants for Community Mental Health Services | 93.958 | Not Available | | 488,262 |
| Block Grants for Prevention and Treatment of Substance Abuse | 93.959 | Not Available | | 872,711 |
| Virginia Department for the Aging | | | | |
| Special Programs for the Aging - Title VII, Chapter 3 - Programs for Prevention of Elder Abuse, Neglect, and Exploitation | 93.041 | 43717/43718 | | 2,514 |
| Special Programs for the Aging - Title VII, Chapter 2 - Long Term Care Ombudsman Services for Older Individuals | 93.042 | 43617/43618 | | 19,173 |
| Special Programs for the Aging - Title III, Part D - Disease Prevention and Health Promotion Services | 93.043 | 42417/42418 | | 13,306 |
| Special Programs for the Aging - Title III, Part B - Grants for Supportive Services and Senior Centers | 93.044 | 42017/42018 | * | 268,974 |
| Special Programs for the Aging - Title III, Part C - Nutrition Services | 93.045 | 42217/42218 | | |
| | | 42317/42318 | * | 341,959 |

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

## SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS (CONTINUED)
Year Ended June 30, 2019

| Federal Granting Agency/ Recipient State Agency/ Grant Program/Grant Number | Federal Catalogue Number | Pass-through Entity Identifying Number | | Federal Expenditures ($) |
|---|---|---|---|---|
| United States Department of Health and Human Services (Continued) | | | | |
| Pass-Through Payments (Continued) | | | | |
| Virginia Department for the Aging (Continued) | | | | |
| National Family Caregiver Support, Title III, Part E | 93.052 | 42517/42518 | | 102,010 |
| Nutrition Services Incentive Program | 93.053 | 42717/42718 | * | 38,829 |
| Medicare Enrollment Assistance Program | 93.071 | 44818/44977 | | 16,791 |
| State Health Insurance Assistance Program | 93.324 | 44118 | | 28,177 |
| Empowering Older Adults and Adults with Disabilities through Chronic Disease Self-Management Education Programs - financed by Prevention and Public Health Funds (PPHF) | 93.734 | 45818 | | 6,325 |
| Medicare Hospital Insurance | 93.773 | 46119 | | 585 |
| Medical Assistance Program | 93.778 | 46200 | | 2,143 |
| Total United States Department of Health and Human Services | | | | 2,518,499 |
| United States Department of Transportation | | | | |
| Pass-Through Payments | | | | |
| Virginia Department of Transportation | | | | |
| Enhanced Mobility of Seniors and Individuals with Disabilities | 20.513 | Not Available | | 255,708 |
| Total United States Department of Transportation | | | | 255,708 |
| Total Expenditures of Federal Awards | | | | $ 3,015,704 |

* Aging Cluster

**Note 1 - Basis of Presentation**

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal grant activity of **Rappahannock Rapidan Community Services** (the **Agency**) and is presented on the accrual basis of accounting. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the **Agency**, it is not intended to and does not present the financial position, changes in net position, or cash flows of the **Agency**.

**Note 2 - Summary of Significant Accounting Policies**

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. The **Agency** has elected not to use the 10% de minimis indirect cost rate allowed under the Uniform Guidance.

**Note 3 - Items not Included in the Schedule**

| | |
|---|---|
| USDA Rural Development loan balances at June 30, 2019, for which only the payment of debt service is the compliance requirement | $ 7,427,095 |
| Component unit federal awards/assistance | 3,498,029 |
| Total not included in the Schedule | $ 10,925,124 |

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

SCHEDULE OF FINDINGS AND QUESTIONED COSTS
Year Ended June 30, 2019

I. Summary of Auditors' Results

A. The auditors' report expresses an unmodified opinion on the financial statements of **Rappahannock Rapidan Community Services** (the **Agency**).

B. No material weaknesses were identified during the audit of the financial statements.

C. No instances of noncompliance material to the financial statements of the **Agency** were disclosed during the audit.

D. No material weaknesses were identified during the audit of the major federal award programs.

E. The auditors' report on compliance for the major federal award programs for the **Agency** expresses an unmodified opinion.

F. The audit disclosed no audit findings that are required to be reported in accordance with the Uniform Guidance.

G. The programs tested as major programs were:

| Program Name | CFDA# |
|---|---|
| Block Grants for Prevention and Treatment of Substance Abuse | 93.959 |
| The Aging Cluster | |
| Special Programs for the Aging - Title III, Part B - Grants for Supportive Services and Senior Centers | 93.044 |
| Special Programs for the Aging - Title III, Part C - Nutrition Services | 93.045 |
| Nutrition Services Incentive Program | 93.053 |

H. The threshold for distinguishing Type A and Type B programs was $750,000.

I. The **Agency** was determined to be a low-risk auditee.

II. Findings Related to the Audit of the Financial Statements of the **Agency**

None

III. Findings and Questioned Costs Related to the Audit of Federal Awards

None

# RAPPAHANNOCK RAPIDAN COMMUNITY SERVICES

SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS
Year Ended June 30, 2019

None

GERMANNA COMMUNITY COLLEGE

December 20, 2019

Mary Jane Costello
Director of Finance/ Assistant County Administrator
Madison County
PO Box 705
Madison, VA 22727

Dear Ms. Costello,

The Germanna Community College funding request to Madison County for Fiscal Year 2021 is $54,000. The break-out of the request is shown below:

| | FY'21 Request |
|---|---|
| Operating Funds | $ 4,535 |
| Career Coach Program | $ 25,000 |
| Total Operating Funds | $ 29,535 |
| | |
| Maintenance Reserve | $ 465 |
| Allied Health Building | $ 24,000 |
| Total Capital Requests | $ 24,465 |
| | |
| Total Funding Request | $ 54,000 |

## Operating Funds

Germanna College requests funding to sustain our higher education offerings and fulfill our mission of providing accessible, quality educational and training opportunities to meet our communities' needs. Our offerings include opportunities in the form of associate degree programs, transfer programs, workforce training, credential programs, and dual enrollment programs - including the dual enrollment offering at Madison High School.

This training can have a positive economic impact in Madison County in the form of higher tax revenue due to higher wages and salaries. Indirect societal benefits include reduced crime rates, reduced public assistance cost, and increased health benefits associated with employment and wage growth.

Operating funds help Germanna support student-centered programs not funded by the State. These funds go towards student development, student recruitment, and student recognition. Calculations for the request are based on overall need, and reflect the learners served in our localities. For Fiscal Year 2019, Germanna served 284 learners in Madison County in credit-based training leading to a degree or transfer as well as in vocational training.

**Career Coach Program**

This program places community college employees in local high schools to help high school students define their career aspirations and recognize community college and postsecondary programs (including apprenticeships and workforce training) that can help students achieve their educational and financial goals. The fundamental objectives of the High School Career Coaching Program are to empower students to make informed decisions about their career and educational plans and to prepare students for success in postsecondary education and training.

Germanna provides Career Coaches at specific high schools in the service area. Based on the results and feedback of those coaches, students, and their families the local economy will ultimately benefit from offering these services at all high schools within the service area. However, state funding is not sufficient to expand these services without support from localities. Germanna currently funds six career coaches (part time at 1,450 hours each) at a total cost of $235,000. Eleven additional coaches will be required to provide career coaching services at every high school in the region. This requires additional funding of $25,000 per high school.

Additional information regarding this program, including measurable goals and objectives, is attached.

**Maintenance Reserve**

The $465 request is to support upkeep of existing college infrastructure.

**Capital (Construction) Funds**

The Commonwealth has approved construction of a new Allied Health Building on the Locust Grove campus. While the Commonwealth provides the funding for the building itself, Germanna must fund all infrastructure and land improvement including lighting, storm water management, utilities, parking, and sidewalks. Additionally, state of the art medical equipment will be required to simulate real-life environments in labs, hospitals, and clinics. The request anticipates spreading an estimated $2.3 million investment over a five year commitment for all localities served by the college. The request for $24,000 per year, over a five year period, represents an investment of $120,000 for Madison County.

This focus on Nursing and Health Technology programs serves a projected need for healthcare workers in the region in the coming years. Further information may be found on the project on the enclosed project information sheet.

If you need further information to support this request, please do not hesitate to contact me. Thank you for your continued support of Germanna Community College.

Sincerely,

Dr. Janet Gullickson
President

# High School Career Coaching Program

## Program Purpose

Community College employees based in local high schools help high school students define their career aspirations and to recognize community college and postsecondary programs (including apprenticeships and workforce training) that can help students achieve their educational and financial goals. The fundamental objectives of the High School Career Coaching Program are to empower students to make informed decisions about their career and educational plans and to prepare students for success in postsecondary education and training. The Student Survey of Career Coaching conducted by Virginia Tech as an assessment of the Virginia Career Coach program found that almost all (92%) students view their coaching experience as valuable to extremely valuable. Students report that coaches help them with planning early, setting goals, and learning about community college. Because of their experience with career coaches, nearly all students (94%) indicate some change regarding college, career, or job.

## Justification of Need

The career pathways model in K-12 education was developed and implemented collaboratively among the VDOE, SCHEV, VCCS, the Department of Labor and Industry, the Virginia Economic Development Partnership, Virginia's Workforce Council, and the Governor's Office. Career coaches utilize the career pathways model to engage those students most in need of career planning services, sometimes referred to as the "middle majority". These are the students who are the mainstay of the emerging workforce and may otherwise graduate from high school without any identified career goals or plans for postsecondary education. Career coaches facilitate the career planning process and equip high school graduates with information and skills to successfully transition into adulthood. Career Coaching helps Virginia residents engage in education and training opportunities that allow them to develop and adapt their skills to contribute to a changing economy.

Germanna provides Career Coaches at specific high schools in the service area. Based on the results and feedback of those coaches, students, and their families the local economy will ultimately benefit from offering these services at all high schools within the service area. However, state funding is not sufficient to expand these services without support from localities. Germanna currently funds six career coaches (part time at 1,450 hours each) at a total cost of $235,000. Eleven additional coaches will be required to provide career coaching services at every high school in the region. This requires additional funding of $25,000 per high school.

## Delivery of Services

Career Coaches empower high school students to make informed decisions about career and educational plans and to prepare them for success in postsecondary education or training. Career Coaching increases the number and percentage of high school graduates who enter postsecondary education or workforce training prepared for success. Coaches are based in local high schools and work closely with counselors and teachers to access students who need help in developing plans for after graduation. Coaches predominantly work with juniors and seniors but also with freshmen and sophomores for some services. Coaches specifically target students most in need of career planning services. Services are provided through individual and group appointments, workshops, and classroom presentations. Coaches arrange career and employer fairs which help students explore career pathways. College fairs and campus tours are offered to expose students to the variety of college, workforce, and apprentice programs available to them.

## Goals and Objectives

**Goal #1: Increase the education level of young adults in our region.**

- Objective: Increase the enrollment of high school graduates in post-secondary education by 5% over previous year for high schools in our service area. (Data as reported by Virginia Department of Education.)
- Objective: Increase the percentage of students completing a FAFSA during their senior year by 5% over the previous year for high schools in our service area. (Data as reported by the US Department of Education)

**Goal #2: Assist high school juniors and seniors to achieve better outcomes in terms of choices regarding college, career, and job by working with them to create a post-secondary academic and career plan.**

- Objective: Create an academic and career plan for 100% of caseload, which is 150 students per career coach (part time).
- Objective: Conduct parental outreach involving parents in career and academic plans for 75% of the coach caseload of 150 students.

GERMANNA COMMUNITY COLLEGE

# Allied Health Center at Locust Grove

New Construction



# Allied Health Building Master Plan Phase 1A (2021)

MASTERPLAN (PHASE 1A)




PHASE 1A

| ACADEMIC BUILDINGS | | OTHER BUILDINGS | | ROADWAY IMPROVEMENTS / PARKING FACILITIES | | SITE IMPROVEMENTS | |
|---|---|---|---|---|---|---|---|
| A. | New Building A | E. | New Community Amphitheater | G. | New Campus Entrance | J. | New Plaza / Greenspace / Walking Trails |
| B. | New Building B | F. | New Childcare Building & Outdoor Play Area | H. | Parking Lot Addition | K. | New Plaza / Greenspace |
| C. | New Building C | | | I. | Parking Lot Addition | L. | New Recreational Area |
| D. | French Slaughter Building (Demolition) | | | | | M. | New Cell Tower Area |
| | | | | | | N. | New Historic Resource Area / Walking Trails |
| | | | | | | O. | New Plaza / Greenspace |

# Allied Health Building Master Plan

Programmatically, the college's decision to emphasize Nursing and Health Technology programs at the Locust Grove Campus is strongly supported by the data gathered. By not duplicating academic offerings of the Fredericksburg Campus or the two centers, enrollments at the other sites are strengthened. At the same time, creating a "destination" campus focused on Nursing and Health Technology programs allows the Locust Grove Campus to participate in the population growth projected to occur in the college's service area over the next 25 years. Enrollment projections for the campus are based on a health sciences emphasis. The enrollment projections and space needs of nursing and health sciences curricula guided the layout and sizes of the buildings shown in the master plan. The projected need for healthcare workers in the region over the next 25 years means the Locust Grove Campus has an opportunity to play a critical role in the health of its community.

In summary, the master plan for the Locust Grove Campus celebrates the historic setting of the campus, engages the site in ways that protect its natural beauty, recognizes the important role the campus will play in the college's future success and responds to a projected need for healthcare professionals in the region in the coming years.

The Locust Grove Campus vision is to become an outstanding Nursing and Health Technology campus attracting students from across the Germanna Community College service area and beyond. By dedicating its curricula and facilities to comprehensive high quality healthcare programs, the campus will play a major role in meeting the region's growing needs for healthcare workers.

# New Health Care Training Campus

- New cutting-edge medical training facility to be built at Locust Grove Campus in Fiscal 2020-2021
- Facility will include an updated Virtual Hospital with computerized human simulators
- While urban hospitals are expected to have enough health care professionals in 2025, rural areas, particular emergency care centers and nursing homes, are not
- Cost will be $30 million, with $3.5 million needed in local funds and contributions



# Cost for new Allied Health Center at Locust Grove

- Virginia Community College System requires that expenditures for site preparation beyond five feet from a building, including outdoor lighting, sidewalks, and parking lots be made only from local government appropriations and other non-state sources
- $2.29 million is being requested from localities for site improvements, ongoing maintenance, scholarships, equipment and infrastructure with payments
- Construction fund requests to be spread over a five-year obligation resulting in $458,000 per year in locality support for a new, high-tech, $30 million Allied Health Center at Locust Grove

# Support for the new Center

## Locality requests to support the new Allied Health Center project at Locust Grove:

- Orange: $500,000 or $100,000 per year
- Spotsylvania: $500,000 or $100,000 per year
- Stafford: $500,000 or $100,000 per year
- Culpeper: $250,000 or $50,000 per year
- Fredericksburg: $250,000 or $50,000 per year
- Madison: $120,000 or $24,000 per year
- Caroline: $120,000 or $24,000 per year
- King George: $50,000 or $10,000 per year



*A design firm has been selected for the Locust Grove project, and the design phase is expected to occur over the next 12 months. Construction is expected to begin during Fiscal 2021.*

# Allied Health Enrollment

| ALL GERMANNA | | Academic Year | | | |
|---|---|---|---|---|---|
| Academic Plan | Degree | 2015-2016 | 2016-2017 | 2017-2018 | Grand Total |
| Nursing | AAS | 277 | 305 | 329 | 911 |
| General Studies -Spec in Psyc | AA&S | 275 | 270 | 293 | 838 |
| General Studies - Pre-BSN | AA&S | | | 117 | 117 |
| LPN To Rn - Nursing | AAS | 40 | 33 | 24 | 97 |
| Physical Therapist Assistant | AAS | 12 | 25 | 29 | 66 |
| Gen Studies-Spec in Rad Tech | AA&S | 1 | 1 | 1 | 3 |

# Health Care Technology and Nursing Classes

- Nursing offered at Locust Grove Campus and new Stafford Center
- Physical Therapy Assistant training is offered at Locust Grove Campus
- Clinical experience is offered at Mary Washington Hospital Center, HCA/Spotsylvania Regional Medical Center, Fredericksburg Orthopedic Assoc., Fusion Physical Therapy,
- Long-term care clinical experience offered at Woodmont, Carriage Hill Health and Rehab, others



# Clinical Experiences

**Moss Free Clinic**

- Dental– uses the clinic as the primary site for clinical. Since 2017, students have provided over $338,000 in free dental care to area residents
- Give Kids a Smile Day through Moss Free Clinic: $12,000–$15,0000 of free care to children in our area
- Physical Therapy Assistant students provide free care to patients each Friday

**Rappahanock Goodwill**

- Nursing students provide free wellness assessments to members of the community two days per week

**Micah House**

- Nursing students provide meals, wellness assessments and health education



# Local Health Care Skills Gap

**Local health care jobs with the most retires in the next three years:**

- Registered Nurses
- Medical Technologists/Medical Lab Technician
- Clinical Specialists
- Physical Therapists
- Pharmacist
- Respiratory Therapy
- Certified Nursing Assistants

**Top ten positions local providers consider most critical to delivering quality care:**

- Registered Nurses
- Medical Technologists
- Clinical Specialists
- Physical Therapists
- Pharmacist
- Caregivers
- Lab Technicians
- Staffing Coordinators
- Respiratory Therapy
- Medical Imaging Technicians

# Allied Health Building Master Plan

The Chmura Economics & Analytics firm also published an Economic Overview of the Germanna Community College service area, which is directly applicable to the development of a healthcare campus at LGC. As can be seen in Figure 4.6 below, the healthcare and social assistance industrial sector is the second largest workforce in the service area with more than 19,000 workers.

| | | |
|---|---|---|
| Retail Trade | 20,755 | 20.1% |
| Health Care & Social Assistance | 19,123 | 18.6% |
| Educational Services | 17,435 | 16.9% |
| Accommodation & Food Services | 14,912 | 14.5% |
| Public Administration | 14,208 | 13.8% |
| Professional, Scientific & Technical Services | 8,881 | 8.6% |
| Construction | 7,753 | 7.5% |
| TOTAL | 103,067 | 100.0% |

Figure 4.6. Largest Business Sectors by Workforce in the GCC Service Area

The Chmura Economic Overview also projected workforce growth over the next ten years, as well as, the number of individuals in the workforce who would need to be replaced. As can be seen in Figure 4.7, the healthcare and social assistance industry sector will need more than 11,000 new workers over the next ten years within the Germanna Community College service area.

| Business Sector | Culpeper | Madison | Orange |
|---|---|---|---|
| Health Care & Social Assistance | 2,482 | 345 | 1,083 |

Figure 4.7. Healthcare & Social Assistance Workforce Projections for Replacement and Growth (2015-2025)

# Madison County Parks and Recreation Authority
## Budget vs Actual-Operations only
### July 2016 through June 2019

**1.6% Escalation (based on Social Security COL adjustment)**

| | FY19 Actuals | FY20 Budget | FY21 Budget | Justification | Notes / questions |
|---|---|---|---|---|---|
| 410000 · Contribution from Madison Co | 210,300 | 241,200 | 241,200 | FY20 Budget | |
| 410100 · Madison County School Fund | 30,000 | 0 | - | Project complete in FY19 | |
| 411010 · Hoover Ridge Pledge Payments | | 5,400 | 5,400 | FY19 Actual thru Nov annualized | Renewed interest in pursuing this |
| 411015 · Hoover Ridge Fund | 7,500 | 5,000 | 5,000 | Estimated donations to Hoover Ridge Fund | |
| 411016 · Fund Balance | 0 | 10,000 | 10,000 | Estimated profit from events, pavilion rental | |
| xxxxxx - Income from Programs | 187,506 | 201,000 | 201,000 | Same amount as 517000 | Program income & Expense net out (any net income goes back to the program) |
| 411050 · In-Kind | | | - | Estimated | There is an equal expense to this income. |
| 411051 · In-Kind - Concession Stand | | 0 | - | Project complete in FY19 | |
| 413000 · Brought forward from prior year | 59,173 | 0 | 0 | None anticipated | |
| 422000 · User Fee | 23,983 | 22,700 | 22,700 | Same as 2020 | |
| Total Income | 323,456 | 485,300 | 485,300 | | |
| 501101 · Part-Time Custodian | 16,682 | 10,920 | 28,160 | See Labor page | |
| 501102 · Part-Time Clerical | 11,244 | 10,691 | 10,400 | See Labor page | |
| 501103 · Part-Time Maintenance | 13,692 | 27,315 | 17,280 | See Labor page | |
| Total 501100 · Labor | 41,618 | 48,926 | 55,840 | | |
| 501110 · Fringe | | | | | |
| 501111 · FICA and Medicare | 3,166 | 3,743 | 4,272 | See Labor page | |
| 501112 · VEC Expense | 446 | 949 | 1,135 | See Labor page | |
| Total 501110 · Fringe | 3,612 | 4,692 | 5,407 | | |
| Total 501000 · Payroll Expenses | 45,230 | 53,618 | 61,247 | | |
| Total 502000 · Leased Employees | 108,859 | 114,166 | 114,166 | See Labor page | |
| 503000 · Outside Services | 509 | 340 | 340 | Intrastate Pest Control @ $85 / quarter | |
| 504000 · Repairs & Maintenance | | | | | |
| 504110 · Field Maintenance | 7,646 | 12,420 | 12,768 | FY20 Budget + escalation | |
| 504120 · Supplies | 2,870 | 7,050 | 7,050 | FY20 Budget | |
| 504140 - Vehicle/Equipment Repairs | 7,155 | 7,155 | 7,155 | FY19 Actuals | |
| 504130 · Maintenance | 3,803 | 3,803 | 3,803 | FY19 Actuals | |
| Total 504000 · Repairs & Maintenance | 21,474 | 30,428 | 30,776 | | |
| 505000 · Advertising | 714 | 980 | 1,380 | Increase to include new marketing ideas | |
| 506000 · Utilities | | | | | |
| 506100 · Electricity | | | | | |
| 506101 · Red Barn | 476 | 476 | 480 | FY19 Actuals + escalation | |
| 506102 · PRA Office | 1,474 | 1,474 | 1,500 | FY19 Actuals + escalation | |
| 506103 · E1 | 594 | 594 | 600 | FY19 Actuals + escalation | |
| 506104 · E2/Concessions | 1,258 | 1,258 | 1,280 | FY19 Actuals + escalation | |
| 506105 · American Legion Pavilion | 798 | 798 | 810 | FY19 Actuals + escalation | |
| 506106 · Hockey Rink/Concessions | 427 | 427 | 430 | FY19 Actuals + escalation | |
| 506107 · Soccer Field | 441 | 441 | 450 | FY19 Actuals + escalation | |
| 506108 · Camp Crockett | 274 | 274 | 280 | FY19 Actuals + escalation | |
| 506109 · Performing Arts Stage | 461 | 461 | 470 | FY19 Actuals + escalation | |
| 506110 - H5 Pressbox and Lights | 92 | 92 | 800 | Based on American Legion (heat/lights) | |

# Madison County Parks and Recreation Authority
## Budget vs Actual-Operations only
### July 2016 through June 2019

**1.6% Escalation (based on Social Security COL adjustment)**

| | FY19 Actuals | FY20 Budget | FY21 Budget | Justification | Notes / questions |
|---|---|---|---|---|---|
| 506111 - JV Football | 335 | 335 | 340 | FY19 Actuals + escalation | |
| 506112 - Concession Stand | | | 840 | $70/month | |
| Total 506100 · Electricity | 6,630 | 6,630 | 8,280 | | |
| 506119 · Heating Services | 873 | 1,730 | 1,730 | FY19 Budget | |
| 506120 · Water & Sewer | | | | | |
| 506121 · Portajohn Costs | 10,041 | 12,210 | 10,050 | FY19 Actuals | |
| 506122 · Rec Ctr. Road | 229 | 190 | 230 | FY19 Actuals + escalation | |
| Total 506120 · Water & Sewer | 10,270 | 12,400 | 10,280 | | |
| 506130 · Telecommunications | 3,171 | 3,380 | 3,180 | FY19 Actuals | |
| Total 506000 · Utilities | 20,944 | 24,140 | 23,470 | | |
| 507000 · Insurance | | | | | |
| 507100 · Insurance - Vehicle | 1,728 | 1,780 | 2,304 | FY20 Actual | Additional vehicle coverage (Explorer) |
| 507110 · Insurance - Property | 167 | 170 | 166 | FY20 Actual | |
| 507120 · Insurance - General Liability | 335 | 340 | 340 | FY20 Actual | |
| 507130 · Insurance - Boiler & Machinery | 0 | 0 | 0 | FY20 Actual | |
| 507140 · Insurance - Public Officials | 550 | 570 | 550 | FY20 Actual | |
| 507150 · Insurance - Crime | 675 | 690 | 675 | FY20 Actual | |
| 507160 · Insurance--Equipment Breakdown | 14 | 10 | 14 | FY20 Actual | |
| 507170 · Insurance-Inland Marine | 144 | 150 | 144 | FY20 Actual | |
| Total 507000 · Insurance | 3,613 | 3,710 | 4,193 | | |
| 508000 · Seminars & Tuition | 965 | 1,500 | 1,500 | VRPS Mgt Conf, Nat'l Conf in Baltimore | VRPS $700; National conference in Baltimore $800 |
| 509000 · Office Supplies | 6,124 | 5,340 | 5,430 | FY19 Budget + escalation | |
| 509100 · Office Equipment | 2,371 | 959 | 2,500 | $79.90 per month-copier lease + copies | |
| 509200 · Meals and Entertainment | 399 | 330 | 330 | FY20 Budget | |
| 509300 · Subscriptions | 174 | 800 | 800 | Monthly subscriptions | Quickbooks, Adobe, Website |
| 510000 · Postal Service | 362 | 580 | 580 | FY20 Budget | |
| 511000 · Fuel | 3,334 | 4,120 | 4,120 | FY20 Budget | |
| 512000 · Janitorial | 84 | 290 | 290 | FY20 Budget + escalation | |
| 513000 · Small Tools & Equipment | 1,323 | 5,420 | 5,420 | FY20 Budget | |
| 514000 · Fees | | | | | |
| 514010 · Direct Deposit Fee | 0 | 0 | 0 | None anticipated | |
| 514020 · Bank Fees | 39 | 90 | 90 | | |
| 514030 · Credit Card Processing Fees | 566 | 720 | 720 | | |
| Total 514000 · Fees | 605 | 810 | 810 | | |
| 516000 · Capital Outlays | 121,351 | 36,898 | 26,948 | PLUG = excess of income over expense | |
| 516210Z · Donations - In-Kind | | | 0 | Fy19 budgeted percent of capital outlays | |
| 517000 · Expenses--Programs | 188,603 | 201,000 | 201,000 | | |
| Total Expense | | 486,066 | 485,299 | | |
| Net Income | | (766) | 0 | | |

| | | | | 1.6% | | Straight Time | | | Overtime | | | | | 7.65% | 2.57% | 20.12% | 1.25% | 2.81% | 8.40% | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | Fringe Benefits | | | | |
| | Position | Name (current) | Current Pay Rate | Esca-lation | Escalated Pay Rate | ST Hrs / week | # of Weeks | Straight Time Labor Cost | Overtime Pay Rate | OT Hrs / week | # of Weeks | Overtime Labor Cost | Total Pay | FICA | Unemployment (on first 8K) | Health Insurance (Historical %) | Group Life Insurance (Historical %) | Workers Compensation (Historical %) | VRS (Historical %) | Total Labor Cost |
| Employee | Operations Coordinator | Jerry Carpenter | 18.50 | 0.0% | 18.50 | 40.00 | 52 | 38,480.00 | 27.75 | 5.00 | 52 | 7,215.00 | 45,695.00 | 3,495.67 | 205.60 | 7,600.00 | 571.19 | 1,284.03 | 3,838.38 | 62,689.87 |
| Employee | Program Coordinator | Lindsay Von Herbulis | 17.48 | 0.0% | 17.48 | 40.00 | 52 | 36,358.40 | 26.22 | - | - | - | 36,358.40 | 2,781.42 | 205.60 | 7,600.00 | 454.48 | 1,021.67 | 3,054.11 | 51,475.68 |
| | Administrative Assistant | Vacant | 10.00 | 0.0% | 10.00 | 20.00 | 52 | 10,400.00 | 15.00 | - | - | - | 10,400.00 | 795.60 | 205.60 | - | - | - | - | 11,401.20 |
| | Maintenance - Part Time | Larry Davis | 16.00 | 0.0% | 16.00 | 27.00 | 40 | 17,280.00 | 24.00 | - | - | - | 17,280.00 | 1,321.92 | 205.60 | - | - | - | - | 18,807.52 |
| | Custodial - Part Time | Ira Smith | 11.00 | 0.0% | 11.00 | 32.00 | 40 | 14,080.00 | 16.50 | - | - | - | 14,080.00 | 1,077.12 | 361.86 | - | - | - | - | 15,518.98 |
| | Facility Supervisor | Kaylan Boone | 10.00 | 0.0% | 10.00 | 10.00 | 16 | 1,600.00 | 15.00 | - | - | - | 1,600.00 | 122.40 | 41.12 | - | - | - | - | 1,763.52 |
| | Custodial - Part Time | Danny Jasper | 13.00 | 0.0% | 13.00 | 10.00 | 52 | 6,760.00 | 19.50 | - | - | - | 6,760.00 | 517.14 | 173.73 | - | - | - | - | 7,450.87 |
| | Custodial - Part Time | Shirley Sipe | 11.00 | 0.0% | 11.00 | 10.00 | 52 | 5,720.00 | 16.50 | - | - | - | 5,720.00 | 437.58 | 147.00 | - | - | - | - | 6,304.58 |
| | | | | | | | | | | | | | 137,893.40 | 10,548.85 | 1,546.11 | 15,200.00 | 1,025.67 | 2,305.70 | 6,892.49 | 175,412.22 |

# Madison County Parks and Recreation Authority
## Budget vs Actual-Operations only
### July through December 2019

| | Jul - Dec 19 | Budget | $ Over Budget | % of Budget |
|---|---|---|---|---|
| **Ordinary Income/Expense** | | | | |
| **Income** | | | | |
| **410000 · Contribution from Madison Co** | 120,600 | 241,200 | (120,600) | 50% |
| **411000 · Donations** | | | | |
| **411010 · Hoover Ridge Pledge Payments** | 0 | 5,400 | (5,400) | 0% |
| **411015 · Hoover Ridge Fund** | 0 | 8,828 | (8,828) | 0% |
| **411020 · Other** | 2,500 | 0 | 2,500 | 100% |
| **411050 · In-Kind** | 0 | 26,000 | (26,000) | 0% |
| **Total 411000 · Donations** | 2,500 | 40,228 | (37,728) | 6% |
| **413000 · Brought forward from prior year** | 6,172 | 6,172 | 0 | 100% |
| **422000 · User Fee** | 9,684 | 22,700 | (13,016) | 43% |
| **Total Income** | 138,956 | 310,300 | (171,344) | 45% |
| **Gross Profit** | 138,956 | 310,300 | (171,344) | 45% |
| **Expense** | | | | |
| **500000 · Expenses--Operational** | | | | |
| **501000 · Payroll Expenses** | | | | |
| **501100 · Labor** | | | | |
| **501101 · Part-Time Custodian** | 11,812 | 10,920 | 892 | 108% |
| **501102 · Part-Time Clerical** | 4,345 | 10,691 | (6,346) | 41% |
| **501103 · Part-Time Maintenance** | 9,312 | 27,315 | (18,003) | 34% |
| **Total 501100 · Labor** | 25,469 | 48,926 | (23,457) | 52% |
| **501110 · Fringe** | | | | |
| **501111 · FICA and Medicare** | 1,948 | 3,743 | (1,795) | 52% |
| **501112 · VEC Expense** | 10 | 949 | (939) | 1% |
| **Total 501110 · Fringe** | 1,958 | 4,692 | (2,734) | 42% |
| **Total 501000 · Payroll Expenses** | 27,427 | 53,618 | (26,191) | 51% |
| **502000 · Leased Employees** | 28,551 | 114,166 | (85,615) | 25% |
| **503000 · Outside Services** | 250 | 340 | (90) | 74% |
| **504000 · Repairs & Maintenance** | | | | |
| **504110 · Field Maintenance** | 8,005 | 12,420 | (4,415) | 64% |
| **504120 · Supplies** | 1,648 | 7,050 | (5,402) | 23% |
| **504130 · Maintenance** | 577 | 5,000 | (4,423) | 12% |
| **504140 · Vehicle/Equipment Repairs** | 2,795 | 6,590 | (3,795) | 42% |
| **Total 504000 · Repairs & Maintenance** | 13,025 | 31,060 | (18,035) | 42% |
| **505000 · Advertising** | 336 | 980 | (644) | 34% |

# Madison County Parks and Recreation Authority
## Budget vs Actual-Operations only
### July through December 2019

| | Jul - Dec 19 | Budget | $ Over Budget | % of Budget |
|---|---|---|---|---|
| 506000 · Utilities | | | | |
| 506100 · Electricity | | | | |
| 506101 · Red Barn | 131 | 820 | (689) | 16% |
| 506102 · PRA Office | 751 | 1,150 | (399) | 65% |
| 506103 · E1 | 291 | 340 | (49) | 86% |
| 506104 · E2/Concessions | 652 | 1,090 | (438) | 60% |
| 506105 · American Legion Pavilion | 436 | 840 | (404) | 52% |
| 506106 · Hockey Rink/Concessions | 261 | 520 | (259) | 50% |
| 506107 · Soccer Field | 160 | 390 | (230) | 41% |
| 506108 · Camp Crockett | 107 | 190 | (83) | 56% |
| 506109 · Performing Arts Stage | 136 | 190 | (54) | 72% |
| 506110 · H5 Pressbox and Lights | 139 | 0 | 139 | 100% |
| 506111 · Football / Concessions | 392 | 340 | 52 | 115% |
| 506112 · Hoover Ridge Concessions | 51 | | | |
| Total 506100 · Electricity | 3,507 | 5,870 | (2,363) | 60% |
| 506119 · Heating Services | 327 | 1,730 | (1,403) | 19% |
| 506120 · Water & Sewer | | | | |
| 506121 · Portajohn Costs | 6,790 | 12,210 | (5,420) | 56% |
| 506122 · Rec Ctr. Road | 127 | 190 | (63) | 67% |
| Total 506120 · Water & Sewer | 6,917 | 12,400 | (5,483) | 56% |
| 506130 · Telecommunications | 1,107 | 3,180 | (2,073) | 35% |
| Total 506000 · Utilities | 11,859 | 23,180 | (11,321) | 51% |
| 507000 · Insurance | | | | |
| 507100 · Insurance - Vehicle | 2,304 | 1,780 | 524 | 129% |
| 507110 · Insurance - Property | 166 | 170 | (4) | 98% |
| 507120 · Insurance - General Liability | 340 | 340 | 0 | 100% |
| 507140 · Insurance - Public Officials | 550 | 570 | (20) | 96% |
| 507150 · Insurance - Crime | 675 | 690 | (15) | 98% |
| 507160 · Insurance--Equipment Breakdown | 14 | 10 | 4 | 140% |
| 507170 · Insurance-Inland Marine | 144 | 150 | (6) | 96% |
| Total 507000 · Insurance | 4,193 | 3,710 | 483 | 113% |
| 508000 · Seminars & Tuition | 0 | 1,200 | (1,200) | 0% |
| 508100 · Affiliations/Dues | 50 | 300 | (250) | 17% |
| 509000 · Office Supplies | 4,404 | 5,340 | (936) | 82% |
| 509100 · Office Equipment | 1,073 | 958 | 115 | 112% |
| 509200 · Meals and Entertainment | 66 | 330 | (264) | 20% |
| 509300 · Subscriptions | 339 | 1,000 | (661) | 34% |
| 509400 · Event Supplies | 2,745 | 300 | 2,445 | 915% |
| 510000 · Postal Service | 283 | 580 | (297) | 49% |
| 511000 · Fuel | 1,904 | 4,120 | (2,216) | 46% |

# Madison County Parks and Recreation Authority
## Budget vs Actual-Operations only
### July through December 2019

| | Jul - Dec 19 | Budget | $ Over Budget | % of Budget |
|---|---|---|---|---|
| 512000 · Janitorial | 0 | 290 | (290) | 0% |
| 513000 · Small Tools & Equipment | 0 | 5,120 | (5,120) | 0% |
| 514000 · Fees | | | | |
| 514020 · Bank Fees | (140) | 90 | (230) | (155)% |
| 514030 · Credit Card Processing Fees | 537 | 720 | (183) | 75% |
| Total 514000 · Fees | 397 | 810 | (413) | 49% |
| Total 500000 · Expenses--Operational | 96,903 | 247,402 | (150,499) | 39% |
| 516000 · Capital Outlays | | | | |
| 516200 · Building/Infrastructure Dev | | | | |
| 516202 · PRA Office Projects | 1,577 | 1,000 | 577 | 158% |
| 516208 · E1/E2 Projects | 88 | 0 | 88 | 100% |
| 516209 · Stage | 917 | 0 | 917 | 100% |
| 516210 · Concession Stand/Restroom | | | | |
| 516210F · Plumbing | 2,284 | 0 | 2,284 | 100% |
| 516210H · Framing, setting trusses, matrl | 111 | 0 | 111 | 100% |
| 516210J · Electrical | 3,700 | 720 | 2,980 | 514% |
| 516210L · Trim Carpentry | 9,298 | 0 | 9,298 | 100% |
| 516210M · Insulation | 1,600 | 0 | 1,600 | 100% |
| 516210N · Concrete | 385 | 0 | 385 | 100% |
| 516210P · Bathroom Partitions | 2,662 | 3,000 | (338) | 89% |
| 516210Q · Interior Walls | 6,439 | 4,244 | 2,195 | 152% |
| 516210R · Gutters | 0 | 2,000 | (2,000) | 0% |
| 516210S · Upstairs | 0 | 5,000 | (5,000) | 0% |
| 516210Z · Donations - In-Kind | 0 | 26,000 | (26,000) | 0% |
| Total 516210 · Concession Stand/Restroom | 26,479 | 40,964 | (14,485) | 65% |
| 516211 · H5 Renovation Project | | | | |
| 516211B · Bleachers | 100 | 0 | 100 | 100% |
| 516211C · Gates & Dugouts | 2,225 | 0 | 2,225 | 100% |
| 516211G · Electrical Supplies | 222 | 0 | 222 | 100% |
| 516211Q · Contingencies | 16,566 | 13,500 | 3,066 | 123% |
| 516211R · Plumbing | 189 | 0 | 189 | 100% |
| 516211S · Framing | 262 | 0 | 262 | 100% |
| 516211T · Batting Cages | 585 | 0 | 585 | 100% |
| 516211V · Interior | 3,642 | | | |
| Total 516211 · H5 Renovation Project | 23,791 | 13,500 | 10,291 | 176% |
| 516212 · Park Improvements | 681 | 7,434 | (6,753) | 9% |
| Total 516200 · Building/Infrastructure Dev | 53,533 | 62,898 | (9,365) | 85% |
| Total 516000 · Capital Outlays | 53,533 | 62,898 | (9,365) | 85% |

# Madison County Parks and Recreation Authority
## Budget vs Actual-Operations only
### July through December 2019

| | Jul - Dec 19 | Budget | $ Over Budget | % of Budget |
|---|---|---|---|---|
| 517000 · Expenses--Programs | | | | |
| 517010 · User Fee | 45 | | | |
| 517035 · Background Checks - Youth | 20 | | | |
| Total 517000 · Expenses--Programs | 65 | | | |
| Total Expense | 150,501 | 310,300 | (159,799) | 49% |
| Net Ordinary Income | (11,545) | 0 | (11,545) | 100% |
| **Net Income** | **(11,545)** | **0** | **(11,545)** | **100%** |

# Madison County Parks and Recreation Authority
## Statement of Activities
### July through December 2019

| | Jul - Dec 19 | |
|---|---|---|
| **Ordinary Income/Expense** | | |
| **Income** | | |
| **410000 · Contribution from Madison Co** | | 120,600.00 |
| **411000 · Donations** | | |
| **411010 · Hoover Ridge Pledge Payments** | 2,250.00 | |
| **411015 · Hoover Ridge Fund** | 4,100.00 | |
| **411020 · Other** | 2,500.00 | |
| **411021 · H5 Renovation Project** | 5,000.00 | |
| **411022 · Playground Project** | 3,171.00 | |
| **411030 · Youth Programs** | | |
| **411031 · Youth Sports Scholarship Fund** | 310.00 | |
| **411030 · Youth Programs - Other** | 590.00 | |
| **Total 411030 · Youth Programs** | 900.00 | |
| **Total 411000 · Donations** | | 17,921.00 |
| **412000 · Team Apparel Sales** | | |
| **412100 · Fan Gear** | 295.50 | |
| **Total 412000 · Team Apparel Sales** | | 295.50 |
| **413000 · Brought forward from prior year** | | 121,013.99 |
| **414000 · Rentals** | | |
| **414100 · Picnic Shelter Rental** | 825.00 | |
| **414110 · Facility/Field Rental** | 2,050.00 | |
| **414120 · Private Event Rental** | 2,300.00 | |
| **Total 414000 · Rentals** | | 5,175.00 |
| **415000 · Fees** | | |
| **415100 · Program Registration** | | |
| **415101 · Travel Team Fees** | 100.00 | |
| **415103 · Program Registration Fees** | 44,143.86 | |
| **Total 415100 · Program Registration** | 44,243.86 | |
| **415110 · Team Registration** | 5,429.19 | |
| **Total 415000 · Fees** | | 49,673.05 |
| **416000 · Concessions Sales** | | 3,039.33 |
| **417000 · Events** | | |
| **417005 · Hops Fest** | 6,771.75 | |
| **417006 · S'mores with Santa** | 125.00 | |
| **417007 · Haunted Woods** | 4,794.25 | |

# Madison County Parks and Recreation Authority
## Statement of Activities
### July through December 2019

| | Jul - Dec 19 | |
|---|---|---|
| 417008 · Youth Programs | | |
| 417008A · Heroes and Villains | 75.00 | |
| Total 417008 · Youth Programs | | 75.00 |
| 417010 · Music in the Park | | 6,869.04 |
| 417011 · Movies in the Park | | 18.00 |
| Total 417000 · Events | | 18,653.04 |
| 418000 · Team/Program Sponsorship | | 1,800.00 |
| 419000 · Misc Income | | |
| 419100 · Fundraisers | | 189.00 |
| Total 419000 · Misc Income | | 189.00 |
| 420000 · Uniform Payments | | 120.00 |
| 422000 · User Fee | | |
| 422010 · Driving Range | | 110.00 |
| 422000 · User Fee - Other | | 9,683.60 |
| Total 422000 · User Fee | | 9,793.60 |
| Total Income | | 348,273.51 |
| Gross Profit | | 348,273.51 |
| Expense | | |
| 500000 · Expenses--Operational | | |
| 501000 · Payroll Expenses | | |
| 501100 · Labor | | |
| 501101 · Part-Time Custodian | 11,812.00 | |
| 501102 · Part-Time Clerical | 4,345.00 | |
| 501103 · Part-Time Maintenance | 9,312.00 | |
| Total 501100 · Labor | 25,469.00 | |
| 501110 · Fringe | | |
| 501111 · FICA and Medicare | 1,948.36 | |
| 501112 · VEC Expense | 9.94 | |
| Total 501110 · Fringe | 1,958.30 | |
| Total 501000 · Payroll Expenses | | 27,427.30 |
| 502000 · Leased Employees | | 28,551.26 |
| 503000 · Outside Services | | 250.00 |

# Madison County Parks and Recreation Authority
## Statement of Activities
### July through December 2019

| | Jul - Dec 19 | |
|---|---|---|
| 504000 · Repairs & Maintenance | | |
| 504110 · Field Maintenance | 8,004.71 | |
| 504120 · Supplies | 1,648.05 | |
| 504130 · Maintenance | 577.39 | |
| 504140 · Vehicle/Equipment Repairs | 2,794.72 | |
| Total 504000 · Repairs & Maintenance | | 13,024.87 |
| 505000 · Advertising | | 433.87 |
| 506000 · Utilities | | |
| 506100 · Electricity | | |
| 506101 · Red Barn | 131.34 | |
| 506102 · PRA Office | 750.68 | |
| 506103 · E1 | 291.08 | |
| 506104 · E2/Concessions | 652.12 | |
| 506105 · American Legion Pavilion | 436.29 | |
| 506106 · Hockey Rink/Concessions | 260.56 | |
| 506107 · Soccer Field | 160.18 | |
| 506108 · Camp Crockett | 107.18 | |
| 506109 · Performing Arts Stage | 136.40 | |
| 506110 · H5 Pressbox and Lights | 139.06 | |
| 506111 · Football / Concessions | 391.80 | |
| 506112 · Hoover Ridge Concessions | 50.77 | |
| Total 506100 · Electricity | | 3,507.46 |
| 506119 · Heating Services | | 326.56 |
| 506120 · Water & Sewer | | |
| 506121 · Portajohn Costs | 7,070.00 | |
| 506122 · Rec Ctr. Road | 127.24 | |
| Total 506120 · Water & Sewer | | 7,197.24 |
| 506130 · Telecommunications | | 1,107.31 |
| Total 506000 · Utilities | | 12,138.57 |
| 507000 · Insurance | | |
| 507100 · Insurance - Vehicle | 2,304.00 | |
| 507110 · Insurance - Property | 166.00 | |
| 507120 · Insurance - General Liability | 340.00 | |
| 507140 · Insurance - Public Officials | 550.00 | |
| 507150 · Insurance - Crime | 675.00 | |
| 507160 · Insurance--Equipment Breakdown | 14.00 | |
| 507170 · Insurance-Inland Marine | 144.00 | |
| Total 507000 · Insurance | | 4,193.00 |

# Madison County Parks and Recreation Authority
## Statement of Activities
### July through December 2019

| | Jul - Dec 19 | |
|---|---|---|
| 508100 · Affiliations/Dues | | 50.00 |
| 509000 · Office Supplies | | 4,404.22 |
| 509100 · Office Equipment | | 1,073.11 |
| 509200 · Meals and Entertainment | | 322.32 |
| 509300 · Subscriptions | | 339.45 |
| 509400 · Event Supplies | | 2,745.14 |
| 510000 · Postal Service | | 283.00 |
| 511000 · Fuel | | 1,903.75 |
| 512000 · Janitorial | | 160.00 |
| 514000 · Fees | | |
| 514020 · Bank Fees | -127.83 | |
| 514030 · Credit Card Processing Fees | 537.03 | |
| Total 514000 · Fees | | 409.20 |
| Total 500000 · Expenses--Operational | | 97,709.06 |
| 516000 · Capital Outlays | | |
| 516200 · Building/Infrastructure Dev | | |
| 516202 · PRA Office Projects | 1,577.45 | |
| 516208 · E1/E2 Projects | 2,535.85 | |
| 516209 · Stage | 916.63 | |
| 516210 · Concession Stand/Restroom | | |
| 516210F · Plumbing | 2,283.66 | |
| 516210H · Framing, setting trusses, matrl | 110.56 | |
| 516210J · Electrical | 3,700.33 | |
| 516210L · Trim Carpentry | 9,297.93 | |
| 516210M · Insulation | 1,600.00 | |
| 516210N · Concrete | 385.00 | |
| 516210P · Bathroom Partitions | 2,662.00 | |
| 516210Q · Interior Walls | 6,439.18 | |
| Total 516210 · Concession Stand/Restroom | 26,478.66 | |
| 516211 · H5 Renovation Project | | |
| 516211B · Bleachers | 100.00 | |
| 516211C · Gates & Dugouts | 2,224.83 | |
| 516211G · Electrical Supplies | 221.72 | |
| 516211Q · Contingencies | 16,566.39 | |
| 516211R · Plumbing | 189.18 | |
| 516211S · Framing | 261.89 | |
| 516211T · Batting Cages | 585.32 | |
| 516211V · Interior | 3,641.65 | |
| Total 516211 · H5 Renovation Project | 23,790.98 | |

# Madison County Parks and Recreation Authority
## Statement of Activities
### July through December 2019

| | Jul - Dec 19 | |
|---|---|---|
| 516212 · Park Improvements | 681.00 | |
| Total 516200 · Building/Infrastructure Dev | | 55,980.57 |
| Total 516000 · Capital Outlays | | 55,980.57 |
| 517000 · Expenses--Programs | | |
| 517010 · User Fee | | 9,728.60 |
| 517030 · Insurance - Youth Programs | | 4,563.00 |
| 517035 · Background Checks - Youth | | 738.68 |
| 517040 · Contractual Services | | |
| 517041 · Approved Instructors | 12,999.70 | |
| 517042 · Umpires and Referees | 4,066.00 | |
| 517044 · Special Event Contractor | 632.50 | |
| Total 517040 · Contractual Services | | 17,698.20 |
| 517050 · Travel League Registration Fees | | 2,530.00 |
| 517060 · Tournament Entry Fees | | 748.00 |
| 517070 · Program Operational Expenses | | 4,587.36 |
| 517075 · All Star Operational Expense | | 2,030.11 |
| 517080 · Events | | |
| 517082 · Hops Fest | 5,381.77 | |
| 517084 · Haunted Woods | 1,482.00 | |
| 517085 · S'mores with Santa | 232.96 | |
| 517089 · Fundraisers-Other | | |
| 517089A · Music in the Park | 5,176.57 | |
| 517089B · Movies in the Park | 1,811.25 | |
| Total 517089 · Fundraisers-Other | 6,987.82 | |
| Total 517080 · Events | | 14,084.55 |
| 517090 · Repairs & Maintenance | | |
| 517092 · Field Maintenance | 2,040.38 | |
| 517093 · Supplies | 206.76 | |
| Total 517090 · Repairs & Maintenance | | 2,247.14 |
| 517100 · Program Supplies | | 6,051.92 |
| 517110 · Trophies and Awards | | 1,211.94 |
| 517120 · Uniforms | | 3,499.41 |
| 517125 · All Star Uniforms | | 1,044.00 |
| 517130 · Concession Expense | | 1,901.93 |
| 517140 · Team Apparel | | 106.28 |

# Madison County Parks and Recreation Authority
## Statement of Activities
### July through December 2019

| | Jul - Dec 19 |
|---|---|
| 517145 · Fan Gear Expenses | 384.00 |
| 517160 · Materials & Supplies | 1,444.02 |
| Total 517000 · Expenses--Programs | 74,599.14 |
| Total Expense | 228,288.77 |
| Net Ordinary Income | 119,984.74 |
| **Net Income** | **119,984.74** |

# Madison County Parks and Recreation Authority
## Statement of Financial Position
### As of December 31, 2019

| | Dec 31, 19 | |
|---|---|---|
| **ASSETS** | | |
| **Current Assets** | | |
| **Checking/Savings** | | |
| **10000 · Union Bank and Trust** | 131,920.60 | |
| **Total Checking/Savings** | 131,920.60 | |
| **Total Current Assets** | 131,920.60 | |
| **Fixed Assets** | | |
| **15000 · Capital Assets** | | |
| **15010 · Construction in Progress** | 42,059.54 | |
| **15020 · Building Improvements** | 28,395.43 | |
| **15030 · Equipment** | 79,033.26 | |
| **15120 · Accum. Depr-Bldg Improvements** | -1,419.77 | |
| **15130 · Accum. Depr.-Equipment** | -47,536.14 | |
| **Total 15000 · Capital Assets** | 100,532.32 | |
| **Total Fixed Assets** | 100,532.32 | |
| **TOTAL ASSETS** | | **232,452.92** |
| **LIABILITIES & EQUITY** | | |
| **Liabilities** | | |
| **Current Liabilities** | | |
| **Accounts Payable** | | |
| **20000 · Accounts Payable** | 1,917.12 | |
| **Total Accounts Payable** | 1,917.12 | |
| **Other Current Liabilities** | | |
| **24000 · Payroll Liabilities** | | |
| **24010 · Federal Withholding** | 48.00 | |
| **24020 · FICA & Medicare Withholding** | 423.90 | |
| **24030 · Virginia Withholding** | 312.00 | |
| **24040 · VEC Withholding** | 135.34 | |
| **24000 · Payroll Liabilities - Other** | -1.20 | |
| **Total 24000 · Payroll Liabilities** | 918.04 | |
| **Total Other Current Liabilities** | 918.04 | |
| **Total Current Liabilities** | 2,835.16 | |
| **Total Liabilities** | 2,835.16 | |

# Madison County Parks and Recreation Authority
## Statement of Financial Position
### As of December 31, 2019

| | Dec 31, 19 |
|---|---|
| **Equity** | |
| **31000 · Investment in Capital Assets** | 98,053.79 |
| **33000 · Unassigned Fund Balance** | 11,579.23 |
| **Net Income** | 119,984.74 |
| **Total Equity** | 229,617.76 |
| **TOTAL LIABILITIES & EQUITY** | **232,452.92** |

# Madison County Parks and Recreation Authority
## Budget vs Actual-Operations only
### July 2018 through June 2019

| | Jul '18 - Jun 19 | Budget | $ Over Budget | % of Budget |
|---|---|---|---|---|
| **Ordinary Income/Expense** | | | | |
| **Income** | | | | |
| **410000 · Contribution from Madison Co** | 210,300 | 210,300 | 0 | 100% |
| **410100 · Madison County School Fund** | 30,000 | 30,000 | 0 | 100% |
| **411000 · Donations** | | | | |
| **411015 · Hoover Ridge Fund** | 7,500 | 46,501 | (39,001) | 16% |
| **411021 · H5 Renovation Project** | 13,537 | 10,000 | 3,537 | 135% |
| **411051 · In-Kind - Concession Stand** | 0 | 99,003 | (99,003) | 0% |
| **Total 411000 · Donations** | 21,037 | 155,504 | (134,467) | 14% |
| **413000 · Brought forward from prior year** | 59,173 | 59,173 | 0 | 100% |
| **414000 · Rentals** | | | | |
| **414110 · Facility/Field Rental** | 300 | 0 | 300 | 100% |
| **Total 414000 · Rentals** | 300 | 0 | 300 | 100% |
| **422000 · User Fee** | 23,983 | 26,140 | (2,157) | 92% |
| **Total Income** | 344,794 | 481,117 | (136,323) | 72% |
| **Gross Profit** | 344,794 | 481,117 | (136,323) | 72% |
| **Expense** | | | | |
| **500000 · Expenses--Operational** | | | | |
| **501000 · Payroll Expenses** | | | | |
| **501100 · Labor** | | | | |
| **501101 · Part-Time Custodian** | 16,682 | 11,138 | 5,544 | 150% |
| **501102 · Part-Time Clerical** | 11,244 | 14,586 | (3,342) | 77% |
| **501103 · Part-Time Maintenance** | 13,692 | 23,185 | (9,494) | 59% |
| **Total 501100 · Labor** | 41,618 | 48,909 | (7,291) | 85% |
| **501110 · Fringe** | | | | |
| **501111 · FICA and Medicare** | 3,166 | 3,742 | (576) | 85% |
| **501112 · VEC Expense** | 446 | 697 | (251) | 64% |
| **Total 501110 · Fringe** | 3,613 | 4,439 | (826) | 81% |
| **Total 501000 · Payroll Expenses** | 45,231 | 53,348 | (8,117) | 85% |
| **502000 · Leased Employees** | 108,859 | 113,339 | (4,480) | 96% |
| **503000 · Outside Services** | 509 | 800 | (291) | 64% |
| **504000 · Repairs & Maintenance** | | | | |
| **504110 · Field Maintenance** | 7,646 | 12,084 | (4,438) | 63% |
| **504120 · Supplies** | 2,870 | 6,854 | (3,984) | 42% |
| **504130 · Maintenance** | 3,803 | 5,000 | (1,197) | 76% |
| **504140 · Vehicle/Equipment Repairs** | 7,155 | 6,273 | 882 | 114% |
| **Total 504000 · Repairs & Maintenance** | 21,475 | 30,211 | (8,736) | 71% |
| **505000 · Advertising** | 714 | 956 | (242) | 75% |
| **506000 · Utilities** | | | | |
| **506100 · Electricity** | | | | |
| **506101 · Red Barn** | 476 | 464 | 12 | 103% |
| **506102 · PRA Office** | 1,474 | 1,115 | 359 | 132% |
| **506103 · E1** | 594 | 372 | 222 | 160% |
| **506104 · E2/Concessions** | 1,258 | 1,393 | (135) | 90% |
| **506105 · American Legion Pavilion** | 798 | 650 | 148 | 123% |
| **506106 · Hockey Rink/Concessions** | 427 | 464 | (37) | 92% |
| **506107 · Soccer Field** | 441 | 372 | 69 | 119% |
| **506108 · Camp Crockett** | 274 | 93 | 181 | 294% |
| **506109 · Performing Arts Stage** | 461 | 0 | 461 | 100% |
| **506110 · H5 Pressbox and Lights** | 92 | 0 | 92 | 100% |
| **506111 · Football / Concessions** | 335 | 0 | 335 | 100% |
| **Total 506100 · Electricity** | 6,631 | 4,923 | 1,708 | 135% |
| **506119 · Heating Services** | 873 | 1,684 | (811) | 52% |

# Madison County Parks and Recreation Authority
## Budget vs Actual-Operations only
### July 2018 through June 2019

| | Jul '18 - Jun 19 | Budget | $ Over Budget | % of Budget |
|---|---|---|---|---|
| 506120 · Water & Sewer | | | | |
| 506121 · Portajohn Costs | 10,041 | 10,500 | (459) | 96% |
| 506122 · Rec Ctr. Road | 229 | 186 | 43 | 123% |
| Total 506120 · Water & Sewer | 10,271 | 10,686 | (415) | 96% |
| 506130 · Telecommunications | 3,171 | 3,754 | (583) | 84% |
| Total 506000 · Utilities | 20,946 | 21,047 | (101) | 100% |
| 507000 · Insurance | | | | |
| 507100 · Insurance - Vehicle | 1,728 | 1,765 | (37) | 98% |
| 507110 · Insurance - Property | 167 | 186 | (19) | 90% |
| 507120 · Insurance - General Liability | 335 | 279 | 56 | 120% |
| 507130 · Insurance - Boiler & Machinery | 0 | 19 | (19) | 0% |
| 507140 · Insurance - Public Officials | 550 | 557 | (7) | 99% |
| 507150 · Insurance - Crime | 675 | 650 | 25 | 104% |
| 507160 · Insurance--Equipment Breakdown | 14 | 0 | 14 | 100% |
| 507170 · Insurance-Inland Marine | 144 | 0 | 144 | 100% |
| Total 507000 · Insurance | 3,613 | 3,456 | 157 | 105% |
| 508000 · Seminars & Tuition | 965 | 225 | 740 | 429% |
| 508100 · Affiliations/Dues | 260 | 0 | 260 | 100% |
| 509000 · Office Supplies | 6,124 | 5,199 | 925 | 118% |
| 509100 · Office Equipment | 2,371 | 0 | 2,371 | 100% |
| 509200 · Meals and Entertainment | 399 | 0 | 399 | 100% |
| 509400 · Event Supplies | 174 | 0 | 174 | 100% |
| 510000 · Postal Service | 362 | 448 | (86) | 81% |
| 511000 · Fuel | 3,334 | 2,787 | 547 | 120% |
| 512000 · Janitorial | 84 | 279 | (195) | 30% |
| 513000 · Small Tools & Equipment | 1,323 | 5,276 | (3,953) | 25% |
| 514000 · Fees | | | | |
| 514010 · Direct Deposit Fee | 0 | 90 | (90) | 0% |
| 514020 · Bank Fees | 39 | 337 | (298) | 12% |
| 514030 · Credit Card Processing Fees | 566 | 1,190 | (624) | 48% |
| Total 514000 · Fees | 605 | 1,617 | (1,012) | 37% |
| Total 500000 · Expenses--Operational | 217,348 | 238,988 | (21,640) | 91% |
| 516000 · Capital Outlays | | | | |
| 516100 · Tools & Equipment | 483 | 1,031 | (548) | 47% |
| 516200 · Building/Infrastructure Dev | | | | |
| 516202 · PRA Office Projects | 90 | 0 | 90 | 100% |
| 516204 · Road Improvements | 316 | | | |
| 516206 · Irrigation Project | (777) | 0 | (777) | 100% |
| 516209 · Stage | 12,344 | 6,000 | 6,344 | 206% |
| 516210 · Concession Stand/Restroom | | | | |
| 516210C · Site work, footings, ada walks | 10,767 | 11,000 | (233) | 98% |
| 516210D · REC | 0 | 500 | (500) | 0% |
| 516210F · Plumbing | 3,913 | 5,900 | (1,987) | 66% |
| 516210G · Sewer | 0 | 8,000 | (8,000) | 0% |
| 516210H · Framing, setting trusses, matrl | 24,774 | 22,200 | 2,574 | 112% |
| 516210J · Electrical | 192 | 5,000 | (4,808) | 4% |
| 516210K · Roofing | 12,069 | 12,000 | 69 | 101% |
| 516210L · Trim Carpentry | 4,762 | 3,000 | 1,762 | 159% |
| 516210M · Insulation | 0 | 1,495 | (1,495) | 0% |
| 516210N · Concrete | 0 | 12,000 | (12,000) | 0% |
| 516210P · Bathroom Partitions | 0 | 3,000 | (3,000) | 0% |
| 516210Q · Interior Walls | 756 | 5,000 | (4,244) | 15% |
| 516210R · Gutters | 0 | 2,000 | (2,000) | 0% |
| 516210S · Upstairs | 0 | 5,000 | (5,000) | 0% |
| 516210Z · Donations - In-Kind | 0 | 99,003 | (99,003) | 0% |
| Total 516210 · Concession Stand/Restroom | 57,233 | 195,098 | (137,865) | 29% |

# Madison County Parks and Recreation Authority
## Budget vs Actual-Operations only
### July 2018 through June 2019

| | Jul '18 - Jun 19 | Budget | $ Over Budget | % of Budget |
|---|---|---|---|---|
| 516211 · H5 Renovation Project | | | | |
| 516211A · Electrical Lines | 0 | 1,823 | (1,823) | 0% |
| 516211B · Bleachers | 0 | 1,595 | (1,595) | 0% |
| 516211C · Gates & Dugouts | 377 | 500 | (123) | 75% |
| 516211D · Scoreboard Relocation | 3,882 | 2,000 | 1,882 | 194% |
| 516211E · Limestone | 1,453 | 1,400 | 53 | 104% |
| 516211F · Scoreboard Net | 0 | 200 | (200) | 0% |
| 516211G · Electrical Supplies | 15,355 | 5,874 | 9,481 | 261% |
| 516211H · Light Brackets | 5,912 | 1,000 | 4,912 | 591% |
| 516211J · Handicap Parking | 11 | 100 | (89) | 11% |
| 516211K · Electricity to Press Box | 0 | 1,006 | (1,006) | 0% |
| 516211L · ADA Route Concrete | 1,896 | 4,977 | (3,081) | 38% |
| 516211M · Building Concrete | 7,216 | 5,525 | 1,691 | 131% |
| 516211N · Concrete Pads for Bleachers | 1,302 | 1,000 | 302 | 130% |
| 516211P · Block | 626 | 3,000 | (2,374) | 21% |
| 516211Q · Contingencies | 7,245 | 5,000 | 2,245 | 145% |
| 516211R · Plumbing | 887 | 5,000 | (4,113) | 18% |
| 516211S · Framing | 3,704 | 0 | 3,704 | 100% |
| 516211T · Batting Cages | 1,506 | 0 | 1,506 | 100% |
| 516211U · Field Maintenance | 290 | | | |
| Total 516211 · H5 Renovation Project | 51,663 | 40,000 | 11,663 | 129% |
| Total 516200 · Building/Infrastructure Dev | 120,868 | 241,098 | (120,230) | 50% |
| Total 516000 · Capital Outlays | 121,351 | 242,129 | (120,778) | 50% |
| Total Expense | 338,699 | 481,117 | (142,418) | 70% |
| Net Ordinary Income | 6,096 | 0 | 6,095 | 1,904,922% |
| **Net Income** | **6,096** | **0** | **6,095** | **1,904,922%** |

# Madison County Parks and Recreation Authority
## Statement of Activities
### July 2018 through June 2019

| | Jul '18 - Jun 19 | |
|---|---|---|
| **Ordinary Income/Expense** | | |
| **Income** | | |
| **410000 · Contribution from Madison Co** | | 210,300.00 |
| **410100 · Madison County School Fund** | | 30,000.00 |
| **411000 · Donations** | | |
| **411010 · Hoover Ridge Pledge Payments** | 2,750.00 | |
| **411015 · Hoover Ridge Fund** | 9,520.00 | |
| **411020 · Other** | 25.00 | |
| **411021 · H5 Renovation Project** | 13,537.49 | |
| **411030 · Youth Programs** | 7,220.75 | |
| **411040 · Donations--All Stars** | 835.80 | |
| **411050 · In-Kind** | 1,475.00 | |
| **Total 411000 · Donations** | | 35,364.04 |
| **412000 · Team Apparel Sales** | | |
| **412100 · Fan Gear** | 4,925.45 | |
| **412200 · Team Gear** | 653.00 | |
| **Total 412000 · Team Apparel Sales** | | 5,578.45 |
| **413000 · Brought forward from prior year** | | 159,766.06 |
| **414000 · Rentals** | | |
| **414100 · Picnic Shelter Rental** | 1,100.00 | |
| **414110 · Facility/Field Rental** | 6,330.00 | |
| **Total 414000 · Rentals** | | 7,430.00 |
| **415000 · Fees** | | |
| **415100 · Program Registration** | | |
| **415101 · Travel Team Fees** | 575.00 | |
| **415103 · Program Registration Fees** | 93,416.73 | |
| **Total 415100 · Program Registration** | 93,991.73 | |
| **415110 · Team Registration** | 7,379.33 | |
| **Total 415000 · Fees** | | 101,371.06 |
| **416000 · Concessions Sales** | | 23,686.01 |
| **417000 · Events** | | |
| **417003 · Wool & Wine Festival** | 4,911.54 | |
| **417004 · Madison Running Club** | 4,315.00 | |
| **417005 · Hops Fest** | 12,213.12 | |
| **417006 · S'mores with Santa** | 1,303.00 | |
| **417007 · Haunted Woods** | 3,100.00 | |
| **417008 · Youth Programs** | | |
| **417008A · Heroes and Villains** | 365.00 | |
| **417008B · Princess Dance Party** | 525.00 | |
| **Total 417008 · Youth Programs** | 890.00 | |
| **417010 · Music in the Park** | 10,560.81 | |
| **417011 · Movies in the Park** | 744.85 | |
| **Total 417000 · Events** | | 38,038.32 |
| **418000 · Team/Program Sponsorship** | | 10,300.00 |
| **418100 · All Star Sponsorship** | | 934.20 |
| **419000 · Misc Income** | | |
| **419100 · Fundraisers** | 7,470.15 | |
| **Total 419000 · Misc Income** | | 7,470.15 |
| **420000 · Uniform Payments** | | 128.00 |

# Madison County Parks and Recreation Authority
## Statement of Activities
### July 2018 through June 2019

| | Jul '18 - Jun 19 | |
|---|---|---|
| 422000 · User Fee | | |
| 422010 · Driving Range | | 565.00 |
| 422000 · User Fee - Other | | 23,983.49 |
| Total 422000 · User Fee | | 24,548.49 |
| Total Income | | 654,914.78 |
| Gross Profit | | 654,914.78 |
| Expense | | |
| 500000 · Expenses--Operational | | |
| 501000 · Payroll Expenses | | |
| 501100 · Labor | | |
| 501101 · Part-Time Custodian | 16,682.00 | |
| 501102 · Part-Time Clerical | 11,244.40 | |
| 501103 · Part-Time Maintenance | 13,691.50 | |
| Total 501100 · Labor | 41,617.90 | |
| 501110 · Fringe | | |
| 501111 · FICA and Medicare | 3,166.33 | |
| 501112 · VEC Expense | 446.47 | |
| Total 501110 · Fringe | 3,612.80 | |
| Total 501000 · Payroll Expenses | | 45,230.70 |
| 502000 · Leased Employees | | 108,859.02 |
| 503000 · Outside Services | | 508.64 |
| 504000 · Repairs & Maintenance | | |
| 504110 · Field Maintenance | 7,646.44 | |
| 504120 · Supplies | 2,982.24 | |
| 504130 · Maintenance | 3,803.19 | |
| 504140 · Vehicle/Equipment Repairs | 7,155.05 | |
| Total 504000 · Repairs & Maintenance | | 21,586.92 |
| 505000 · Advertising | | 812.67 |
| 506000 · Utilities | | |
| 506100 · Electricity | | |
| 506101 · Red Barn | 476.10 | |
| 506102 · PRA Office | 1,474.23 | |
| 506103 · E1 | 594.43 | |
| 506104 · E2/Concessions | 1,257.95 | |
| 506105 · American Legion Pavilion | 798.18 | |
| 506106 · Hockey Rink/Concessions | 427.42 | |
| 506107 · Soccer Field | 441.49 | |
| 506108 · Camp Crockett | 273.52 | |
| 506109 · Performing Arts Stage | 460.62 | |
| 506110 · H5 Pressbox and Lights | 91.89 | |
| 506111 · Football / Concessions | 335.49 | |
| Total 506100 · Electricity | 6,631.32 | |
| 506119 · Heating Services | 873.18 | |
| 506120 · Water & Sewer | | |
| 506121 · Portajohn Costs | 10,641.42 | |
| 506122 · Rec Ctr. Road | 229.12 | |
| Total 506120 · Water & Sewer | 10,870.54 | |
| 506130 · Telecommunications | 3,394.62 | |
| Total 506000 · Utilities | | 21,769.66 |

# Madison County Parks and Recreation Authority
## Statement of Activities
### July 2018 through June 2019

| | Jul '18 - Jun 19 | |
|---|---|---|
| 507000 · Insurance | | |
| 507100 · Insurance - Vehicle | 1,728.00 | |
| 507110 · Insurance - Property | 167.00 | |
| 507120 · Insurance - General Liability | 335.00 | |
| 507140 · Insurance - Public Officials | 550.00 | |
| 507150 · Insurance - Crime | 675.00 | |
| 507160 · Insurance--Equipment Breakdown | 14.00 | |
| 507170 · Insurance-Inland Marine | 144.00 | |
| Total 507000 · Insurance | | 3,613.00 |
| 508000 · Seminars & Tuition | | 965.38 |
| 508100 · Affiliations/Dues | | 260.00 |
| 509000 · Office Supplies | | 6,274.55 |
| 509100 · Office Equipment | | 2,371.44 |
| 509200 · Meals and Entertainment | | 450.33 |
| 509400 · Event Supplies | | 174.00 |
| 510000 · Postal Service | | 402.95 |
| 511000 · Fuel | | 3,334.10 |
| 512000 · Janitorial | | 601.42 |
| 513000 · Small Tools & Equipment | | 1,322.72 |
| 514000 · Fees | | |
| 514020 · Bank Fees | 39.00 | |
| 514030 · Credit Card Processing Fees | 565.69 | |
| Total 514000 · Fees | | 604.69 |
| Total 500000 · Expenses--Operational | | 219,142.19 |
| 516000 · Capital Outlays | | |
| 516100 · Tools & Equipment | | 482.65 |
| 516200 · Building/Infrastructure Dev | | |
| 516202 · PRA Office Projects | 90.00 | |
| 516203 · Football Field Projects | 2,275.00 | |
| 516204 · Road Improvements | 316.06 | |
| 516206 · Irrigation Project | -777.42 | |
| 516209 · Stage | 14,874.05 | |
| 516210 · Concession Stand/Restroom | | |
| 516210C · Site work, footings, ada walks | 10,766.78 | |
| 516210F · Plumbing | 3,913.35 | |
| 516210H · Framing, setting trusses, matrl | 24,773.90 | |
| 516210J · Electrical | 191.68 | |
| 516210K · Roofing | 12,069.20 | |
| 516210L · Trim Carpentry | 4,761.63 | |
| 516210Q · Interior Walls | 756.00 | |
| Total 516210 · Concession Stand/Restroom | 57,232.54 | |
| 516211 · H5 Renovation Project | | |
| 516211C · Gates & Dugouts | 377.23 | |
| 516211D · Scoreboard Relocation | 3,882.11 | |
| 516211E · Limestone | 1,452.53 | |
| 516211G · Electrical Supplies | 15,355.46 | |
| 516211H · Light Brackets | 5,912.46 | |
| 516211J · Handicap Parking | 11.49 | |
| 516211L · ADA Route Concrete | 1,896.00 | |
| 516211M · Building Concrete | 7,215.52 | |
| 516211N · Concrete Pads for Bleachers | 1,302.00 | |
| 516211P · Block | 626.27 | |
| 516211Q · Contingencies | 7,244.66 | |
| 516211R · Plumbing | 887.34 | |
| 516211S · Framing | 3,703.69 | |

# Madison County Parks and Recreation Authority
## Statement of Activities
### July 2018 through June 2019

| | Jul '18 - Jun 19 | |
|---|---|---|
| 516211T · Batting Cages | 1,506.05 | |
| 516211U · Field Maintenance | 290.00 | |
| Total 516211 · H5 Renovation Project | 51,662.81 | |
| Total 516200 · Building/Infrastructure Dev | | 125,673.04 |
| Total 516000 · Capital Outlays | | 126,155.69 |
| 517000 · Expenses--Programs | | |
| 517010 · User Fee | | 24,052.69 |
| 517020 · Equipment | | 877.68 |
| 517030 · Insurance - Youth Programs | | 6,144.00 |
| 517035 · Background Checks - Youth | | 2,052.15 |
| 517040 · Contractual Services | | |
| 517041 · Approved Instructors | 12,236.19 | |
| 517042 · Umpires and Referees | 18,804.00 | |
| 517044 · Special Event Contractor | 120.00 | |
| Total 517040 · Contractual Services | | 31,160.19 |
| 517050 · Travel League Registration Fees | | 8,973.96 |
| 517060 · Tournament Entry Fees | | 2,350.00 |
| 517065 · All Star Tournament Entry Fees | | 650.00 |
| 517070 · Program Operational Expenses | | 20,808.92 |
| 517075 · All Star Operational Expense | | 100.00 |
| 517080 · Events | | |
| 517081 · Wool & Wine Festival | 2,973.93 | |
| 517082 · Hops Fest | 9,189.41 | |
| 517084 · Haunted Woods | 2,071.59 | |
| 517085 · S'mores with Santa | 2,334.65 | |
| 517087 · Madison Running Club | 4,916.17 | |
| 517088 · Youth Programs | | |
| 517088A · Heroes and Villains | 255.50 | |
| 517088B · Princess Dance Party | 525.00 | |
| Total 517088 · Youth Programs | 780.50 | |
| 517089 · Fundraisers-Other | | |
| 517089A · Music in the Park | 7,236.10 | |
| 517089B · Movies in the Park | 2,668.97 | |
| Total 517089 · Fundraisers-Other | 9,905.07 | |
| Total 517080 · Events | | 32,171.32 |
| 517090 · Repairs & Maintenance | | |
| 517091 · Equipment | 600.00 | |
| 517092 · Field Maintenance | 258.52 | |
| 517093 · Supplies | 428.16 | |
| Total 517090 · Repairs & Maintenance | | 1,286.68 |
| 517100 · Program Supplies | | 9,413.33 |
| 517110 · Trophies and Awards | | 4,294.52 |
| 517120 · Uniforms | | 15,793.09 |
| 517125 · All Star Uniforms | | 960.80 |
| 517130 · Concession Expense | | 15,017.80 |
| 517140 · Team Apparel | | 1,721.10 |
| 517145 · Fan Gear Expenses | | 6,205.81 |

# Madison County Parks and Recreation Authority
## Statement of Activities
### July 2018 through June 2019

| | Jul '18 - Jun 19 |
|---|---|
| 517150 · Coaching Education Reimb. | -25.00 |
| 517160 · Materials & Supplies | 4,593.87 |
| Total 517000 · Expenses--Programs | 188,602.91 |
| Total Expense | 533,900.79 |
| Net Ordinary Income | 121,013.99 |
| **Net Income** | **121,013.99** |

# Madison County Parks and Recreation Authority
## Statement of Financial Position
### As of June 30, 2019

| | Jun 30, 19 | |
|---|---|---|
| **ASSETS** | | |
| **Current Assets** | | |
| **Checking/Savings** | | |
| **10000 · Union Bank and Trust** | | 135,443.54 |
| **Total Checking/Savings** | | 135,443.54 |
| **Total Current Assets** | | 135,443.54 |
| **Fixed Assets** | | |
| **15000 · Capital Assets** | | |
| **15010 · Construction in Progress** | 42,059.54 | |
| **15020 · Building Improvements** | 28,395.43 | |
| **15030 · Equipment** | 79,033.26 | |
| **15120 · Accum. Depr-Bldg Improvements** | -1,419.77 | |
| **15130 · Accum. Depr.-Equipment** | -47,536.14 | |
| **Total 15000 · Capital Assets** | | 100,532.32 |
| **Total Fixed Assets** | | 100,532.32 |
| **TOTAL ASSETS** | | **235,975.86** |
| **LIABILITIES & EQUITY** | | |
| **Liabilities** | | |
| **Current Liabilities** | | |
| **Accounts Payable** | | |
| **20000 · Accounts Payable** | | 1,924.50 |
| **Total Accounts Payable** | | 1,924.50 |
| **Other Current Liabilities** | | |
| **24000 · Payroll Liabilities** | | |
| **24009 · Accrued Payroll** | 1,975.78 | |
| **24010 · Federal Withholding** | 108.00 | |
| **24020 · FICA & Medicare Withholding** | 729.66 | |
| **24030 · Virginia Withholding** | 361.00 | |
| **24040 · VEC Withholding** | 144.92 | |
| **24000 · Payroll Liabilities - Other** | 172.19 | |
| **Total 24000 · Payroll Liabilities** | | 3,491.55 |
| **Total Other Current Liabilities** | | 3,491.55 |
| **Total Current Liabilities** | | 5,416.05 |
| **Total Liabilities** | | 5,416.05 |
| **Equity** | | |
| **31000 · Investment in Capital Assets** | | 98,053.79 |
| **33000 · Unassigned Fund Balance** | | -103,349.62 |
| **34000 · Assigned Fund Balance** | | |
| **34010 · Youth Baseball** | 23,009.12 | |
| **34020 · Youth Basketball** | 4,642.52 | |
| **34030 · Youth Cheerleading** | 714.74 | |
| **34040 · Youth Football** | 4,556.53 | |
| **34050 · Youth Hockey** | 6,984.86 | |
| **34060 · Youth Soccer** | 10,015.33 | |
| **34070 · Youth Softball** | 11,549.12 | |
| **34080 · Youth Wrestling** | 1,646.19 | |
| **34160 · Tour de Madison** | 1,000.00 | |
| **34210 · Women's Volleyball** | 1,353.55 | |
| **34300 · Hoover Ridge Donations** | 41,782.12 | |
| **34400 · Signs** | 3,966.40 | |
| **34500 · Hoover Ridge Summer Camps** | 2,766.74 | |
| **34600 · Football Cheer** | 854.43 | |
| **Total 34000 · Assigned Fund Balance** | | 114,841.65 |

# Madison County Parks and Recreation Authority
## Statement of Financial Position
### As of June 30, 2019

| | Jun 30, 19 |
|---|---|
| **Net Income** | 121,013.99 |
| **Total Equity** | 230,559.81 |
| **TOTAL LIABILITIES & EQUITY** | **235,975.86** |

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE: January 13, 2020**

| IDENTIFICATION | |
|---|---|
| *Organization/Agency Name*: | Boys & Girls Clubs of Central Virginia (Madison Unit) |
| *Street Name:* | 1809 North Main Street, Madison, VA 22727 |
| *Mailing Address:* | PO Box 707, Charlottesville, VA 22902 |
| *Agency Contact:* | James Pierce, Chief Executive Officer |
| *Telephone Number:* | 434-971-9401 |
| *E-mail Address – Agency Contact* | jpierce@bgclubcva.org |
| *Agency's Web Address:* | www.bgclubcva.org |
| *Federal Tax ID#:* | 54-1602004 |
| *Audit:* | ☒Yes ☐No |

**PURPOSE/NARRATIVE**

*Missions and Goals:*

The mission of the Boys & Girls Club is to enable all young people, especially those who need us most, to reach their full potential as responsible, caring, and productive citizens. As the area's leading provider of youth development programs, the Boys & Girls Club of Madison believes that all children, regardless of circumstances, deserve opportunities for an education and a bright future. The Club is a safe place to learn, grow, and have fun. Club programs promote the development of our youth by instilling a sense of competence, usefulness, belonging, and influence, to help kids build lifelong skills. Priority outcome areas for members focus on academic success, healthy lifestyles, and good character and citizenship.

In our community, young people are often left to find their own recreation and companionship in the streets. It is vital that kids, especially those who lack adult supervision at home, are cared for and

valued. The Boys & Girls Club of Madison offers that and more. We strive to meet the most pressing needs of our communities, youth, and their families by providing supervised and educationally enriching youth development services to nearly 300 young people, ages 6 to 18, who would otherwise have limited or no out-of-school options. The Club is open every day after school, during many school breaks, and all day during the summer, and extended evening and weekend hours provide teens a safe space and support responsible life choices. The Madison Club offers 40 different programs that address the Five Core Areas of Youth Development: Education & Career; Character & Leadership; Health & Life Skills; The Arts; and Sports, Fitness, & Recreation.

*Experience and Accomplishments:*

The Boys & Girls Club of Madison operates as a unit of Boys & Girls Clubs of Central Virginia (BGCCVA). With the support of a visionary group of community volunteers, who recognized the need for fun, positive, and affordable out-of-school activities for area kids, the Madison Club opened its doors in March, 2008, to 25 young people. Due to increasing demand for membership, the Club moved in August, 2011, from a small room at Madison County High School to a larger space at Waverly Yowell Elementary School. Today, the Club is seeing an average of 96 members daily (as many as 139 daily during the summer) and added a second full-time staff member four years ago to support Club growth. We are proud that through the generosity of the community, including the County of Madison and the Madison County Public Schools, we are able to serve kids who need us most by keeping our fees to families affordable - $50 for the school year and $100 for the summer. Strategic growth to accommodate an expanding Club has been managed by the Madison Club's advisory board, composed of fifteen local individuals who believe in the Club's transformative impact on a child's life.

Recent accomplishments include 99% of Club members advancing to the next grade in June, 2019 – a strong indicator for on-time high school graduation. This is an important accomplishment considering the high school graduation rate in Madison has risen significantly since the Club has been in existence – 95.5% in 2019, up from 84% in 2008. Also emphasizing the importance for out-of-school time academic support are low SOL pass rates. The average 2018-2019 SOL pass rate among all grades and test subjects for students in Madison County Public Schools was 75%, lower than the state average.

Academic success at the Club can be contributed in large part to educational programs like Power Hour, an after-school homework and tutoring program, and year-round STEAM (Science, Technology, Engineering, Arts, and Math), overseen by a full-time STEM specialist and full-time arts specialist – positions funded through BGCCVA. In the summer of 2019, and for the third summer since beginning in 2016, members from all six Clubs gathered to participate in an organization-wide STEM Olympics. Teams competed in challenges including Tallest Tower, Marble Run, Egg Drop, and Future City, in which they designed their ideal futuristic metropolis. The daylong event concluded with community volunteer judges naming the Madison team BGCCVA Gold Medal STEM Olympic champions, the second team from Madison to win the top prize since 2016.

In October, 2019, Family STEM Night and FIRST LEGO League were implemented at the Madison Club. At STEM Night, kids teamed up with their parents to participate in engaging activities and demonstrate how much they have learned through STEM programming. It was a special evening for members to include their families in one of the many fun and educational focuses of the Club.

Offering Club kids the unique opportunity to explore career possibilities, LEGO League tasks participants to work in teams as architects and engineers to program LEGO robots and solve real-world issues. Last year's theme was City Shaper, challenging teams to identify a problem with a building or public space in their community, design a solution, and share their ideas with others.

It is important that children feel engaged and connected with the community and area around them. Focusing on the Club's pillar of good character and citizenship, members support their local communities through service projects. In 2018-2019, members of the Madison Club proudly completed 945 hours of service by participating in Madison Day and volunteering at the Autumn Care Nursing Home and Madison County Animal Shelter.

Three summers ago, a group of 15 teens from the Madison Club joined other teen members from all six BGCCVA units for the organization's first Teen Summit, held at the Darden School of Business at the University of Virginia. The focus was financial literacy, providing the teens with workshops and community resources, including professional financial advisors, to teach participants how to save and plan for the future. A huge success, the Teen Summit reconvened in 2018, engaging Club kids in effective strategies to promote inclusion and diversity in their communities in the wake of the August, 2017 events in Charlottesville. Last summer, the Teen Summit returned to target financial literacy, helping Club members build fundamental life skills and understand the importance of making real-life choices like childcare and transportation within a budget.

Among Madison's other accomplishments, the winners of the 2011, 2012, and 2013 Youth of the Year competition for BGCCVA were from the Madison Club. One of the winners placed second both years in the state competition and went on to study nursing at Old Dominion University. The second winner pursued a degree in public relations and communications at Virginia Commonwealth University and is now a published author and motivational speaker.

The Madison Club is proud to have a model partnership with the Madison County Public Schools. Not only does the Club utilize the school facilities at no charge, but during summers, summer school students participate in Club activities for the part of the day they are not in school. The close proximity of the school and Club also makes the Club easily accessible year-round. In addition, Club members are provided a healthy snack through CACFP (Child and Adult Food Care Program). A result of the growth in membership over the past several years, approximately 10,000 well-balanced meals and over 25,000 snacks are served at the Madison Club annually.

*Benefits of Funding:*

The Boys & Girls Club of Madison serves all of Madison County. Direct community benefits include: crime avoidance, keeping kids safe from negative influences and situations, loitering reduction, decreased vandalism and graffiti, improved school performance, obesity prevention, and increased economic stability when adults can work knowing that their children are in a safe and productive environment.

The need to provide a bigger safety net to our community's most at-risk children is evident in the number of teens dropping out of school, joining gangs, or developing alcohol and drug problems.

Many of the nearly 300 members served in our Madison Club qualify for free or reduced-price lunch (66%) or come from single parent families (37%). In many cases, both parents work full-time and/or have second jobs and are unable to afford more expensive alternative options for after-school enrichment programs.

Investing in our children helps to develop their academic confidence, build a solid foundation, and guide them toward a positive future. Keeping youth on track to on-time graduation is vital to their successful outcomes and the long-term strength of our communities. Failing to graduate high school, conversely, has long-term negative consequences for the individual and for society. High school dropouts earn much less than those with diplomas, and are far more likely to rely on public assistance. As a result of their incomes, dropouts contribute much less in income taxes and sales taxes. A dropout is more likely to commit crimes and serve time in prison. They typically have worse health outcomes and often do not live as long as someone who completed high school. On average, high school graduates earn $10,000 more per year than high school dropouts.

According to the U.S. Census Bureau, the estimated tax revenue and lifetime earnings loss from every male between the ages of 25 and 34 years who does not complete high school is approximately $944 billion. The increased cost in public assistance and crime is calculated to be $24 billion nationally. In addition, 75% of America's state prison inmates are high school dropouts. According to the Alliance for Excellent Education, dropouts from the class of 2008 will cost Virginia almost $7.6 billion in lost wages over their lifetimes.

If we help just over 10 members graduate who otherwise would not have, we can add $2 million to our economy over those members' lifetimes. Over time, 100 members equals $20 million in economic growth.

BGCCVA ensures fiscally and administratively sound practices by providing essential services, engaging the board of directors in strategic planning and audit reviews, and pursuing a diversified development plan. The Club's successful development efforts include an annual direct mail appeal and major fundraising events. Along with being an investment in a stable organization with a proven track record, financial support from Madison County reflects well on our organization and helps to leverage dollars from other funding sources including local individuals and businesses, civic and religious groups, and grants from foundations and government agencies, such as Boys & Girls Clubs of America, the Commonwealth of Virginia Department of Social Services, the Child and Adult Care Food Program, the Virginia Foundation for Healthy Youth, and the Office of Justice Programs.

*Intention of Use:*

Generous funds from Club supporters are essential to ensuring the Club can continue to be affordable and accessible for our community's most vulnerable citizens. As Club expenses continue to increase each year, funds from Madison County will support the Club's year-round programs, including staffing, equipment, and field trips. The actual cost of serving one kid for one year at the Club is approximately $2,000, which is supported by just 8% through annual membership fees of $150. A $10,000 investment by Madison County would ensure that 10 area kids have access to one year of high-level youth development programming. Additionally, the Club's request of $10,000 represents approximately 2.5% of the Madison Club's overall budget, which is in line with funding received from localities where other BGCCVA Clubs are located.

Experienced, knowledgeable, and caring staff are at the heart of the Club's mission to serve kids who need us most through high quality programs. Each day, they interact with members with the goal of making each child excited to return to the Club. It is important that club staff feel supported by the organization in a way that recognizes the value of their hard, meaningful work. Studies on youth development service providers indicate that high staff retention helps children create stronger relationships with adults they see every day. In an effort to attract and retain highly qualified staff and ensure they understand their importance to the Club, BGCCVA has a three-year plan of providing a living wage rate of at least $15 per hour to all part-time staff by FY21. The requested increase in funding from Madison County is critical toward the Club fulfilling its plan.

| FUNDING | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>☒ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 10,000 |

Signature: James R. Pierce Title: Chief Executive Officer

Printed Name: James Pierce Date: 1/10/2020

# BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA

## FINANCIAL STATEMENTS
## JUNE 30, 2018

# BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA

## CONTENTS


| | PAGE |
|---|---|
| Report of independent auditors | 1 |
| Statements of financial position | 3 |
| Statements of activities | 4 |
| Statements of cash flows | 5 |
| Statement of functional expenses - 2018 | 6 |
| Statement of functional expenses - 2017 | 7 |
| Notes to financial statements | 8 |

HANTZMON WIEBEL LLP
CPA and Advisory Services

# REPORT OF INDEPENDENT AUDITORS

To the Audit Committee
Boys & Girls Clubs of Central Virginia
Charlottesville, Virginia

We have audited the accompanying financial statements of BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA (a nonprofit organization), which comprise the statements of financial position as of June 30, 2018 and 2017, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

***Auditor's Responsibility***

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

To the Audit Committee
Boys & Girls Clubs of Central Virginia

**REPORT OF INDEPENDENT AUDITORS**--(Cont'd)

***Opinion***

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA as of June 30, 2018 and 2017, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Huntzmon Wiebel LLP

Charlottesville, Virginia
January 18, 2019

# BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA

## STATEMENTS OF FINANCIAL POSITION
## JUNE 30, 2018 AND 2017

### ASSETS

| | 2018 | 2017 |
|---|---|---|
| **CURRENT ASSETS** | | |
| Cash and cash equivalents | $ 621,987 | $ 1,394,057 |
| Short-term investments | 700,000 | 50,000 |
| Accounts receivable | 9,350 | 22,026 |
| Sponsorships receivable, current | 25,000 | 25,000 |
| Pledges receivable, current | 252,604 | 420,766 |
| Grants receivable | 101,858 | 77,045 |
| Prepaid expenses and deposits | 5,807 | 3,967 |
| Total current assets | 1,716,606 | 1,992,861 |
| **PROPERTY AND EQUIPMENT, NET** | 5,922,835 | 5,648,046 |
| **OTHER ASSETS** | | |
| Cash and cash equivalents | 217,102 | 4,901,139 |
| Short-term investments | 16,950,000 | .... |
| Investments | 4,447,464 | 3,129,105 |
| Sponsorships receivable, due after one year | 50,000 | 75,000 |
| Pledges receivable, due after one year | 87,000 | 318,167 |
| Construction in progress | .... | 203,184 |
| Total other assets | 21,751,566 | 8,626,595 |
| Total assets | $29,391,007 | $16,267,502 |

### LIABILITIES AND NET ASSETS

| | | |
|---|---|---|
| **CURRENT LIABILITIES** | | |
| Accounts payable | $ 25,675 | $ 26,320 |
| Accrued payroll, payroll taxes, and withholdings | 152,249 | 120,078 |
| Deferred revenue | 133,541 | 121,915 |
| Total current liabilities | 311,465 | 268,313 |
| **NET ASSETS** | | |
| Unrestricted | 7,735,891 | 7,934,045 |
| Temporarily restricted | 21,343,651 | 8,065,144 |
| Total net assets | 29,079,542 | 15,999,189 |
| Total liabilities and net assets | $29,391,007 | $16,267,502 |

# BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA

## STATEMENTS OF ACTIVITIES
## YEARS ENDED JUNE 30, 2018 AND 2017

| | 2018 | | | 2017 | | |
|---|---|---|---|---|---|---|
| | UNRESTRICTED | TEMPORARILY RESTRICTED | TOTAL | UNRESTRICTED | TEMPORARILY RESTRICTED | TOTAL |
| **OPERATING SUPPORT AND REVENUE** | | | | | | |
| Contributions | $ 1,276,476 | $ 549,946 | $ 1,826,422 | $ 1,109,737 | $ 359,574 | $ 1,469,311 |
| Grants | 685,689 | 235,210 | 920,899 | 685,973 | 198,534 | 884,507 |
| In-kind contributions | 62,804 | 147,405 | 210,209 | 56,245 | 96,960 | 153,205 |
| Program service revenue | 69,142 | 75,498 | 144,640 | 73,294 | 78,783 | 152,077 |
| Special events (net of expenses) | 454,937 | 268,541 | 723,478 | 534,401 | 277,496 | 811,897 |
| Miscellaneous | 7,032 | 175 | 7,207 | 1,758 | 76 | 1,834 |
| Net assets released from restrictions: | | | | | | |
| Satisfaction of program restrictions | 1,160,592 | ( 1,160,592) | .... | 1,007,534 | ( 1,007,534) | .... |
| Total operating support and revenue | 3,716,672 | 116,183 | 3,832,855 | 3,468,942 | 3,889 | 3,472,831 |
| **OPERATING EXPENSES** | | | | | | |
| Program services | 3,354,109 | .... | 3,354,109 | 3,096,546 | .... | 3,096,546 |
| Management and general | 384,508 | .... | 384,508 | 344,377 | .... | 344,377 |
| Fund-raising | 450,275 | .... | 450,275 | 348,273 | .... | 348,273 |
| Total operating expenses | 4,188,892 | .... | 4,188,892 | 3,789,196 | .... | 3,789,196 |
| Change in net assets from operations | ( 472,220) | 116,183 | ( 356,037) | ( 320,254) | 3,889 | ( 316,365) |
| **INVESTING REVENUE** | | | | | | |
| Investment income | 28,018 | 68,118 | 96,136 | 28,097 | 11,279 | 39,376 |
| Net realized and unrealized gains | 246,048 | 82,782 | 328,830 | 219,150 | 61,753 | 280,903 |
| Total investing revenue | 274,066 | 150,900 | 424,966 | 247,247 | 73,032 | 320,279 |
| **CAPITAL CAMPAIGN CONTRIBUTIONS** | .... | 13,011,424 | 13,011,424 | .... | 6,076,815 | 6,076,815 |
| **TOTAL CHANGE IN NET ASSETS** | ( 198,154) | 13,278,507 | 13,080,353 | ( 73,007) | 6,153,736 | 6,080,729 |
| **NET ASSETS, BEGINNING OF YEAR** | 7,934,045 | 8,065,144 | 15,999,189 | 8,007,052 | 1,911,408 | 9,918,460 |
| **NET ASSETS, END OF YEAR** | $ 7,735,891 | $21,343,651 | $29,079,542 | $ 7,934,045 | $ 8,065,144 | $15,999,189 |

(The accompanying notes are an integral part of these financial statements)

# BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA

## STATEMENTS OF CASH FLOWS
## YEARS ENDED JUNE 30, 2018 AND 2017

| | 2018 | 2017 |
|---|---|---|
| **CASH FLOWS FROM OPERATING ACTIVITIES** | | |
| Change in net assets | $13,080,353 | $ 6,080,729 |
| Adjustments to reconcile change in net assets to net cash provided operating activities: | | |
| Depreciation | 246,702 | 226,300 |
| Loss on asset abandonments | 1,379 | 153 |
| Net realized and unrealized (gain) loss on investments | ( 328,830) | ( 280,903) |
| Changes in provision for uncollectible pledges and pledges written off | ( 21,500) | 21,000 |
| Contributions received for long-term purposes | ( 12,711,757) | ( 5,409,482) |
| (Increase) decrease in assets: | | |
| Accounts receivable | 12,676 | 22,774 |
| Sponsorships receivable | 25,000 | 16,500 |
| Pledges receivable | 420,829 | ( 526,438) |
| Grants receivable | ( 24,813) | ( 37,053) |
| Prepaid expenses and deposits | ( 1,840) | 4,110 |
| Increase (decrease) in liabilities: | | |
| Accounts payable | ( 645) | ( 16,487) |
| Accrued payroll, payroll taxes, and withholdings | 32,171 | 4,545 |
| Deferred revenue | 11,626 | ( 48,816) |
| Net cash provided by operating activities | 741,351 | 56,932 |
| **CASH FLOWS FROM INVESTING ACTIVITIES** | | |
| (Increase) decrease in cash restricted for long-term purposes | 4,684,037 | ( 4,897,159) |
| Purchases of property and equipment | ( 49,411) | ( 110,055) |
| Construction costs (net of retainage) | ( 270,275) | ( 203,184) |
| Purchases of investments | ( 1,134,009) | ( 65,766) |
| Purchases of short-term investments | ( 17,600,000) | ( 50,000) |
| Sales of investments | 144,480 | 82,000 |
| Net cash used in investing activities | ( 14,225,178) | ( 5,244,164) |
| **CASH FLOWS FROM FINANCING ACTIVITIES** | | |
| Contributions received for long-term purposes | 12,711,757 | 5,409,482 |
| Net cash provided by financing activities | 12,711,757 | 5,409,482 |
| **NET INCREASE IN CASH AND CASH EQUIVALENTS** | ( 772,070) | 222,250 |
| **CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR** | 1,394,057 | 1,171,807 |
| **CASH AND CASH EQUIVALENTS AT END OF YEAR** | $ 621,987 | $ 1,394,057 |

(The accompanying notes are an integral part of these financial statements)

# BOYS & GIRLS CLUBS
# OF CENTRAL VIRGINIA

## STATEMENT OF FUNCTIONAL EXPENSES
## YEAR ENDED JUNE 30, 2018

| | PROGRAM SERVICES | MANAGEMENT AND GENERAL | FUND-RAISING | TOTAL |
|---|---|---|---|---|
| **OPERATING EXPENSES** | | | | |
| Benefits and payroll taxes | $ 302,604 | $ 35,987 | $ 48,370 | $ 386,961 |
| Compensation | 1,865,613 | 221,869 | 298,212 | 2,385,694 |
| Depreciation | 201,984 | 22,359 | 22,359 | 246,702 |
| Dues | 18,152 | 6,340 | .... | 24,492 |
| Insurance | 27,543 | 2,839 | 2,839 | 33,221 |
| Marketing and cultivation | .... | .... | 38,497 | 38,497 |
| Miscellaneous costs | 26,824 | 10,305 | 718 | 37,847 |
| Occupancy | 279,178 | 18,551 | 18,551 | 316,280 |
| Office operating costs | 79,728 | 18,030 | 8,913 | 106,671 |
| Other staff costs | 29,570 | 2,987 | 1,913 | 34,470 |
| Printing and postage | 2,756 | 1,148 | 4,439 | 8,343 |
| Professional fees | 14,629 | 34,247 | 499 | 49,375 |
| Program costs | 456,670 | .... | .... | 456,670 |
| Staff training and education | 14,294 | 5,871 | .... | 20,165 |
| Vehicle costs | 34,564 | 3,975 | 4,965 | 43,504 |
| Total | $3,354,109 | $ 384,508 | $ 450,275 | $4,188,892 |

(The accompanying notes are an integral part of these financial statements)

# BOYS & GIRLS CLUBS
# OF CENTRAL VIRGINIA

## STATEMENT OF FUNCTIONAL EXPENSES
## YEAR ENDED JUNE 30, 2017

| | PROGRAM SERVICES | MANAGEMENT AND GENERAL | FUND-RAISING | TOTAL |
|---|---|---|---|---|
| **OPERATING EXPENSES** | | | | |
| Benefits and payroll taxes | $ 294,878 | $ 31,819 | $ 43,288 | $ 369,985 |
| Compensation | 1,660,847 | 179,213 | 243,813 | 2,083,873 |
| Depreciation | 183,716 | 21,292 | 21,292 | 226,300 |
| Dues | 18,796 | 4,042 | .... | 22,838 |
| Insurance | 22,410 | 2,371 | 2,371 | 27,152 |
| Marketing and cultivation | .... | .... | 5,476 | 5,476 |
| Miscellaneous costs | 7,505 | 12,594 | 427 | 20,526 |
| Occupancy | 272,453 | 18,167 | 18,167 | 308,787 |
| Office operating costs | 63,394 | 21,880 | 7,265 | 92,539 |
| Other staff costs | 22,830 | 2,723 | .... | 25,553 |
| Printing and postage | 1,276 | 523 | 2,477 | 4,276 |
| Professional fees | 13,488 | 35,912 | 491 | 49,891 |
| Program costs | 467,486 | .... | .... | 467,486 |
| Staff training and education | 23,206 | 10,598 | .... | 33,804 |
| Vehicle costs | 44,261 | 3,243 | 3,206 | 50,710 |
| Total | $3,096,546 | $ 344,377 | $ 348,273 | $3,789,196 |

(The accompanying notes are an integral part of these financial statements)

# BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA

## NOTES TO FINANCIAL STATEMENTS

### 1. NATURE OF ACTIVITIES

The Boys & Girls Clubs of Central Virginia (the Club) was organized in 1992 as a Virginia non-stock corporation. Its mission is the promotion of healthy social, educational, vocational, and character development of boys and girls, bringing together on equal grounds, under good leadership, boys and girls from all economic and social classes. The Club offers youth from the ages of six to eighteen the opportunity for recreation away from the moral and physical dangers often encountered in everyday life, providing the opportunity for its members to achieve their goals and aspirations in life. The Club is an independent corporation, but is affiliated with and pays dues to the Boys & Girls Clubs of America.

### 2. SIGNIFICANT ACCOUNTING POLICIES

a. ***Basis of Accounting***

The accompanying financial statements have been prepared using the accrual basis of accounting in accordance with U. S. generally accepted accounting principles (U. S. GAAP) and, accordingly, reflect all significant receivables, payables, and other liabilities. Support and revenue are recorded when earned or pledged and expenses are recorded as incurred.

b. ***Basis of Presentation***

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board (FASB). Under this guidance, the Club is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

In order to ensure observance of limitations and restrictions placed on the use of resources available to the Club, its accounts are maintained in accordance with donor restrictions placed on the donated assets. Separate accounts are maintained for each category of donor-restricted assets and unrestricted assets. The assets, liabilities, and net assets of the Club are reported in the following self-balancing net asset groups:

Unrestricted net assets represent the portion of net assets that can be utilized to support current and future Club operations.

Temporarily restricted net assets represent contributions to the Club that are expendable only for purposes specified by the donor or that have restrictions that expire with the passage of time.

Permanently restricted net assets represent contributions to the Club that are subject to restrictions of gift instruments requiring that the principal (and, in some cases, a portion of the investment income) be invested in perpetuity and the income only be used for current operating purposes. There were no permanently restricted net assets at June 30, 2018 and 2017.

## NOTES TO FINANCIAL STATEMENTS--(Cont'd)

### 2. SIGNIFICANT ACCOUNTING POLICIES--(Cont'd)

c. ***Policy Disclosure***

The Club reports gifts of cash and other assets as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence and/or nature of any donor restrictions. When a donor temporary restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

The Club reports gifts of land, buildings, and equipment as unrestricted support, unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. In the absence of explicit donor stipulations about how long those long-lived assets must be maintained, the Club reports expirations of donor restrictions when the donated or acquired long-lived assets are placed in service.

d. ***Cash and Cash Equivalents***

The Club considers all highly liquid investments acquired with an original maturity of three months or less at the date of purchase to be cash equivalents. The Club maintains its cash in bank deposit accounts that, at times may exceed federally-insured limits and are subject to credit risk. The Club has not experienced any losses in these accounts.

Cash and cash equivalents reported as part of other assets on the statement of financial position represent (i) cash received with donor-imposed restrictions limiting its use to expenditure for capital assets, (ii) funds designated by the Board for use in the future, or (iii) amounts reasonably expected to be held longer than one year from the date of the financial statements.

e. ***Accounts Receivable***

Accounts receivable represent amounts owed to the Club, and are shown net of any specific bad debt write-offs. The Club does not accrue finance charges on past due accounts. All receivables are unsecured and subject to certain credit risks. Management writes off uncollectible accounts when specifically identified. Management determined that an allowance for uncollectible accounts was not necessary at June 30, 2018 and 2017.

2. SIGNIFICANT ACCOUNTING POLICIES--(Cont'd)

f. ***Pledges Receivable***

Pledges receivable, less an allowance for uncollectible amounts, are recognized as revenue in the period received and as assets or decreases of liabilities or expenses, depending on the form of the benefits received. Management reviews its collection experience in determining the need for an allowance for uncollectible pledges receivable. Management's estimate for the allowance for uncollectible pledges was $0 and $10,000 at June 30, 2018 and 2017, respectively. Amounts to be received beyond one year are discounted to net present values. Conditional pledges receivable are recognized when the conditions on which they depend are substantially met. Conditional pledges were $0 and $30,000 at June 30, 2018 and 2017, respectively.

g. ***Support and Revenue***

The Club receives contributions from three principal sources: annual individual philanthropic contributions, periodic special events, and grants. Each year, the Club must raise approximately 85% of its operating expenditures and seldom does the Club receive multi-year grants or does it have commitments for more than 15% of a fiscal year's operating expenditures prior to the start of the fiscal year.

The Club collects registration and other fees from its members to help offset the costs associated with the registration process and certain elective programs. These fees are reported as program fees and club fees in the statement of activities, or as offsets against program expenses for certain elective programs.

h. ***Donated Materials and Services***

In accordance with FASB guidance, contributions of services are recognized for services received that require specialized skills. The Club recognized $10,000 of contributed audit services support for each of the years ended June 30, 2018 and 2017. In addition, the Club recognized $52,408 and $6,778 of contributed contractor services support for the years ended June 30, 2018 and 2017, respectively.

No amounts have been recognized in the financial statements for donated services that are not specialized skills, since there is no objective basis to measure the value of such services. Nevertheless, a substantial number of volunteers have donated significant amounts of their time in the Club's fund-raising and program activities.

Significant donated materials and other items, exclusive of capital additions, are valued at cost or estimated fair market value on the date of the gift, as applicable. The Club also receives donated supplies or discounts on supplies that it uses in fund-raising and other activities.

2. SIGNIFICANT ACCOUNTING POLICIES--(Cont'd)

i. ***Accounting Estimates***

The preparation of financial statements in conformity with U. S. GAAP requires management to make estimates and assumptions that affect reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Significant estimates that affect the Club's financial statements are the allowance for uncollectible pledges, the discounting of future pledges receivable to their estimated net present values, functionalization of expenses, fair value of investments, depreciable lives and residual value of property, and the valuation of contributed services and donated lease space.

j. ***Advertising***

The Club expenses advertising costs as incurred. Advertising costs were insignificant in the years ended June 30, 2018 and 2017.

k. ***Property and Equipment***

Property and equipment are stated at cost. The Club capitalizes all expenditures for items that exceed $2,500 in value that have a useful life of two years or longer. Donated property is recorded at fair market value based on independent appraisals or comparisons to similar asset sales and are recognized as income when received.

Property and equipment are depreciated using straight-line and accelerated methods over the estimated useful lives of the assets. Management generally estimates useful lives of 3 to 7 years for vehicles and equipment, 7 to 10 years for furniture and fixtures, and 39 years for buildings and leasehold improvements. Depreciation expense amounted to $246,702 and $226,300 for the years ended June 30, 2018 and 2017, respectively. Expenditures for maintenance and repairs are expensed as incurred.

l. ***Exempt Tax Status***

The Club is exempt from income taxes under Section (501)(c)(3) of the Internal Revenue Code and therefore has made no provision for federal income taxes in the accompanying financial statements. In addition, the Club has been determined by the Internal Revenue Service not to be a "private foundation" within the meaning of Section 509(a) of the Internal Revenue Code. There was no unrelated business taxable income during the years ended June 30, 2018 and 2017.

## NOTES TO FINANCIAL STATEMENTS--(Cont'd)

### 2. SIGNIFICANT ACCOUNTING POLICIES--(Cont'd)

m. ***Uncertain Tax Positions***

The Club has reviewed and evaluated the relevant technical merits of each of its tax positions in accordance with guidance established by the FASB and determined that there are no uncertain tax positions that would have a material impact on the financial statements of the Club.

n. ***Functional Allocation of Expenses***

The costs of providing the various programs and activities have been summarized on a functional basis in the statements of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

o. ***Fair Values of Financial Instruments***

The FASB established a framework for measuring fair value that expands disclosures about fair value measurements under U. S. GAAP.

The fair value framework requires the categorization of assets and liabilities into three levels based on the assumptions (inputs) used to price the assets or liabilities. Level 1 provides the most reliable measure of fair value, whereas Level 3 generally requires significant management judgment. The three levels are defined as follows:

| | |
|---|---|
| Level 1 | Unadjusted quoted prices in active markets for identical assets and liabilities. |
| Level 2 | Observable inputs other than those included in Level 1. For example, quoted prices for similar assets or liabilities in active markets or quoted prices for identical assets or liabilities in inactive markets. |
| Level 3 | Unobservable inputs reflecting management's own assumptions about the inputs used in pricing the asset or liability. |

The Club's pledges receivable are categorized as Level 3 assets.

p. ***Subsequent Events***

Management has evaluated subsequent events through January 18, 2019, which is the date the financial statements were available to be issued.

### 3. SHORT-TERM INVESTMENTS

The Club's short-term investments consist of certificates of deposit held with financial institutions through the Certificate of Deposit Account Registry Service ("CDARS") program with maturity dates of four months to one year from the date of purchase. As of June 30th, 2018 and 2017, the carrying values approximate the market values of these investments. The CDARS program reduces or eliminates the Club's risk related to concentrations of investments above Federal Deposit Insurance Corporations (FDIC) insurance levels.

Short-term investments reported as part of other assets on the statement of financial position represent (i) cash received with donor-imposed restrictions limiting its use to expenditure for capital assets, (ii) funds designated by the Board for use in the future, or (iii) amounts reasonably expected to be held longer than one year from the date of the financial statements.

### 4. INVESTMENTS

The Club invests funds with the goal of generating a total return that meets or exceeds the spending rate and the inflation rate as measured by the Consumer Price Index.

The Club holds investments managed by an outside third party that are part of a pooled investment fund. The Club does not hold individual investments in this fund, but rather holds a share of the pool and, as such, generally only unrealized gains and losses are reported by the investment manager to the Club based upon its respective share of the pool. Realized gains and losses will be reported upon redemption of the Club's share of the pool. Investments can be liquidated subject to approval by the investment manager and the Club's Board. The Club has no unfunded commitments. The fund invests primarily in equity securities, fixed income securities, and alternative investments. The alternative investments are not readily marketable and are carried at estimated fair values as provided by the investment manager. The Club believes the carrying amount of these investments is a reasonable estimate of fair value. The amounts the Club will ultimately realize could differ materially from the reported amounts, and significant fluctuations in fair values could occur from year to year.

The Club's investments are carried at their fair market value based upon the values reported by the investment pool fund manager. At June 30, 2018, the fund was available to be redeemed, subject to approval, at the full net asset value (NAV). The cost basis includes the original purchase cost of the investments plus investment earnings reinvested.

A summary of the fair market value and cost of the Club's investments at June 30, 2018, is as follows:

| | FAIR MARKET VALUE | ORIGINAL COST | EARNINGS REINVESTED | TOTAL COST |
|---|---|---|---|---|
| Pooled investments ..... | $4,447,464 | $3,855,000 | $ 255,674 | $4,110,674 |

4. **INVESTMENTS**--(Cont'd)

A summary of the fair market value and cost of the Club's investments at June 30, 2017, is as follows:

| | FAIR MARKET VALUE | ORIGINAL COST | EARNINGS REINVESTED | TOTAL COST |
|---|---|---|---|---|
| Pooled investments | $3,129,105 | $2,760,000 | $ 216,664 | $2,976,664 |

For the years ended June 30, 2018 and 2017, the Club recognized net realized and unrealized gains (net of investment management fees) on the change in the value of its investments as follows:

| | 2018 | 2017 |
|---|---|---|
| Net realized and unrealized gains | $ 328,830 | $ 280,903 |

At June 30, 2018 and 2017, the Club's investments in the pool consisted of the following:

| | 2018 | 2017 |
|---|---|---|
| Public and private equity funds | 67.2% | 64.3% |
| Alternative investments | 18.2 | 19.0 |
| Fixed income securities | 10.9 | 13.5 |
| Real estate investment trusts | 2.5 | 2.1 |
| Cash | 1.2 | 1.1 |
| | 100.0% | 100.0% |

Expenses relating to investment revenues totaled $34,952 and $30,045 for the years ended June 30, 2018 and 2017, respectively. These expenses represent fees charged by the investment manager for investment management and advisory services. Investment fees have been netted against realized and unrealized gains (losses) in the accompanying statement of activities for the years ended June 30, 2018 and 2017.

5. **PROPERTY AND EQUIPMENT**

The Club's property and equipment consisted of the following at June 30, 2018 and 2017:

| | 2018 | 2017 |
|---|---|---|
| Buildings, improvements, and equipment | $7,136,968 | $6,673,984 |
| Furniture and fixtures | 265,505 | 268,695 |
| Vehicles | 321,283 | 312,074 |
| Total property and equipment | 7,723,756 | 7,254,753 |
| Less: Accumulated depreciation | 1,800,921 | 1,606,707 |
| Property and equipment (net) | $5,922,835 | $5,648,046 |

## NOTES TO FINANCIAL STATEMENTS--(Cont'd)

### 6. PLEDGES RECEIVABLE

The Club has adopted U. S. GAAP standards for the fair value option to value its multi-year pledges receivable using a discount rate that is determined annually. The election was made because management believes that the use of fair value reduces the cost of measuring its multi-year pledges receivable in periods subsequent to their receipt and provides equal or better information to users of its financial statements than if those pledges were measured using present value techniques and historical discount rates. The Club determines its discount rate based upon the approximate five-year Treasury yield outstanding at the end of each year and applies this rate to all multi-year pledges receivable. The Club's discount rate was 2.0% at June 30, 2018 and 2017.

Pledges receivable at June 30, 2018 and 2017, were as follows:

| | 2018 | 2017 |
|---|---|---|
| Receivable in less than one year | $ 252,604 | $ 420,766 |
| Receivable in one to five years | 92,000 | 344,667 |
| Total pledges receivable | 344,604 | 765,433 |
| Less: Discounts on pledges receivable | ( 5,000) | ( 16,500) |
| Allowance for uncollectible pledges receivable | (....) | ( 10,000) |
| Net pledges receivable | $ 339,604 | $ 738,933 |

### 7. FAIR VALUE OF FINANCIAL INSTRUMENTS

The fair values of the Club's assets measured on a recurring basis at June 30, 2018, are as follows:

| | LEVEL 1 | LEVEL 2 | LEVEL 3 | INVESTMENTS MEASURED AT NAV | TOTAL |
|---|---|---|---|---|---|
| Pledges receivable | $ .... | $ .... | $ 339,604 | $ .... | $ 339,604 |
| Investments | .... | .... | .... | 4,447,464 | 4,447,464 |
| Total financial assets at fair value | $ .... | $ .... | $ 339,604 | $4,447,464 | $4,787,068 |

The Club's policy is to treat transfers between levels as occurring at the beginning of the year. During the year ended June 30, 2018, there were no changes to the classification among categories.

## NOTES TO FINANCIAL STATEMENTS--(Cont'd)

### 7. FAIR VALUE OF FINANCIAL INSTRUMENTS--(Cont'd)

The fair values of the Club's assets measured on a recurring basis at June 30, 2017, are as follows:

| | LEVEL 1 | LEVEL 2 | LEVEL 3 | INVESTMENTS MEASURED AT NAV | TOTAL |
|---|---|---|---|---|---|
| Pledges receivable | $ .... | $ .... | $ 738,933 | $ .... | $ 738,933 |
| Investments | .... | .... | .... | 3,129,105 | 3,129,105 |
| Total financial assets at fair value | $ .... | $ .... | $ 738,933 | $3,129,105 | $3,868,038 |

During the year ended June 30, 2017, there were no changes to the classification among categories.

In accordance with FASB ASC Subtopic 820-10, investments that are measured at fair value using the NAV practical expedient are not classified in the fair value hierarchy. The fair value amounts presented in these tables are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of financial position.

The following is a reconciliation of activity for the year ended June 30, 2018, for Level 3 assets measured at fair value and investments measured at NAV:

| | PLEDGES RECEIVABLE | INVESTMENTS | TOTAL |
|---|---|---|---|
| Balance, beginning of year | $ 738,933 | $3,129,105 | $3,868,038 |
| Contributions | 35,250 | 1,095,000 | 1,130,250 |
| Pledges written off | ( 10,000) | .... | ( 10,000) |
| Collections of pledges | ( 446,079) | .... | ( 446,079) |
| Investment withdrawals | .... | ( 144,480) | ( 144,480) |
| Change in discount and allowance | 21,500 | .... | 21,500 |
| Investment earnings reinvested | .... | 39,009 | 39,009 |
| Investment income - unrealized | .... | 363,782 | 363,782 |
| Funds expended for investment fees | .... | ( 34,952) | ( 34,952) |
| | $ 339,604 | $4,447,464 | $4,787,068 |

## NOTES TO FINANCIAL STATEMENTS--(Cont'd)

### 7. FAIR VALUE OF FINANCIAL INSTRUMENTS--(Cont'd)

The following is a reconciliation of activity for the year ended June 30, 2017, for Level 3 assets measured at fair value and investments measured at NAV:

| | PLEDGES RECEIVABLE | INVESTMENTS | TOTAL |
|---|---|---|---|
| Balance, beginning of year | $ 233,495 | $2,864,435 | $3,097,930 |
| Contributions | 929,625 | 30,000 | 959,625 |
| Pledges written off | ( 743) | .... | ( 743) |
| Collections of pledges | ( 402,444) | .... | ( 402,444) |
| Investment withdrawals | .... | ( 82,000) | ( 82,000) |
| Change in discount and allowance | ( 21,000) | .... | ( 21,000) |
| Investment earnings reinvested | .... | 35,767 | 35,767 |
| Investment income - unrealized | .... | 310,948 | 310,948 |
| Funds expended for investment fees | .... | ( 30,045) | ( 30,045) |
| | $ 738,933 | $3,129,105 | $3,868,038 |

### 8. GRANTS RECEIVABLE

Grants receivable consisted of the following at June 30, 2018 and 2017:

| | 2018 | 2017 |
|---|---|---|
| Boys & Girls Clubs of America Programs | $ .... | $ 11,000 |
| Office of Justice Programs | 17,174 | 21,884 |
| Virginia Department of Health | 23,949 | 19,838 |
| Virginia Department of Social Services | 25,876 | 18,212 |
| Virginia Foundation for Healthy Youth | 5,387 | 311 |
| Department of Criminal Justice Services | 21,072 | .... |
| Miscellaneous | 8,400 | 5,800 |
| | $ 101,858 | $ 77,045 |

### 9. CONSTRUCTION IN PROGRESS

Costs related to renovation of Club facilities at the Southwood location totaled $455,279. The renovation was completed and placed in service during the year ended June 30, 2018. All renovation costs were transferred from construction in progress to fixed assets during the year ended June 30, 2018.

## NOTES TO FINANCIAL STATEMENTS--(Cont'd)

### 10. DEFERRED REVENUE

Deferred revenue represents funds that have been received but not yet earned by the Club, such as grant proceeds received but not spent by year end, funds received for potential future clubs, and funds received for special events scheduled to take place after year end. Deferred revenue consisted of the following at June 30, 2018 and 2017:

| | 2018 | 2017 |
|---|---|---|
| Unexpended grant funds | $ 20,069 | $ 11,000 |
| Fees and sponsorships for future special events | 81,972 | 110,915 |
| Cash received with unmet conditions | 31,500 | .... |
| Total deferred revenue | $ 133,541 | $ 121,915 |

### 11. LINE OF CREDIT

Virginia National Bank extended a $250,000 five-year unsecured line of credit to the Club with interest payable monthly at a rate of the higher of the Wall Street Journal Prime Rate or 3.75%. At June 30, 2018 and 2017, the interest rate was 5.25% and 4.50%, respectively. The line matures February 1, 2019, but comes up for review each year of the five-year period for the bank to examine the Club's financial information. As of June 30, 2018, no draws had been made on the line of credit and it was still available for use until the maturity date. An officer at Virginia National Bank is a member of the Club's Board of Directors, but the line of credit was obtained in the ordinary course of business.

For the years ended June 30, 2018 and 2017, the Club was in compliance with all terms and conditions related to the line of credit.

### 12. NET ASSETS

Temporarily restricted net assets were as follows at June 30, 2018 and 2017:

| | 2018 | 2017 |
|---|---|---|
| Boys & Girls Clubs - Madison | $ 396,927 | $ 332,434 |
| Boys & Girls Clubs - Orange | 505,229 | 428,765 |
| Boys & Girls Clubs - Southwood | 1,701,746 | 1,627,169 |
| Boys & Girls Clubs - James River | 1,154,444 | 1,137,317 |
| Boys & Girls Clubs - Northern Urban Ring | 17,534,775 | 4,502,267 |
| Various (includes time restriction on pledges) | 50,530 | 37,192 |
| | $21,343,651 | $ 8,065,144 |

### 13. EMPLOYEE BENEFIT PLAN

The Club adopted a 403(b) thrift plan on January 1, 2015. Employees are eligible to participate in the plan if they are at least 18 years old, complete one year of service, and have worked at least 1,000 hours during the current year. There were 22 participants in the plan during the years ended June 30, 2018 and 2017, at a total cost to the Club of $30,026 and $27,590, respectively.

### 14. LEASE COMMITMENTS

The Club rents space from Orange County Public Schools under the terms of a lease agreement that requires a monthly rental fee of $1,208. The lease expired on June 30, 2018 and was renewed. The new lease is effective from July 1, 2018 through June 30, 2019. Escalation to cover increases in actual utility and/or maintenance costs, not to exceed 5%, may be applied annually at the discretion of the Schools.

Total rent expense was $23,387 and $21,690 for the years ended June 30, 2018 and 2017, respectively.

### 15. IN-KIND CONTRIBUTIONS

The Club conducts activities in facilities for which it pays no or below-market rents. The estimated market value of the use of these facilities is included in both support and expense in the statement of activities. The estimated market values for the years ended June 30, 2018 and 2017, are as follows:

| | 2018 | 2017 |
|---|---|---|
| Southwood, Charlottesville | $ 13,000 | $ 12,000 |
| Jack Jouett Middle School, Charlottesville | 25,000 | 23,000 |
| Orange County Public School Building | 38,000 | 36,000 |
| Madison County Public School Building | 21,000 | 21,000 |
| Scottsville Community Center Building | 13,000 | 13,000 |
| | $ 110,000 | $ 105,000 |

The Club also receives various donated supplies and other items that it uses in its program services and fund-raising activities. The Club's estimate of the fair value of the donated items was $20,648 and $31,427 during the years ended June 30, 2018 and 2017, respectively.

### 16. SPECIAL EVENTS

The Club conducts various special events that promote and support the Club's programs. Total gross proceeds and expenses from events for the years ended June 30, 2018 and 2017, were as follows:

| | 2018 | 2017 |
|---|---|---|
| Special events fees and contributions | $1,002,465 | $1,095,153 |
| Special events in-kind donations | 10,784 | 6,285 |
| Special events expenses | ( 289,771) | ( 289,541) |
| Total special events (net of expenses) | $ 723,478 | $ 811,897 |

## NOTES TO FINANCIAL STATEMENTS--(Cont'd)

### 17. CAPITAL CAMPAIGN CONTRIBUTIONS

Capital campaign contributions represent amounts received from donors for the purpose of acquiring, constructing or expanding, and operating new or existing club locations.

For the year ended June 30, 2018, the Club received approximately 88% of capital campaign contributions from two donors.

For the year ended June 30, 2017, the Club received approximately 91% of capital campaign contributions from two donors.

### 18. CONCENTRATIONS

For the year ended June 30, 2018, the Club earned approximately 67% of grant revenue from four grantors and approximately 11% of total revenue from one special event. As of June 30, 2018, approximately 67% of the gross outstanding balance of pledges receivable was due from two donors.

For the year ended June 30, 2017, the Club received approximately 10% of Operating Support and Revenue contribution revenue from one donor. The Club earned approximately 47% of grant revenue from three grantors and approximately 14% of total event revenue from one special event. As of June 30, 2017, approximately 74% of the gross outstanding balance of pledges receivable was due from three donors.

### 19. RECLASSIFICATIONS

Certain amounts in the prior-year financial statements have been reclassified for comparative purposes to conform to the presentation in the current-year financial statements.

IRS Department of the Treasury
Internal Revenue Service
P.O. Box 2508, Room 4010
Cincinnati OH 45201

In reply refer to: 4077552646
May 29, 2009 LTR 4168C 0
54-1602004 000000 00 000
00039147
BODC: TE

BOYS & GIRLS CLUBS OF CENTRAL
VIRGINIA
PO BOX 707
CHARLOTTESVLE VA 22902-0707

035006

Employer Identification Number: 54-1602004
Person to Contact: Gregory Renier
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your request of Apr. 17, 2009, regarding your tax-exempt status.

Our records indicate that a determination letter was issued in October 1991, that recognized you as exempt from Federal income tax, and discloses that you are currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records also indicate you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Cindy Westcott

Cindy Westcott
Manager, EO Determinations

Madison County Boys Girls Club
Comparative Financials

| | | | | |
|---|---|---|---|---|
| ***Clients Served - (Average Daily)*** | **120** | **125** | **125** | **130** |
| ***Clients Served - (Total)*** | **325** | **330** | **330** | **335** |

*Date of fiscal year end- 06/30/2019 (FY19) & 06/30/2020 (FY20). We are currently in FY20.*

| | FY19 Actual 7/1/2018-6/30/2019 | FY20 Budget 7/1/2019-6/30/2020 | FY20 YTD Actual 7/1/2019-12/31/2019 | Proposed FY21 Budget 7/1/2020-6/30/2021 |
|---|---|---|---|---|
| Revenue | | | | |
| Donations | 138,018 | 114,000 | 108,213 | 122,000 |
| Program Fees | 25,312 | 22,000 | 8,200 | 23,000 |
| Grants | 67,155 | 70,500 | 28,338 | 79,000 |
| Interest/Investment Income | 3,134 | 2,900 | 1,876 | 3000 |
| Total Revenue | 233,619 | 209,400 | 146,627 | 227,000 |
| Net Income from Special Events | | | | |
| Special Events Income | 142,740 | 148,000 | 5,000 | 148,000 |
| Special Event Expense | (34,110) | (42,550) | (1,500) | (42,550) |
| Total Net Income from Special | 108,630 | 105,450 | 3,500 | 105,450 |
| Total Revenue | 342,249 | 314,850 | 150,127 | 332,450 |
| Expenses | | | | |
| Compensation | 193,407 | 218,477 | 106,215 | 240,000 |
| Benefits & Payroll Taxes | 25,381 | 33,336 | 12,329 | 34500 |
| Program Supplies | 13,770 | 9,500 | 4,050 | 10000 |
| Program Refreshments | 12,269 | 12,500 | 5,886 | 13000 |
| Program Field Trips | 6,459 | 3,025 | 2,673 | 3200 |
| Youth Clubs | 0 | 500 | 0 | 500 |
| Office Operations | 2,789 | 1,000 | 605 | 1100 |
| Occupancy | 5,271 | 3,950 | 2,538 | 4000 |
| Staff Costs | 1,735 | 1,500 | 1,282 | 1800 |
| Vehicle Costs | 2,687 | 3,000 | 1,800 | 3000 |
| Staff Training & Education | 69 | 2,000 | 1,100 | 2000 |
| Dues | 120 | 150 | 95 | 150 |
| Banking/Interest | 180 | 200 | 980 | 1500 |
| Marketing & Cultivation | 776 | 1,000 | 45 | 1000 |
| Unclassified Expenses | 0 | 0 | 328 | 0 |
| Shared Expenses | 22,809 | 30,085 | 12,262 | 32000 |
| Other Expenses | 0 | 0 | 250 | 0 |
| Total Expenses | 287,722 | 320,223 | 152,438 | 347,750 |
| Operating Revenue Fav. (Unfav.) | 54,527 | (5,373) | (2,311) | (15,300) |

| | | | | |
|---|---|---|---|---|
| Other Income (Expense) | | | | |
| Net In Kind Donations | 0 | 0 | 0 | |
| Investment transfer | 1,000 | 5,373 | 0 | 15300 |
| Depreciation Expense | 0 | 0 | 0 | |
| Total Other Income (Expense) | 1,000 | 5,373 | 0 | 15,300 |
| | | | | |
| Revenue Fav. (Unfav.) After Other Income (Expenses) | 55,527 | 0 | | 0 |

*FY19 favorable revenue is due to unfilled employee positions and relocating funds to the budget reserve to support future Club operations.*

Rappahannock Rapidan
Community Services
Programs that matter. People who care.

**Administrative Offices**

P. O. Box 1568
Culpeper, VA 22701
Telephone: (540) 825-3100
FAX: (540) 825-6245
TDD: (540) 825-7391

December 16, 2019

Madison County Board of Supervisors
Attention: Mary Jane Costella
PO Box 705
Madison, VA 22727
540-948-5938

Dear Madison County Board of Supervisors,

Madison Senior Center, a program of Rappahannock Rapidan Community Services, would like to extend our sincere gratitude for the annual allocation awarded to the center year after year.

Madison Senior Center provides a nutritious noon meal four times a week and fellowship for eligible older adults age 60 and better. In addition to lunch, participants enjoy the opportunity to socialize and meet new friends, experience educational opportunities, participate in wellness programs, and enjoy interesting and fun activities. Door-to-door free transportation can be provided by Rappahannock Rapidan Community Services in most cases to the center. At this time we have 77 older adults registered to attend the Madison Senior Center on any given day.

The allocation provided by the county helps subsidize programming at the center, in the community, and throughout Virginia. To say that some of the members of the center would not be able to participate with the many events the center provides without these funds would be an understatement.

Your continued support of this worthwhile active and engaging center would most definitely be appreciated. Please continue to provide annual support for Madison Senior Center.

Sincerely,

*Shirley Workman & Lola Walker*

Shirley Workman
Madison Senior Center Administrator
Rappahannock-Rapidan Community Services
sworkman@rrcsb.org, 540-948-4131

Lola I. Walker
Nutrition & Volunteer Services Manager
Rappahannock Rapidan Community Services
lwalker@rrcsb.org, 540-825-3100 x3358

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE:** **January 13, 2020**

| **IDENTIFICATION** | |
|---|---|
| *Organization/Agency Name*: | Madison County Fair, Incorporated |
| *Street Name:* | 1015 Fairgrounds Rd |
| *Mailing Address:* | PO Box 1071, Madison, VA 22727 |
| *Agency Contact:* | Scott Daniel |
| *Telephone Number:* | 540-717-0899 |
| *E-mail Address – Agency Contact* | madisoncountyfairva@gmail.com |
| *Agency's Web Address:* | www.madisoncountyfairva.com |
| *Federal Tax ID#:* | 54-1567542 |
| *Audit:* | ☐Yes ☑ No<br>Reviewed by Fair Finance Committee |

| **PURPOSE/NARRATIVE** |
|---|
| *Missions and Goals:* To provide an exposition for citizens of Madison County and the surrounding areas that educates patrons on agricultural and rural life, facilitates community interaction and yields an entertaining experience for all ages. Our goal is to preserve and enhance the rich heritage of our agricultural community by providing a venue to exhibit and reward the talents of our community's youth in the areas of animal husbandry, arts and crafts, and home economics. |
| *Experience and Accomplishments:* We have provided a quality fair to our community for 29 consecutive years, continually providing participation and recognition of our county's youth. The Madison County Fair provides a variety of entertainment, food, and music options, balancing each year between traditional favorites and new experiences. The Fair has been recognized by its peers, with multiple awards during the recent Virginia Association of Fairs |

| |
|---|
| convention, recognizing the website, and promotional materials produced by the Madison County Fair. |
| *Benefits of Funding:* To provide educational and entertaining experiences for residents of Madison County and the surrounding areas, and provide quality events and entertainment that are family friendly and acceptable for all ages. The fair attracts over 8,000 visitors annually during the 4 days of operation, drawing commerce to county businesses and providing a positive impression to visitors of our community. |
| *Intention of Use:* Funding will be used to supplement the premiums paid to youth exhibitors in the livestock and home, farm and garden areas. In the past year, the Fair had over 1200 total home, farm and garden entries and more than 60 different livestock exhibitors, with many of youth caring for multiple animal projects. |

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐Public Safety<br>☐Health<br>☑Arts/Culture<br>☑General Community/Civic<br>☐Human Services<br>☑Education<br>☐Environment<br>☑Recreation |
| *Funding Request:* | $ 1,000 |

| | |
|---|---|
| Signature: M. Scott Daniel | Title: Treasurer |
| Printed Name: M. Scott Daniel | Date: 01/12/2020 |
| | |

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE:** January 13, 2020

| IDENTIFICATION | |
|---|---|
| *Organization/Agency Name:* | Madison County Library, Inc. |
| *Street Name:* | 402 N Main St |
| *Mailing Address:* | PO Box 243, Madison VA 22727 |
| *Agency Contact:* | Bonnie Utz, Director<br>Bonita Burr – Treasurer, Board of Directors |
| *Telephone Number:* | 540-948-4720 |
| *E-mail Address – Agency Contact* | bonnie@madisoncountyvalibrary.org<br>bonitaburr@gmail.com |
| *Agency's Web Address:* | www.madisoncountyvalibrary.org |
| *Federal Tax ID#:* | EIN 54-0831592 |
| *Audit:* | ☒Yes ☐No |

| PURPOSE/NARRATIVE |
|---|
| *Missions and Goals:*<br>The Madison County Library, Inc. provides materials and services to help community residents obtain information to meet their personal and educational needs. The library serves as a learning and educational center for all residents of the community. Special emphasis is placed on stimulating children's interest and appreciation for reading and learning. |
| |
| |

| |
|---|
| *Experience and Accomplishments:*<br>Established in 1937, the Madison County Library has provided a touchstone for our county citizens. Whether it was the only way to read a new book during the Depression, or to get news during World War II, to the current downloading of reading materials or job searching with our databases and printed resources, we have supplied a need only a library can provide. |
| *Benefits of Funding:*<br>Funding assists in providing our citizens access to 24/7 high speed Wi-Fi, computers, current print and audiovisual materials for both entertainment and academic purposes as well as a treasure trove of classics we preserve from the past. It has provided a new software program to upgrade to a "real" public library system that interfaces with our online patrons. |
| *Intention of Use:*<br>Funding will enable us to maintain and grow our current collection to retain relevance. It will provide outreach programs for youth – from summer reading to a weekly story hour for preschoolers and community connections to our daycare facility and public schools. Funding will help us continue to update salaries to keep pace with the cost of living. |

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☒ *General Community/Civic*<br>☐ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 162,100.00 |

Signature: _____ Title: Director

Printed Name: Bonnie Utz, Date:

**MADISON COUNTY LIBRARY- Additional Financial Information**

| | FY19 6/30/19 2018-19 Budget | FY20 6/30/20 2019-2020 Budget | FY21 proposed 2020-21 |
|---|---|---|---|
| **Revenue** | | | |
| VA State Aid | $41,425.00 | $42,589.00 | $48,076.00 |
| Madison County | $131,972.00 | $143,600.00 | $162,100.00* |
| Library fundraising | $53,487.00 | $55,010.00 | $53,900.00 |
| **Total** | $226,884.00 | $241,199.00 | $264,076.00 |
| **Expenses** | $226,884.00 | $241,199.00 | $264,076.00 |

***Breakdown of 20-21 Budget Increase**

$11,000.00 for State obligation
$ 7,500.00 Requested increase
$18,500.00

| | FY18-19 Actual | FY19-20 1st 6 month Actual |
|---|---|---|
| VA State Aid | $41,245.00 | $21,958.00 |
| Madison County | $131,972.00 | $83,767.00 |
| Library Fundraising | $66,831.00 | $46,918.00 |
| Total | $240,048.00 | $152,643.00 |
| **Expenses** | **$240,048.00** | **$ 99,009.00** |

*J. Carlton Courter, III*
*Commissioner*

# COMMONWEALTH of VIRGINIA

**Department of Agriculture and Consumer Services**
**Division of Consumer Protection**
***Office of Consumer Affairs***
PO Box 1163, Richmond, Virginia 23218
Phone: 800/552-9963 or 804/786-1381 • Fax: 804/371-7479 • Hearing Impaired: 800/828-1120
www.vdacs.state.va.us

July 10, 2001

Ms. Ronda L. Lewis
Treasurer
Madison County Library, Inc.
P.O. Box 243
Madison, VA 22727

Dear Ms. Lewis:

This confirms receipt of your completed Form 100-F, "Virginia Exemption Application - Solicitations Confined to Five or Fewer Contiguous Cities and Counties," under Section 57-60(b) of the Virginia Solicitation of Contributions Law (Law), and your filing fee in the amount of ten dollars ($10).

We have reviewed your completed Form 100-F and accompanying materials and found your organization to be exempt from the registration requirements of Section 57-49 and the requirements of Section 57-53 of the Law. However, your organization is subject to the other provisions of the Law. You must confine your solicitations to Madison, Orange, Greene, Culpeper, and Rappahannock counties.

This exemption shall remain in effect until such time as your filing status changes. In the event Section 57-60(b) is no longer applicable, please contact us immediately so that we can assist you in expediting your compliance with the Law.

The issuance of this exemption from annual registration does not constitute an endorsement by the Commonwealth of Virginia, or by any of its departments, offices or employees, of the purpose or person conducting charitable solicitations.

If we can be of further assistance, please feel free to contact us at (804) 786-1343.

Sincerely

J. Michael Wright
Manager of Regulatory Programs
Office of Consumer Affairs

**MADISON COUNTY LIBRARY, INC.**

**COUNTY OF MADISON, VIRGINIA**

• ***Officers of the Corporation*** •

Margaret Clifton, President

Steve Wagner, Vice President

Bonita Burr, Secretary/Treasurer

Bonnie Utz, Librarian

• ***Board of Directors*** •

Diane Heckel

Cindy Pattie

Jill Quinley

Lori Rice

Heidi Sage

Susanna Spencer

Cindy Taylor

## Table of Contents


| | Page |
|---|---|
| Independent Auditors' Report | 1 |
| ***Financial Statements:*** | |
| Statement of Financial Position | 2 |
| Statement of Activities | 3 |
| Statement of Cash Flows | 4 |
| Notes to Financial Statements | 5-9 |

# ROBINSON, FARMER, COX ASSOCIATES

*CERTIFIED PUBLIC ACCOUNTANTS* *A PROFESSIONAL LIMITED LIABILITY COMPANY*

## INDEPENDENT AUDITORS' REPORT

**To the Board of Directors**
**Madison County Library, Inc.**
**Madison, Virginia**

We have audited the accompanying financial statements of Madison County Library, Inc. (a nonprofit organization) which comprise the statement of financial position as of June 30, 2018, and the related statements of activities and cash flows for the year then ended, and the related notes to the financial statements.

### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

### Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Madison County Library, Inc. as of June 30, 2018, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Robinson, Farmer, Cox Associates

Charlottesville, Virginia
December 21, 2018

# - Financial Statements -

MADISON COUNTY LIBRARY, INC.

**Statement of Financial Position**
**At June 30, 2018**

## ASSETS

| | | |
|---|---|---|
| Current Assets: | | |
| Cash and cash equivalents | $ | 104,892 |
| Certificate of deposit | | 50,951 |
| Investments | | 255,378 |
| Total current assets | $ | 411,221 |
| Property and Equipment: | | |
| Land | $ | 25,000 |
| Building and additions, net of depreciation | | 435,733 |
| Furniture and equipment, net of depreciation | | 20,363 |
| Total property and equipment, net of depreciation | $ | 481,096 |
| Total assets | $ | 892,317 |

## LIABILITIES AND NET ASSETS

| | | |
|---|---|---|
| Liabilities: | | |
| Current Liabilities: | | |
| Compensated absences | $ | 2,043 |
| Total liabilities | $ | 2,043 |
| Net Assets: | | |
| Unrestricted: | | |
| Undesignated | $ | 575,971 |
| Board designated | | 99,785 |
| Temporarily restricted | | 4,518 |
| Permanently restricted | | 210,000 |
| Total net assets | $ | 890,274 |
| Total liabilities and net assets | $ | 892,317 |

The accompanying notes to the financial statements are an integral part of this statement.

MADISON COUNTY LIBRARY, INC.

**Statement of Activities**
**Year Ended June 30, 2018**

| | Unrestricted | Temporarily Restricted | Permanently Restricted | Total |
|---|---|---|---|---|
| Support and Revenues: | | | | |
| Contributions | $ 24,774 | $ - | $ 100,000 | $ 124,774 |
| Fund drives | 34,835 | - | - | 34,835 |
| Madison County | 124,772 | - | - | 124,772 |
| Commonwealth of Virginia | 38,622 | - | - | 38,622 |
| E-Rate refund | 1,403 | - | - | 1,403 |
| Grant | 925 | - | - | 925 |
| Auction | 12,926 | - | - | 12,926 |
| Front desk sales | 2,281 | - | - | 2,281 |
| Interest and dividends | 2,215 | 6,052 | - | 8,267 |
| Unrealized gain (loss) | (303) | (3,287) | - | (3,590) |
| Miscellaneous | 6,918 | - | - | 6,918 |
| Total support and revenues | $ 249,367 | $ 2,766 | $ 100,000 | $ 352,133 |
| Expenses: | | | | |
| Program services: | | | | |
| Payroll | $ 110,283 | $ - | $ - | $ 110,283 |
| Payroll taxes | 8,437 | - | - | 8,437 |
| Insurance | 19,904 | - | - | 19,904 |
| Books | 20,192 | - | - | 20,192 |
| Audio/visual | 4,934 | - | - | 4,934 |
| Other content | 4,088 | - | - | 4,088 |
| Reading program | 4,649 | - | - | 4,649 |
| Utilities | 12,503 | - | - | 12,503 |
| Repairs, maintenance, and snow removal | 9,384 | - | - | 9,384 |
| Office supplies | 15,030 | - | - | 15,030 |
| Postage | 704 | - | - | 704 |
| Computer hardware | 3,118 | - | - | 3,118 |
| Computer supplies and maintenance | 472 | - | - | 472 |
| Computer software | 2,070 | - | - | 2,070 |
| Database | 1,796 | - | - | 1,796 |
| Miscellaneous | 2,005 | - | - | 2,005 |
| Depreciation expense | 23,535 | - | - | 23,535 |
| Total program services | $ 243,104 | $ - | $ - | $ 243,104 |
| Supporting services: | | | | |
| Management and general: | | | | |
| Audit | $ 2,600 | $ - | $ - | $ 2,600 |
| Fundraising: | | | | |
| Fundraising expenses | $ 3,899 | $ - | $ - | $ 3,899 |
| Total expenses | $ 249,603 | $ - | $ - | $ 249,603 |
| Change in net assets | $ (236) | $ 2,766 | $ 100,000 | $ 102,530 |
| Net assets, July 1, 2017 | 675,992 | 1,752 | 110,000 | 787,744 |
| Net assets, June 30, 2018 | $ 675,756 | $ 4,518 | $ 210,000 | $ 890,274 |

The accompanying notes to the financial statements are an integral part of this statement.

## MADISON COUNTY LIBRARY, INC.

### Statement of Cash Flows
### Year Ended June 30, 2018

| | | |
|---|---|---|
| Cash flows from operating activities: | | |
| Increase (decrease) in net assets | $ | 102,530 |
| Adjustments to reconcile increase (decrease) in net assets to net cash provided by (used for) operating activities: | | |
| Depreciation expense | | 23,535 |
| Interest on certificate of deposit | | (878) |
| Investment income | | (3,615) |
| Increase (decrease) in compensated absences | | 164 |
| Net cash provided by (used for) operating activities | $ | 121,736 |
| Cash flows from investing activities: | | |
| Purchase of investments | $ | (120,000) |
| Purchase of property and equipment | | (15,359) |
| Net cash provided by (used for) investing activities | $ | (135,359) |
| Net increase (decrease) in cash and cash equivalents | $ | (13,623) |
| Cash and cash equivalents at the beginning of the year | | 118,515 |
| Cash and cash equivalents at the end of the year | $ | 104,892 |

The accompanying notes to the financial statements are an integral part of this statement.

## NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

The significant accounting policies of Madison County Library, Inc. (the "Library") are described below to enhance the usefulness of the financial statements to the reader.

Basis of Accounting:

The Library's financial statements for the year ended June 30, 2018 have been prepared on the accrual basis of accounting.

Financial Statement Presentation:

The Library is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted, temporarily restricted, and permanently restricted.

Unrestricted net assets: Net assets that are not subject to donor-imposed stipulations. At June 30, 2018, the Library had $675,756 of unrestricted net assets.

Temporarily restricted net assets: Net assets subject to donor-imposed stipulations that may or will be met by actions of the Library and/or the passage of time. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. At June 30, 2018, the Library had $4,518 of temporarily restricted net assets.

Permanently restricted net assets: Net assets subject to donor-imposed or other legal restrictions requiring that all principal be maintained permanently by the Library. Generally, the donors of these assets permit the Library to use all or part of the income earned for either general or donor-specific purposes. At June 30, 2018, the Library had $210,000 of permanently restricted net assets.

Contributions:

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence or nature of any donor restrictions.

Use of Estimates:

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

## NOTE 2 - INCOME TAXES:

The Library is taxed for federal and state purposes as a Non-Private Foundation under Section 501(c)(3) of the Internal Revenue Code. All contributions and related income are exempt from taxation under this section. The Library is taxed on its unrelated business income less expenses directly associated with the production of such income. There were no income taxes payable for the fiscal year ended June 30, 2018.

## NOTE 3 - CASH AND CASH EQUIVALENTS:

For purposes of the statement of cash flows, the Library considers cash and cash equivalents to include cash on hand, cash in banks, and temporary cash investments purchased with an original maturity date of three months or less from the date of acquisition, not including temporary cash investments held within investment brokerage accounts.

## NOTE 4 - PROPERTY AND EQUIPMENT:

Property and equipment are stated at cost. Depreciation is taken for a full year in the year of acquisition. All equipment is being depreciated over a five-year life, and the building and additions are depreciated over a five to forty-year life. Depreciation expense for the year ended June 30, 2018 was $23,535. The following is a summary of property and equipment at June 30, 2018:

| | Amount |
|---|---|
| Land | $ 25,000 |
| Building and additions | 772,218 |
| Furniture and equipment | 128,658 |
| Total | $ 925,876 |
| Less accumulated depreciation | (444,780) |
| Net property and equipment | $ 481,096 |

## NOTE 5 - RESTRICTED/DESIGNATED NET ASSETS:

Board designated net assets are available for the following purposes:

| | |
|---|---|
| Endowment | $ 40,860 |
| Building funds | 58,925 |
| Total | $ 99,785 |

Temporarily restricted net assets are available for the following purposes:

| | |
|---|---|
| Endowment earnings not appropriated for expenditure | $ 4,518 |

Permanently restricted net assets are available for the following purposes:

| | |
|---|---|
| Endowment | $ 210,000 |

## NOTE 6 - FUNCTIONAL ALLOCATION OF EXPENSES:

The costs of providing the various programs and supporting services have been summarized on a functional basis in the statement of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

## NOTE 7 - CONCENTRATION OF CREDIT RISK:

The Library maintains its cash in bank deposit accounts at a high credit quality financial institution, which is insured by the Federal Deposit Insurance Corporation up to $250,000. As of June 30, 2018, no balances were in excess of federally insured limits.

## NOTE 8 - ENDOWMENT:

The Library's endowment includes both donor-restricted funds and funds designated by the Board of Directors to function as an endowment and the earnings from these funds. As required by generally accepted accounting principles, net assets associated with endowment funds, including funds designated by the Board of Directors to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions.

The Board of Directors of the Library has interpreted the State Prudent Management of Institutional Funds Act (SPMIFA) as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, the Library classifies as permanently restricted net assets (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment, and (c) accumulation to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted net assets is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by the Library in a manner consistent with the standard of prudence prescribed by SPMIFA. In accordance with SPMIFA, the Library considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

(1) The duration and preservation of the fund
(2) The purposes of the organization and the donor-restricted endowment fund
(3) General economic conditions
(4) The possible effect of inflation and deflation
(5) The expected total return from income and the appreciation of investments
(6) Other resources of the organization
(7) The investment policies of the organization.

Return Objectives and Risk Parameters

The Library has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets. Endowment assets include those assets that are board-designated funds. Under this policy, as approved by the Board of Directors, the endowment assets are invested in a manner that is intended to accommodate investment styles and strategies that are considered reasonable and prudent, while providing long-term growth.

## NOTE 8 - ENDOWMENT: (CONTINUED)

Strategies Employed for Achieving Objectives

To satisfy its long-term rate-of-return objectives, the Library relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Library targets a diversified asset allocation that places a greater emphasis on equity-based investments to achieve its long-term return objectives within prudent risk constraints.

Spending Policy and How the Investment Objectives Relate to the Spending Policy

The Library has a spending policy based on the total return concept that governs the rate at which funds are transferred from the Endowment Fund to the operating budget.

Composition of and change in endowment net assets for the year ended June 30, 2018 were as follows:

| | Unrestricted | Temporarily Restricted | Permanently Restricted | Total |
|---|---|---|---|---|
| Endowment net assets, beginning of year | $ 20,012 | $ 1,752 | $ 110,000 | $ 131,764 |
| Investment return: | | | | |
| Unrealized gain (loss) | $ (303) | $ (3,287) | $ - | $ (3,590) |
| Investment income | 1,152 | 6,052 | - | 7,204 |
| Total investment return | $ 848 | $ 2,766 | $ - | $ 3,614 |
| Contributions | $ - | $ - | $ 100,000 | $ 100,000 |
| Board designation of endowment assets | $ 20,000 | $ - | $ - | $ 20,000 |
| Endowment net assets, end of year | $ 40,860 | $ 4,518 | $ 210,000 | $ 255,378 |

## NOTE 9 – FAIR VALUE MEASUREMENTS:

Fair value for investments are determined as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants at the measurement date. The three-level fair value hierarchy prioritizes the inputs used to measure fair value. This hierarchy requires entities to maximize the use of observable inputs and minimize the use of unobservable inputs. The three levels of inputs used to measure fair value are as follows:

- Level 1 — Quoted prices in active markets for identical assets or liabilities.
- Level 2 — Observable inputs other than quoted prices included in Level 1, such as quoted prices for similar assets and liabilities in active markets; quoted prices for identical or similar assets and liabilities in markets that are not active; or other inputs that are observable or can be corroborated by observable market data.
- Level 3 — Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities. This includes certain pricing models, discounted cash flow methodologies and similar techniques that use significant unobservable inputs.

## NOTE 9 – FAIR VALUE MEASUREMENTS: (CONTINUED)

The Library is providing the following information related to its investments:

| | | Fair Value Measurements at Reporting Date Using | | |
|---|---|---|---|---|
| | 6/30/2018 | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) | Significant Unobservable Inputs (Level 3) |
| Money market funds | $ 24,986 | $ 24,986 | $ - | $ - |
| Fixed income securities | 143,813 | 143,813 | - | - |
| Equity securities | 85,662 | 85,662 | - | - |
| Other investments | 917 | 917 | - | - |
| Total | $ 255,378 | $ 255,378 | $ - | $ - |

The Library invests in one money market fund and one mutual fund; the composition of those funds is shown above.

## NOTE 10 - SUBSEQUENT EVENTS:

In preparing these financial statements, management of the Library has evaluated events and transactions for potential recognition or disclosure through December 21, 2018, the date the financial statements were available to be issued.

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE: January 13, 2020**

| **IDENTIFICATION** | |
|---|---|
| *Organization/Agency Name*: | Central Virginia Partnership for Economic Development |
| *Street Name:* | 1001 Research Park Blvd, Suite 301, Charlottesville VA 22911 |
| *Mailing Address:* | 1001 Research Park Blvd, Suite 301, Charlottesville VA 22911 |
| *Agency Contact:* | Helen Cauthen, President |
| *Telephone Number:* | 434-979-5610 ext 100 |
| *E-mail Address – Agency Contact* | hcauthen@centralvirginia.org |
| *Agency's Web Address:* | www.centralvirginia.org |
| *Federal Tax ID#:* | 54-1788499 |
| *Audit:* | **X** Yes ☐ No |

| **PURPOSE/NARRATIVE** |
|---|
| *Missions and Goals:*<br>The Central Virginia Partnership for Economic Development (Partnership) is a non-profit, public/private partnership that serves nine jurisdictions in the Central Virginia region. The Partnership's mission is advancing innovative strategies for regional economic prosperity. To achieve this mission, the Partnership collaborates with a number of strategic partners, including the region's localities (the Counties of Madison, Albemarle, Culpeper, Fluvanna, Greene, Louisa, Nelson and Orange and the City of Charlottesville), private sector businesses, the University of Virginia, Piedmont Virginia Community College, and Germanna Community College. Because of these partnerships, the Partnership is uniquely positioned to promote new investment and career ladder job growth in a purposeful and sustainable way. |

*Experience and Accomplishments:*

Founded in 1995, the Partnership markets the area's assets and opportunities to existing companies and prospective businesses. Projects range from small start-ups and existing business expansions to attraction of new companies in target markets. Since 2008, existing company expansions and business attraction resulted in 4,700 new jobs and $762 million in new capital investment. Under the Partnership's umbrella, government, business, and education combined resources to fund the Target Markets Report, which featured chapters for each locality, including Madison County. This effort is an excellent example of how the Partnership fosters collaboration at the regional level while also supporting each jurisdiction's independent interests. The GO Virginia Growth & Diversification Plan for Region 9, which was updated this fall, reiterated that our current targets are still relevant and accurate.

*Benefits of Funding:*

The Partnership's mission focuses on two strategic goals: retaining and growing existing businesses, and selectively attracting new companies to the region. With this mission in mind, the Partnership also respects and supports the individual character and economic development initiatives of each locality. The organization partners with participating localities to support existing companies, helping them remain and grow locally, and markets the region to selectively recruit new companies in targeted sectors. These efforts help retain jobs and support the creation of new job opportunities for residents throughout the region, including higher skill, higher wage jobs. According to the GO Virginia Growth Plan research, over 77.2% of Madison County's labor force commutes outside of Madison for work. As a labor exporter, Madison County's citizens benefit from the economic vitality of the surrounding localities and the economic development efforts of the Partnership. By supporting the Partnership, Madison County can help ensure the availability of high quality, career ladder jobs in the region for its citizens.

*Intention of Use:*

The Central Virginia Partnership Board completed its strategic planning as we ended our fiscal year 2019 on June 30. At the Annual Meeting, the new mission statement – ***Advancing innovative strategies for regional economic prosperity –*** was approved along with long-term objectives, strategies and the FY 2020 program of work. There are three major legs of the new plan.

1. **Regional Collaboration:** enhance the competitiveness of the region by fostering greater collaboration between government, business and education. The program of work focuses on serving as the lead support organization for GO Virginia's Region 9 Council, assisting with site development in Madison County, facilitating and enhancing regionally-based innovation and entrepreneurship, and educating the region about the importance of economic development.
2. **Marketing and Business Attraction**: elevate the national profile of the region by strategically marketing the area's advances as a business location. The plans for the year include project management, telling the region's story, outreach to site selectors, and serving as a liaison for Virginia Economic Development Partnership,
3. **Partner Support:** assist partners with business retention, expansion and attraction. The Partnership will do this by providing support to the locality's economic development office, providing customized research and information, actively engaging University of Virginia,

Piedmont Virginia Community College and Germanna Community College, and by supporting site readiness. We also will assist with workforce development initiatives of the Piedmont Workforce Development Board and better understand business challenges.

Every year, the Partnership's Board of Directors approves the specific action items for the program of work. Each of our localities has a voting seat on this Board, and County Administrator Jack Hobbs is Madison County's representative on the Board. Madison County's funds will be used to support implementation of a similar Program of Work for FY 2021.

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>X *General Community/Civic*<br>☐ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 10,000 |

Signature: Helen Cauthen Title: President

Printed Name: Helen Cauthen Date: 12/20/2019

Central Virginia PARTNERSHIP for ECONOMIC DEVELOPMENT

## FY 2019, FY 2020 and FY 2021 Budgets

**The Partnership's Fiscal Year runs from July 1 to June 30.**

| | FY 2019 Actual | Current Year FY 2020 Budget | FY 2020 as of 10/31/19 | Proposed FY 2021 Budget |
|---|---|---|---|---|
| **REVENUE** | | | | |
| Madison County | 10,000 | 10,000 | 10,000 | 10,000 |
| Albemarle County | 52,857 | 53,848 | 26,924 | 54,319 |
| Culpeper County | 24,694 | 25,136 | 25,136 | 25,642 |
| City of Charlottesville | 24,535 | 24,566 | 12,283 | 24,640 |
| Louisa County | 17,121 | 17,517 | 8,758 | 18,010 |
| Orange County | 16,888 | 17,260 | 17,260 | 17,791 |
| Fluvanna County | 13,066 | 13,233 | 13,233 | 13,346 |
| Greene County | 10,000 | 10,000 | 5,000 | 10,000 |
| Nelson County | 10,000 | 10,000 | 5,000 | 10,000 |
| Local/State Government– GO Virginia Site Readiness | 76,235 | N/A | N/A | |
| State Funding | 60,000 | 60,000 | 50,000 | 40,000 |
| Private Sector Support | 157,037 | 175,000 | 51,350 | 177,000 |
| **TOTAL REVENUE** | $472,433 | $416,560 | $224,944 | $400,748 |
| **EXPENSES** | | | | |
| Personnel (Salaries/Benefits) | 230,531 | 247,000 | 88,966 | 260,000 |
| Occupancy | 23,710 | 18,000 | 5,442 | 18,000 |
| Operational Expenses | 223,823 | 140,374 | 34,299 | 122,300 |
| GO Virginia Site Project | | | | |
| **TOTAL EXPENSES** | $478,064 | $405,374 | $128,707 | $400,300 |
| Surplus/(Deficit) | ($5,631) | $11,186 | $96,227 | $448 |

# Central Virginia Partnership for Economic Development
## Statement of Revenues and Expenses
## Through October 31, 2019 (Draft)

| | July 19 - Oct 19 ((c)(6)) | July 19 - Oct 19 ((c)(3)) | July 19 - Oct 19 Total | FY2020 Budget | % of Budget |
|---|---|---|---|---|---|
| **Revenues** | | | | | |
| Local Government Sponsorship [1] | 123,584.50 | - | 123,584.50 | 181,560.00 | 68.07% |
| State Sponsorship (UVA, PVCC, GCC) | 50,000.00 | - | 50,000.00 | 60,000.00 | 83.33% |
| Private Sector Sponsorship [2] | 36,600.00 | 13,250.00 | 49,850.00 | 150,000.00 | 33.23% |
| New Private Sector Sponsorship [2] | 1,000.00 | 500.00 | 1,500.00 | 25,000.00 | 6.00% |
| **Total Revenues** | **211,184.50** | **13,750.00** | **224,934.50** | **416,560.00** | **54.00%** |
| **Expenses** | | | | | |
| Salaries & Wages | 46,060.95 | 8,558.37 | 54,619.32 | 182,000.00 | 30.01% |
| Fringe Benefits (Insurance, taxes, retirement contributions, PTO) [3] | 28,615.66 | 5,731.63 | 34,347.29 | 65,000.00 | 52.84% |
| **Total Employee Expenses** | **74,676.61** | **14,290.00** | **88,966.61** | **247,000.00** | **36.02%** |
| **Total Miscellaneous expenses (Taxes, registration, misc.)** | **-** | **-** | **-** | **300.00** | **0.00%** |
| Communication Services (Phone, postage, printing) | 1,374.38 | 28.43 | 1,402.81 | 5,200.00 | 26.98% |
| Employee Development Services (Conferences, memberships, materials) | 4,428.51 | - | 4,428.51 | 9,000.00 | 49.21% |
| Management & Info. Services (Auditing, legal services) | 1,539.89 | - | 1,539.89 | 7,800.00 | 19.74% |
| Repair & Maintenance Services (Equipment, office) | | - | - | 500.00 | 0.00% |
| Support Services (Internal meeting costs) | 459.84 | - | 459.84 | 6,500.00 | 7.07% |
| Technical Support Services (IT related) | 460.84 | 34.52 | 495.36 | 3,000.00 | 16.51% |
| Transportation Services (Employee mileage) | 404.87 | - | 404.87 | 2,500.00 | 16.19% |
| **Total Services** | **8,668.33** | **62.95** | **8,731.28** | **34,500.00** | **25.31%** |
| Lease (Partnership office and utilities) | 4,971.70 | 471.02 | 5,442.72 | 18,000.00 | 30.24% |
| Services Charges (Bank, other) | 900.76 | - | 900.76 | 1,500.00 | 60.05% |
| Insurance (D&O, liability) | - | - | - | 2,000.00 | 0.00% |
| **Total Continuous Charges** | **5,872.46** | **471.02** | **6,343.48** | **21,500.00** | **29.50%** |
| Marketing | 15,170.24 | - | 15,170.24 | 42,000.00 | 36.12% |
| Research Databases | 1,405.49 | 3,900.00 | 5,305.49 | 12,000.00 | 44.21% |
| Local Meetings | 1,195.89 | - | 1,195.89 | 4,000.00 | 29.90% |
| 310 Marketing | - | - | - | | 0.00% |
| Special Projects/Other | - | | - | | 0.00% |
| Regional Business Park | - | | - | 13,350.00 | 0.00% |
| Other Special Projects | - | | | 15,650.00 | |
| **Total Work Program** | **17,771.62** | **3,900.00** | **21,671.62** | **87,000.00** | **24.91%** |
| Supplies and materials (including furniture) | 1,673.08 | - | 1,673.08 | 4,500.00 | 37.18% |
| Equipment and Software | 465.99 | - | 465.99 | 6,000.00 | 7.77% |
| Copier Lease | 799.18 | 56.41 | 855.59 | 4,000.00 | 21.39% |
| **Total Equipment & Software (including copier lease)** | **2,938.25** | **56.41** | **2,994.66** | **14,500.00** | **20.65%** |
| **Total Depreciation and Amortization Expense** | **-** | **-** | **-** | **574.00** | **0.00%** |
| **Total Ordinary Expenses** | **109,927.27** | **18,780.38** | **128,707.65** | **405,374.00** | **31.75%** |
| **Net Ordinary Revenues (Expenses)** | **101,257.23** | **(5,030.38)** | **96,226.85** | **11,186.00** | |
| **Total Net Revenues (Expenses) - Funded by useage of Fund balance** | **101,257.23** | **(5,030.38)** | **96,226.85** | **11,186.00** | |

*33.33% of the year reported

[1] Madison, Orange, Culpeper and Fluvanna pay annual sponsorships. All other localities pay on a quarterly basis.

[2] Private sector sponsorships are reported upon collection of funds.

[3] Fringe benefits are high due to timing as bonuses for the year have already been paid.

# Central Virginia Partnership for Economic Development (c)(6)
# Statement of Financial Position
# Through October 31, 2019 (Draft)

## ASSETS

| | |
|---|---|
| **Current Assets** | |
| **Cash and cash equivalents** | |
| Operating - unrestricted | 113,813.98 |
| Operating - restricted | 0.00 |
| **Total Checking/Savings** | **113,813.98** |
| **Accounts Receivable** | |
| Accounts receivable (501(c)(6)) - less allowances [3] | 2,500.00 |
| **Total Accounts Receivable - External** | **2,500.00** |
| Accounts receivable - PWN | 60,331.67 |
| Accounts Receivable - SBDC | 55,976.59 |
| Accounts Receivable - Foundation | 5,380.40 |
| Accounts Receivable - GO Virginia | 140,518.09 |
| **Total Accounts Receivable - Internal [1]** | **262,206.75** |
| **Total Accounts Receivable** | **264,706.75** |
| **Other Current Assets** | |
| Undeposited funds | 0.00 |
| Prepaid Expenses | 9,350.33 |
| Due from Employees [2] | 0.00 |
| **Total Other Current Assets** | **9,350.33** |
| **Total Current Assets** | **387,871.06** |
| **Fixed Assets** | **6,251.80** |
| **TOTAL ASSETS** | **394,122.86** |

## LIABILITIES & EQUITY

| | |
|---|---|
| **Current Liabilities** | |
| **Accounts Payable** | |
| Accounts Payable - External | 20,639.28 |
| **Total Accounts Payable - External** | **20,639.28** |
| Accounts Payable - PWN[4] | 14,772.50 |
| Accounts Payable - SBDC[4] | 15,600.00 |
| **Total Accts Payable - Internal** | **30,372.50** |
| **Total Accounts Payable** | **51,011.78** |
| **Credit Cards** | |
| 00000 · Business Card | 1,392.44 |
| 00001 · Staples Credit Card | 0.00 |
| **Total Credit Cards** | **1,392.44** |
| **Other Current Liabilities** | |
| Retirement Plan - Employee Cont | 0.00 |
| Payroll Liabilities | -163.86 |
| Deferred Revenue | 0.00 |
| Accrued Vacation | 5,533.42 |
| Accrued Expenses - Other | 3,359.09 |
| **Total Other Current Liabilities** | **8,728.65** |
| **Total Current Liabilities** | **61,132.87** |
| **Total Liabilities** | **61,132.87** |
| **Equity** | |
| Temp. Restricted Net Assets | 231,732.76 |
| Unrestricted Net Assets | 0.00 |
| Net Revenues (Expenses) | 101,257.23 |
| **Total Equity** | **332,989.99** |
| **TOTAL LIABILITIES & EQUITY** | **394,122.86** |

[1] This receivable is the interprogram float for expenditures made by the Partnership on behalf of its major programs. Expenditures are reimbursed by program funding.

[2] Employee funds due represent employee paid portions of benefits or other expenses, They may be collected as a deduction from the employee's paycheck or a check may be due.

[3] External accounts receivable includes local government and public sector receivables. Private sector sponsorships are reported as income upon collection.

[4] Several public sponsors send payments for PWN and SBDC in the same check as their Partnership sponsorship. This payable reflects the transfer of those funds to the correct programs.

# Central Virginia Partnership for Economic Development Foundation (c)(3)
# Statement of Financial Position
# Through October 31, 2019 (Draft)

## ASSETS

| | |
|---|---|
| **Current Assets** | |
| **Cash and cash equivalents** | |
| Wells Fargo - Foundation | 57,571.08 |
| Undeposited Funds | 0.00 |
| **Total Checking/Savings** | **57,571.08** |
| **Accounts Receivable** | |
| Accounts receivable (501(c)(3)) - less allowances | 750.00 |
| **Total Accounts Receivable - External** | **750.00** |
| **Total Accounts Receivable** | **750.00** |
| **Other Current Assets** | |
| Prepaid Expenses | 0.00 |
| Undeposited Funds | 0.00 |
| **Total Other Current Assets** | **0.00** |
| **Total Current Assets** | **58,321.08** |
| **TOTAL ASSETS** | **58,321.08** |

## LIABILITIES & EQUITY

| | |
|---|---|
| Accounts Payable | 0.00 |
| Due to SBDC | 0.00 |
| Due to Partnership (c)(6) | 5,380.40 |
| **Other Current Liabilities** | |
| Accrued Vacation | 0.00 |
| Accrued Expenses | 0.00 |
| Unearned Revenue | 0.00 |
| **Total Other Current Liabilities** | **0.00** |
| **Total Liabilities** | **5,380.40** |
| **Equity** | |
| Temp. Restricted Net Assets | 0.00 |
| Unrestricted Net Assets | 57,971.06 |
| Net Revenues (Expenses) | -5,030.38 |
| **Total Equity** | **52,940.68** |
| **TOTAL LIABILITIES & EQUITY** | **58,321.08** |

INTERNAL REVENUE SERVICE
DISTRICT DIRECTOR
31 HOPKINS PLAZA
BALTIMORE, MD 21201

DEPARTMENT OF THE TREASURY

**IRS EXEMPTION LETTER**

Date: APR 08 1996

THOMAS JEFFERSON REGIONAL ECONOMIC
DEVELOPMENT PARTNERSHIP INC
P.O. BOX 1525
CHARLOTTESVILLE, VA 22902

Employer Identification Number:
54-1788499
Case Number:
526096027
Contact Person:
EP/EO CUSTOMER SERVICE UNIT
Contact Telephone Number:
(410) 962-6058
Internal Revenue Code
Section 501(c)(6)
Accounting Period Ending:
June 30
Form 990 Required:
Yes
Addendum Applies:
Yes

APR 12 1996

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(a) of the Internal Revenue Code as an organization described in the section indicated above.

Unless specifically excepted, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) for each employee to whom you pay $100 or more during a calendar year. And, unless excepted, you are also liable for tax under the Federal Unemployment Tax Act for each employee to whom you pay $50 or more during a calendar quarter if, during the current or preceding calendar year, you had one or more employees at any time in each of 20 calendar weeks or you paid wages of $1,500 or more in any calendar quarter. If you have any questions about excise, employment, or other Federal taxes, please address them to this office.

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

In the heading of this letter we have indicated whether you must file Form 990, Return of Organization Exempt From Income Tax. If Yes is indicated, you are required to file Form 990 only if your gross receipts each year are normally more than $25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally $25,000 or less, and sign the return.

If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of $10 a day is charged when a return is filed late, unless there is reasonable cause for the delay. However, the maximum penalty charged cannot exceed $5,000 or 5 per-

cent of your gross receipts for the year, whichever is less. This penalty may also be charged if a return is not complete, so please be sure your return is complete before you file it.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

If we have indicated in the heading of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

Because this letter could help resolve any questions about your exempt status, you should keep it in your permanent records.

We have sent a copy of this letter to your representative as indicated in your power of attorney.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,

Paul M. Harrington

District Director

Enclosure:
Addendum

THOMAS JEFFERSON REGIONAL ECONOMIC

You are required to make available for public inspection a copy of your exemption application, and supporting documents, and this exemption letter. If you are required to file an annual information return, you are also required to make a copy of the return available for public inspection for three years after the return is due. Failure to make these documents available for public inspection may subject you to a penalty of $10 per day for each day there is a failure to comply (up to a maximum of $5,000 in the case of an annual return). See Internal Revenue Service Notice 88-120, 1988-2 C.B. 454, for additional information.

Contributions to your organization are not deductible by donors under section 170(c)(2) of the Code.

Under section 6113, any fund-raising solicitation (including a solicitation for membership dues payment) you make must include an express statement (in a conspicuous and easily recognizable format) that contributions and gifts are not deductible as charitable contributions for federal income tax purposes. This express statement does not apply, however, if your annual gross receipts are normally $100,000 or less, or if your solicitations are made to no more than ten persons during a calendar year. The law provides penalties for failure to comply with this requirement, unless the failure is due to reasonable cause. See Internal Revenue Service Notice 88-120, 1988-2 C.B. 454, for additional information.

**COMMONWEALTH OF VIRGINIA**
**STATE CORPORATION COMMISSION**

AT RICHMOND, MARCH 14, 2013

The State Corporation Commission has found the accompanying articles submitted on behalf of

Central Virginia Partnership for Economic Development (formerly Jefferson Partnership for Economic Development, Inc., Thomas)

to comply with the requirements of law, and confirms payment of all required fees. Therefore, it is ORDERED that this

CERTIFICATE OF AMENDMENT

be issued and admitted to record with the articles of amendment in the Office of the Clerk of the Commission, effective March 14, 2013.

The corporation is granted the authority conferred on it by law in accordance with the articles, subject to the conditions and restrictions imposed by law.

STATE CORPORATION COMMISSION

By

James C. Dimitri
Commissioner

13-03-13-1202
AMENACPT
CIS0368

SCC888N
(07/07)

COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

# ARTICLES OF AMENDMENT

## CHANGING THE NAME OF A VIRGINIA NONSTOCK CORPORATION

**By Unanimous Consent of the Members or by the Directors Without Member Action**

The undersigned, on behalf of the corporation set forth below, pursuant to § 13.1-888 of the Code of Virginia, executes these articles and states as follows:

1. The current name of the corporation is Thomas Jefferson Partnership for Economic Development, Inc.

2. The name of the corporation is changed to Central Virginia Partnership for Economic Development

3. The foregoing amendment was adopted on December 14, 2012 (date) **(mark appropriate box):**

☐ By the unanimous consent of the members with voting rights.

**OR**

☒ By a vote of at least two-thirds of the directors in office. Member action on the amendment was not required because **(mark appropriate box):**

☒ There are no members;
**or**
☐ There are no members with voting rights.

Executed in the name of the corporation by:

Ronald J. Cottrell
(signature)

3/7/13
(date)

Ronald J. Cottrell
(printed name)

Chairman of the Board
(corporate title)

0456273
(corporation's SCC ID no.)

(telephone number (optional))

***(The execution must be by the chairman or any vice-chairman of the board of directors, the president, or any other of its officers authorized to act on behalf of the corporation.)***

**PRIVACY ADVISORY:** Information such as social security number, date of birth, maiden name, or financial institution account numbers is NOT required to be included in business entity documents filed with the Office of the Clerk of the Commission. Any information provided on these documents is subject to public viewing.

**SEE INSTRUCTIONS ON THE REVERSE**

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

DEADLINE: January 13, 2020

| IDENTIFICATION | |
|---|---|
| Organization/Agency Name: | Foothills Housing Corporation |
| Street Name: | 47 Garrett St, Suite 205<br>Warrenton, VA 20186 |
| Mailing Address: | Same as Above |
| Agency Contact: | John Reid |
| Telephone Number: | 540 341 2805 |
| E-mail Address – Agency Contact | jreid@fhcorp.org |
| Agency's Web Address: | www.foothillshousingcorp.com |
| Federal Tax ID#: | 54-1128998 |
| Audit: | X Yes No |

| PURPOSE/NARRATIVE |
|---|
| Missions and Goals:<br><br>Provide safe, decent & affordable housing opportunities |
| Experience and Accomplishments:<br><br>Since the founding of the organization in 1970 Foothills Housing Corporation (FHC) has been known by different names but has always remained focused on it's mission "providing safe, decent, affordable housing opportunities."<br><br>FHC seeks to give people healthy affordable housing opportunity offering affordable rental properties with below market rents. It is a place to live, to get out of the elements, and into healthy environments. We repair and build houses for low to moderate income families, and can deliver a home in 60-90 days.<br><br>Foothills Housing Corporation values shelter and believes it is not a privilege, a home is an extension of the individuals it shelters, a healthy home supports healthy people, a house can and should co-exist with the larger community. |

For the last 49 years FHC has been serving low to moderate income individuals with their Home repairs through use of DHCD Grant Funds and zero percent interest loans, many of which are located in Madison County.

Since FHC has been involved in the IPR program they have completed 204 projects worth over $9 million in construction costs.

Benefits of Funding:

FHC will continue to provide support through its no interest loan program to help low to moderate income home owners in the county with repairs to their properties to make them safe and livable. These loans are paid back only at the ability of the home owner and incur no interest or cost for the assistance. There will be approx. $30,000 available per year for this assistance and on average we complete 20 projects per year.

FHC will continue to administer the Emergency home repair program (EHARP) $16,500 is awarded as a grant through VADHCD to FHC for emergency projects. This Program has no administration funding component, so to provide the funding to individuals that need it we must use our internal resources to pay for administration.

Intention of Use:

FHC will continue to provide support to low to moderate income home owners who are in need of assistance with emergency repairs to their dwellings to make them safe, decent and livable. This will add to the wellbeing and health of the occupants of the households in the community.

FUNDING

| | |
|---|---|
| Category of Funding | X Public Safety<br>X Health<br>☐ Arts/Culture<br>☐ General<br>Community/Civic X Human Services<br>☐ Education<br>☐ Environment<br>☐ Recreation<br>☐ |
| Funding Request: | $ 7,500.00 |

Signature: _____ Title: Executive Director

| Printed Name: John Reid | Date: 01/13/2020 |
|---|---|

**CONSOLIDATED BUDGET - INCOME & EXPENSES**
**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**FOR THE YEAR ENDED DECEMBER 31, 2020**

| | Foothills Housing Corporation | Foothills Housing Property Management L.L.C. | Countryside Associates L.L.C. | Stuart Street L.L.C. | Oaks Springs L.L.C. | Oaks II Associates L.P. | Fletcherville L.L.C. | Total Real Estate Investments | Inter-entity Eliminations | 2020 Total |
|---|---|---|---|---|---|---|---|---|---|---|
| Unrestricted Net Assets | | | | | | | | | | |
| Revenue, Gains, and Other Support | | | | | | | | | | |
| Management Fee Income | - | 78,220 | - | - | - | - | - | - | - | 78,220 |
| Rental Income | - | - | 84,540 | 77,000 | 1,001,841 | 186,645 | 379,968 | 1,729,993 | - | 1,729,993 |
| Contributions | 64,800 | - | - | - | - | - | - | - | - | 64,800 |
| Other Income | - | - | 112 | - | 10,117 | - | - | 10,229 | - | 10,229 |
| Reimbursement (Payroll) | 104,016 | 152,274 | - | - | - | - | - | - | (256,290) | - |
| Interest Income | 336,380 | - | 60 | 232 | 4,449 | 466 | - | 5,207 | (336,368) | 5,219 |
| Grant Income - EHARP & BAMA | 16,500 | - | - | - | - | - | - | - | - | 16,500 |
| Program Income Loans | 24,000 | - | - | - | - | - | - | - | - | 24,000 |
| Program Fees | 4,800 | - | - | - | - | - | - | - | - | 4,800 |
| Total Revenues, Gains, and Other Support | 550,496 | 230,494 | 84,712 | 77,232 | 1,016,407 | 187,111 | 379,968 | 1,745,430 | (592,658) | 1,933,762 |
| Expenses and Losses | | | | | | | | | | |
| Salaries | 223,480 | 107,962 | - | - | - | - | - | - | - | 331,442 |
| Payroll Taxes | 18,487 | 9,057 | - | - | - | - | - | - | - | 27,544 |
| Payroll Reimbursement (FHPM) | - | 104,016 | 7,995 | 5,996 | 95,941 | 14,991 | 27,350 | 152,274 | (256,290) | - |
| Benefits, Insurances (ST,LT,Life & Health) and Retirement contr. | 17,946 | 7,905 | - | - | - | - | - | - | - | 25,851 |
| Total Payroll Expenses | 259,914 | 228,940 | 7,995 | 5,996 | 95,941 | 14,991 | 27,350 | 152,274 | (256,290) | 384,838 |
| Program Income projects | 24,000 | - | - | - | - | - | - | - | - | 24,000 |
| EHARP & BAMA projects | 16,500 | - | - | - | - | - | - | - | - | 16,500 |
| Ramp Projects | 10,000 | - | - | - | - | - | - | - | - | 10,000 |
| Interest Expense | - | - | 22,207 | 26,069 | 478,713 | 75,274 | 147,836 | 750,100 | (336,368) | 413,732 |
| Insurance | 9,646 | - | 4,519 | 3,340 | 14,940 | 6,396 | 22,500 | 51,695 | - | 61,341 |
| Supplies | 4,959 | - | - | - | 3,748 | - | 1,000 | 4,748 | - | 9,707 |
| Program Expenses | 9,600 | | | | | | - | - | - | 9,600 |
| Repairs & Maintenance | - | - | 10,650 | 3,325 | 132,603 | 30,236 | 55,500 | 232,314 | - | 232,314 |
| Management Fees | - | - | 3,970 | 3,564 | 45,083 | 8,505 | 17,099 | 78,220 | - | 78,220 |
| Accounting Fees | 7,800 | - | - | - | 900 | 3,700 | 3,000 | 7,600 | - | 15,400 |
| Legal Fees | 4,000 | - | - | - | - | - | 2,000 | 2,000 | - | 6,000 |
| Finance, leasing expense | - | - | - | - | 3,000 | 465 | - | 3,465 | - | 3,465 |
| Training, Conference & Travel | 2,644 | 400 | - | - | 1,250 | - | - | 1,250 | - | 4,294 |
| Utilities | - | - | 11,712 | 9,990 | 114,271 | 29,079 | 17,540 | 182,592 | - | 182,592 |
| Advertising | 1,200 | - | 400 | - | 9,348 | 200 | - | 9,948 | - | 11,148 |
| Administrative | 5,299 | - | 455 | 50 | 7,052 | 664 | - | 8,221 | - | 13,520 |
| Resident Services | - | - | - | - | 12,669 | 1,204 | - | 13,873 | - | 13,873 |
| Rent | 14,400 | - | - | - | - | - | - | - | - | 14,400 |
| Telephone | 9,000 | - | - | - | 4,174 | 3,120 | 2,500 | 9,794 | - | 18,794 |
| Depreciation & Amortization | - | - | 12,455 | 16,258 | 201,624 | 69,609 | 38,692 | 338,638 | - | 338,638 |
| Total Expenses and Losses | 378,962 | 229,340 | 74,363 | 68,592 | 1,125,317 | 243,443 | 335,017 | 1,846,732 | (592,658) | 1,862,376 |
| Check!! | | | | | | | | | | |
| Net Income Operating | 171,534 | 1,154 | 10,349 | 8,640 | (108,910) | (56,332) | 44,951 | (146,253) | - | 71,386 |
| Capital Expenditure | | | | | | | | | | |
| Cap Ex Appliances | - | - | - | - | 17,280 | - | - | 17,280 | - | 17,280 |
| Cap Ex Carpet/Vinyl | - | - | - | - | 26,172 | - | - | 26,172 | - | 26,172 |
| Capital Improvement Expense | - | - | 3,600 | 3,600 | 9,996 | 18,000 | 12,000 | 47,196 | - | 47,196 |
| Total Capital Expenditure | - | - | 3,600 | 3,600 | 53,448 | 18,000 | 12,000 | 90,648 | - | 90,648 |
| Net Income Operating and Capital | 171,534 | 1,154 | 6,749 | 5,040 | (162,358) | (74,332) | 32,951 | (236,901) | - | (19,262) |



FHC project - Before & After photo

### How can I sign up for this?

- Start by contacting our Madison office on (540) 948 3274.
- Receive and complete an application form.
- Provide the list of papers FHC requires to determine your eligibility.

### Work to be completed

- FHC only uses qualified, licensed and insured contractors.
- Help from this program is limited to available funding each project is put out to bid using pre-qualified Contractors who will submit their cost for work.

### About Us

Since the founding of the organization in 1970, Foothills Housing Corporation (FHC) has been known by different names but has always remained focused on **its** mission "providing safe, decent, affordable housing opportunities."

Foothills Housing Corporation values shelter and believes a home is an extension of the individuals it shelters. A healthy home supports healthy people. A house can and should co-exist with the larger community.

FHC is a 501(c)3 non-profit organization whose goal is to assist in meeting the housing needs of low and moderate income individuals and families who are unable to meet these needs on their own. To accomplish this mission, funds are solicited from public and private sources.

This program is another opportunity to help families in Madison County get the health & safety home repairs they need.

### Contact Us

Phone: (540) 948 3274
Email: creid@fhcorp.org
Web: www.foothillshousingcorp.com

FHC
celebrating 40 years

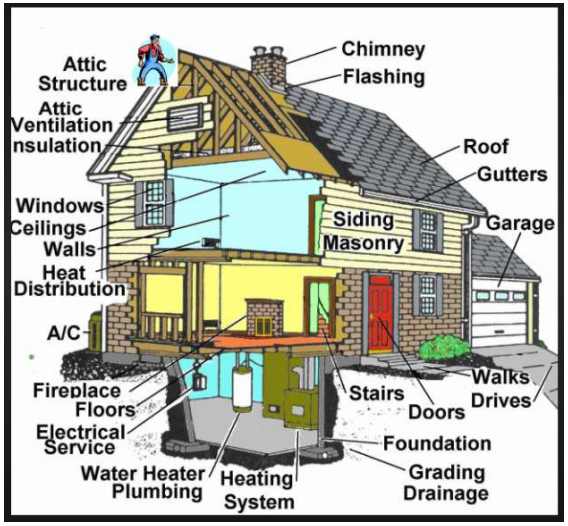
# Foothills Housing Corporation

## Home Repair Loan Program

## Madison County

Foothills Housing Corporation
47 Garrett street, Suite 205
Warrenton, VA 20186
Phone: (540) 948 3274
Email: creid@fhcorp.org

Providing safe, decent, affordable housing opportunities
www.foothillshousingcorp.com




## Purpose of Loan program

The loan program is available to low-to-moderate income homeowners whose homes do not meet Housing Quality Standards set by the Virginia Department of Housing and Community Development (DHCD).

## Typical types of repairs

Repairs that may qualify under this program include wells, drain fields, roofs, electrical, plumbing, access ramps, grab bars/rails, plus other disability related repairs.

## To qualify for this program:

- Must be a homeowner, who lives in Madison County, Virginia.
- Be unable to attain a loan through other sources.
- Have sufficient household income to pay current house payments, taxes, insurance, living expenses & repayment on repair loan given.
- Have household income totaling less than 80% Median income for Madison County -provided by (HUD) Department of Housing and Urban Development (table below).

| HUD - Income Limits per household | | |
|---|---|---|
| 1 Person | $ | 33,100 |
| 2 Person | $ | 37,800 |
| 3 Person | $ | 42,550 |
| 4 Person | $ | 47,250 |
| 5 Person | $ | 51,050 |
| 6 Person | $ | 54,850 |

*"Shelter is one of man's basic needs. Homeownership builds pride in people. We are trying to serve those needs as best we can" - Fauquier Housing Co-Founder Maximilian Tufts*




*FHC accessibility ramp project.*

## Loan details

- The rehabilitation work will be completed using a 0% interest loan between the homeowner and FHC.
- Foothills Housing Corporation will use the homeowner's income & expenses to calculate their ability to repay the loan on a monthly basis.
- There are no fees or charges for setting up or maintaining the loan.
- There are limited funds available and applications will be reviewed and approved on a first come, first served basis until funding is depleted.

# FOOTHILLS HOUSING CORPORATION

*Committed to sustainable community development and ecological design*



# 2018 ANNUAL REPORT

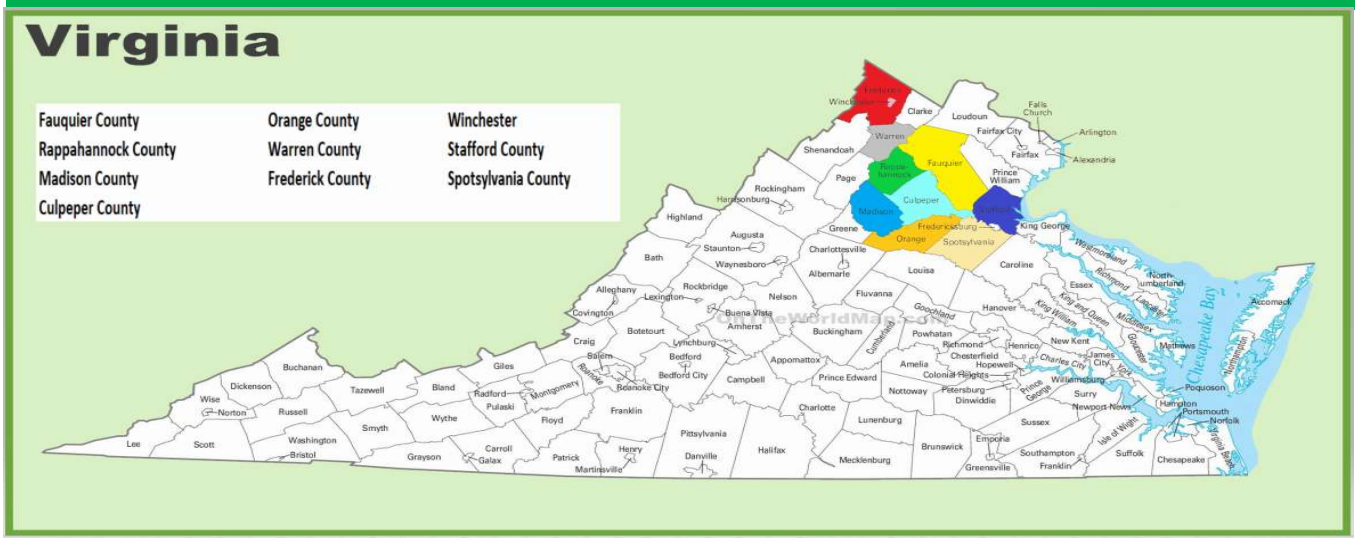
## OUR MISSION & VALUES

Since the founding of the organization in 1970 Foothills Housing Corporation (FHC) has been known by different names but has always remained focused on it's mission "providing safe, decent, affordable housing opportunities."

FHC seeks to give people healthy affordable housing opportunity offering affordable rental properties with below market rents. It is a place to live, to get out of the elements, and into healthy environments. We repair and build houses for low to moderate income families, and can deliver a home in 60-90 days.

Foothills Housing Corporation values shelter and believes it is not a privilege, a home is an extension of the individuals it shelters, a healthy home supports healthy people, a house can and should co-exist with the larger community.

## COMMUNITIES WE WORK IN




**"Shelter is one of man's basic needs. Homeownership builds pride in people. We are trying to serve those needs as best we can"** - Fauquier Housing Co-Founder Maximilian Tufts

# ABOUT FOOTHILLS HOUSING CORPORATION

## Community Impact

**404** People
Active & New in 2018 Total

**1268** People
Since beginning "1970"



Total Impact of Foothills Housing Corporation Projects and support in the Community delivering safe, decent and affordable housing opportunities for those that are in need.

## Affordable Housing

**164** Homes
Active as at 12.31.18

**200** People Housed
Active as at 12.31.18

Providing affordable housing at below market rents for senior living, families and individuals. Includes Properties: Oaks I & II, Stuart Street Apartments, Countryside Apartments, Remington House.

## Indoor Plumbing Rehab

**85** Projects
Active as at 12.31.18

**0**
2018 Total new Projects

**195**
Since beginning



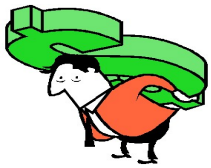
Indoor Plumbing Rehabilitation funding available to assist Low-to-Moderate income homeowners that do not have indoor plumbing or their well and/or drain field has failed. Average Job Cost $42,500 & over $8 Million provided.

## Program Loans

**93** Loans
Active as at 12.31.18

**16**
2018 Total new Projects

**127**
Since beginning



0% financing for qualifying low-to-moderate income individuals and families in need of assistance with repairs or improvements to their homes to meet the Virginia Housing Quality Standards (HQS). Average Loan issued $3,800 paid back using the borrowers ability to pay.

## Emergency Home Repair

**19** Projects
2018 Total

**104**
Since program started 2012

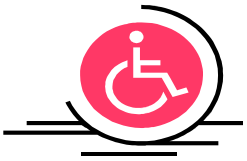


The Emergency Home Repair (EHR) program provides grant funds to assist very low-income homeowners to make emergency, safety and handicap accessibility repairs to their homes, with no repayment required.

## Disability Access Ramps Install

**7** Projects
2018 Total

**41**
Total since 2013



The Disability Ramp program builds and repairs permanent ramps, and lends portable, ADA approved aluminum ramps to persons who need a temporary ramp, for up to 12 months, with no project cost repayment required.

* Stated figures above include Foothills Housing Corporation and all it's affiliates including it's sister organization Rapidan Better Housing

## Impact of every dollar contributed



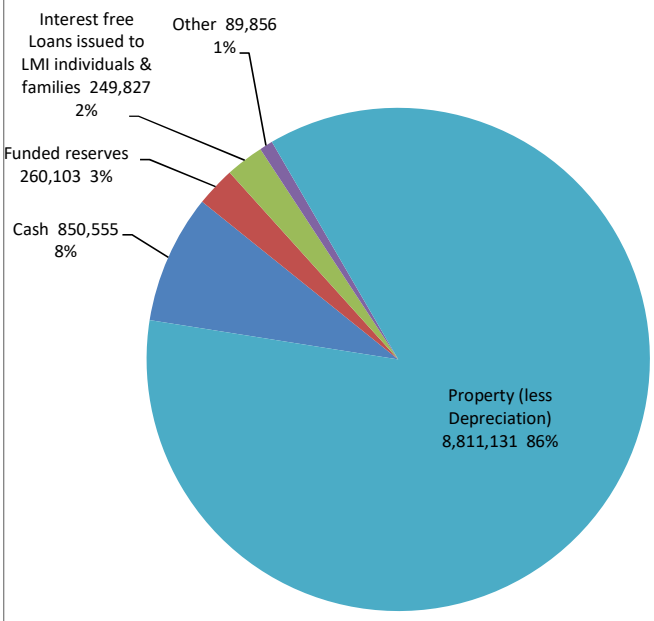
**$1 Contributed** = **FHC provided $6.61 in Valuable Community Programs & Services**

| | | | |
|---|---|---|---|
| **Total Value added to Community** | **$ 792,183** | = | **$ 6.61** |
| **Total Contributions & Donations** (Not incl. Grants) | **$ 119,909** | | |

To Donate please visit our website: www.foothillshousingcorp.com

## Foothills Housing Corporation Assets 2018

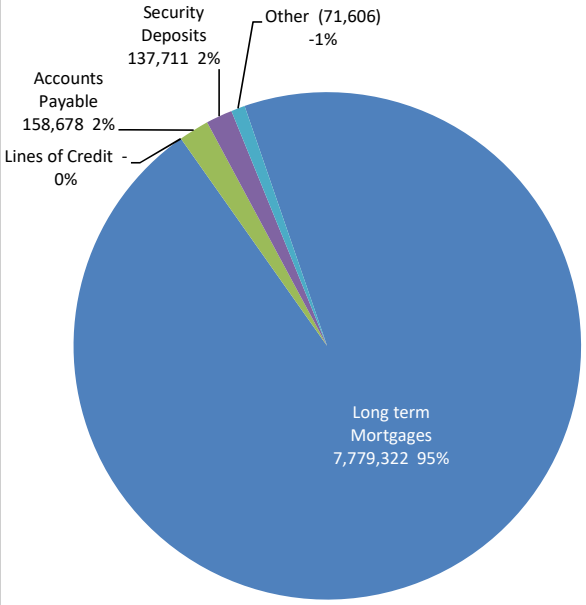
**(Consolidated Assets for FHC and all it's subsidiaries)**




**$10,261,472**

## Foothills Housing Corporation Liabilities 2018

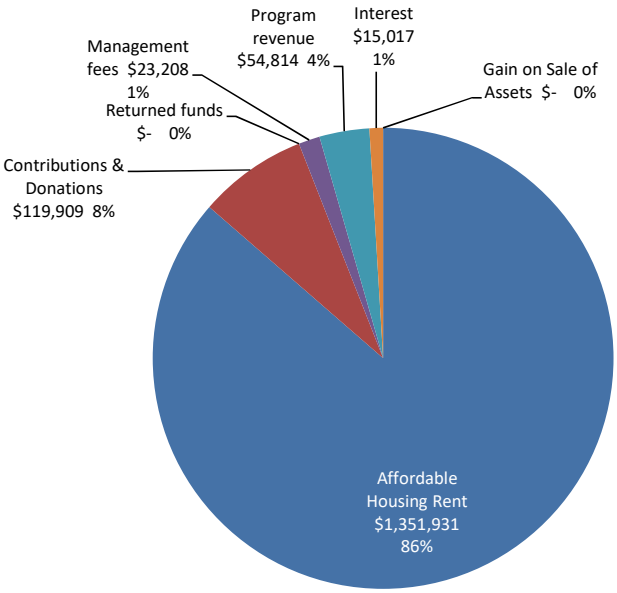
**(Consolidated Liabilities for FHC and all it's subsidiaries)**




**$8,004,105**

## Foothills Housing Corporation Revenue 2018

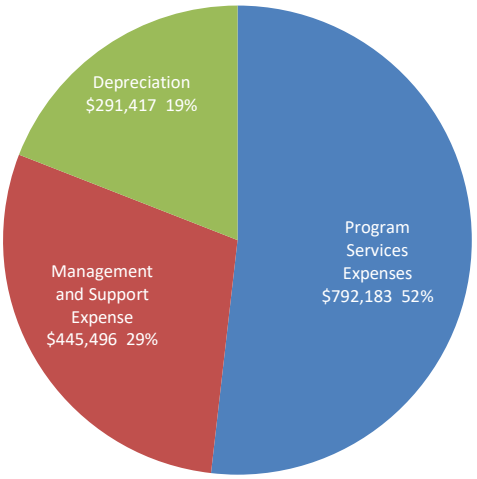
**(Consolidated Revenue for FHC and all it's subsidiaries)**




**$1,564,879**

## Foothills Housing Corporation Expenditure 2018

**(Consolidated expenditure for FHC and all it's subsidiaries)**




**$1,529,096**

# Introducing Fletcherville Estates




Foothills Housing Corporation (FHC) is proud to announce it's newest affordable housing property Fletcherville, acquired in December, 2018.
This property consists of 39 rentable units located 1 mile from the Town of Warrenton on Route 17.
The development consists predominatly of single family 2 and 3 bedrooms homes, with 6 duplex units offered and a commercial building also.
To keep with our mission of providing affordable housing all rents have remained below 60% average median rent for Fauquier County, with many currently renting at or below 40% AMI. There are 54 tenants utilizing the affordable accomodation throughout the property.
This property provides much needed work force housing for the people and families that live in the local community and FHC is an advocate of preserving and maintaining shelter opportunities for those that could otherwise be forced out of housing.
The property is ageing with homes built between the 1950's and 1970's, although structurally sound they don't come without their challenges. FHC is excited to rehabilitate and improve with plans for grant funding applications in 2020.

**Foothills Housing Corporation would like to Thank everyone for their very generous donations throughout the 2018 year. FHC looks forward to continuing the great work helping people that live in our community in the coming year providing safe, decent and affordable housing opportunities.**

To Donate please visit our website: www.foothillshousingcorp.com

## BOARD OF DIRECTORS

**John S.M. Wayland**
*President*
**Maximilian A. Tufts Jr.**
*Vice President & Secretary*
**Sarah Godfrey**
*Treasurer*

**Robert Lee**
*Director*
**Huntley Thorpe**
*Director*

**Pat Washington**
*Director*
**Laura Fox**
*Director*

## STAFF

**John Reid**
*Executive Director*
**Grant Pearse**
*Chief Financial Officer*
**Tish Robinson**
*FHPM Property Manager*
**Christina Kirby**
*Project Manager*

**Janice Adams**
*Receptionist and Account Manager*
**Kaylyn Colvin**
*FHPM - Administrative assistant*
**Albert Sigouin**
*FHPM - Oaks maintenance personel*
**Jeri Burns**
*FHPM - Oaks maintenance personel*




**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**FINANCIAL STATEMENTS**
**DECEMBER 31, 2018**

47 Garrett Street, Suite 205
Warrenton, VA 20186
ph: (540) 341-2805 • fax: (540) 347-9811

Providing safe, decent, affordable housing opportunities
www.foothillshousingcorp.com

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**

**TABLE OF CONTENTS**


**Page**

Independent Auditor's Report ..... 1

Management Introduction ..... 3

Financial Statements:

Statement of Financial Position ..... 7

Statement of Activities ..... 9

Statement of Functional Expenses ..... 11

Statement of Cash Flows ..... 12

Notes to Financial Statements ..... 14

Dooley & Vicars
Certified Public Accountants, L.L.P.

Daniel J. Dooley, C.P.A.
Michael H. Vicars, C.P.A.



## INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Foothills Housing Corporation and Affiliates
Warrenton, Virginia

We have audited the accompanying financial statements of Foothills Housing Corporation and Affiliates (a nonprofit organization), which comprise the statement of financial position as of December 31, 2018, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

**Management's Responsibility for the Financial Statements**

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

**Auditor's Responsibility**

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

21 S. Sheppard Street ◆ Richmond, VA 23221
Telephone: 804.355.2808 ◆ FAX: 804.359.3897

## INDEPENDENT AUDITOR'S REPORT
## (CONTINUED)

### Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Foothills Housing Corporation and Affiliates as of December 31, 2018, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

### Emphasis of Matter

As discussed in Note 18 to the financial statements, in 2018, the entity adopted new accounting guidance ASU 2016-14. Our opinion is not modified with respect to this matter.

### Other Matters

Our audit was conducted for the purpose of forming an opinion on the basic financial statements as a whole. The management introduction on pages 3 to 6 is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information has not been subjected to the auditing procedures applied in the audit of the basic financial statements, and accordingly, we do not express an opinion or provide any assurance on it.



Dooley & Vicars
Certified Public Accountants L.L.P.

Richmond, Virginia
October 29, 2019

# FOOTHILLS HOUSING CORPORATION

*Committed to sustainable community development and ecological design*



# 2018 ANNUAL REPORT

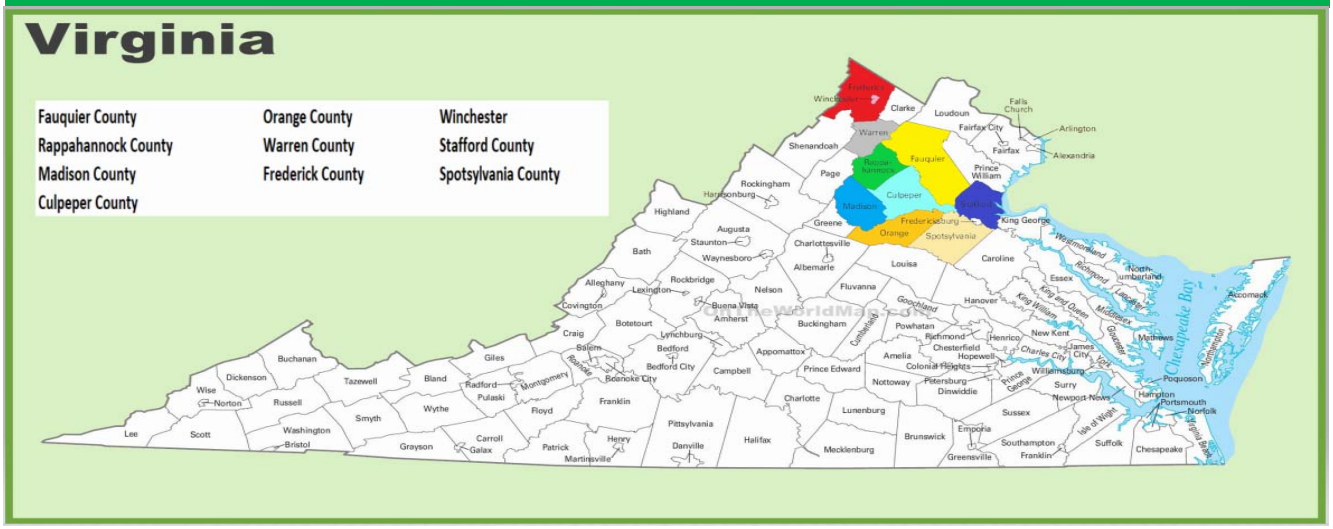
## OUR MISSION & VALUES

Since the founding of the organization in 1970 Foothills Housing Corporation (FHC) has been known by different names but has always remained focused on it's mission "providing safe, decent, affordable housing opportunities."

FHC seeks to give people healthy affordable housing opportunity offering affordable rental properties with below market rents. It is a place to live, to get out of the elements, and into healthy environments. We repair and build houses for low to moderate income families, and can deliver a home in 60-90 days.

Foothills Housing Corporation values shelter and believes it is not a privilege, a home is an extension of the individuals it shelters, a healthy home supports healthy people, a house can and should co-exist with the larger community.

## COMMUNITIES WE WORK IN




**"Shelter is one of man's basic needs. Homeownership builds pride in people. We are trying to serve those needs as best we can"** - Fauquier Housing Co-Founder Maximilian Tufts

## ABOUT FOOTHILLS HOUSING CORPORATION

### Community Impact

**403** People
Active & New in 2018 Total

**1268** People
Since beginning "1970"



Total Impact of Foothills Housing Corporation Projects and support in the Community delivering safe, decent and affordable housing opportunities for those that are in need.

### Affordable Housing

**164** Homes
Active as at 12.31.18



**200** People Housed
Active as at 12.31.18

Providing affordable housing at below market rents for senior living, families and individuals. Includes Properties: Oaks I & II, Stuart Street Apartments, Countryside Apartments, Remington House.

### Indoor Plumbing Rehab

**84** Projects
Active as at 12.31.18

**0**
2018 Total new Projects

**195**
Since beginning



Indoor Plumbing Rehabilitation funding available to assist Low-to-Moderate income homeowners that do not have indoor plumbing or their well and/or drain field has failed. Average Job Cost $42,500 & over $8 Million provided.

### Program Loans

**93** Loans
Active as at 12.31.18

**16**
2018 Total new Projects

**127**
Since beginning



0% financing for qualifying low-to-moderate income individuals and families in need of assistance with repairs or improvements to their homes to meet the Virginia Housing Quality Standards (HQS). Average Loan issued $3,800 paid back using the borrowers ability to pay.

### Emergency Home Repair

**19** Projects
2018 Total

**104**
Since program started 2012

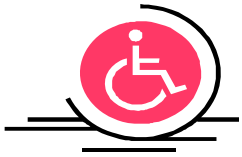


The Emergency Home Repair (EHR) program provides grant funds to assist very low-income homeowners to make emergency, safety and handicap accessibility repairs to their homes, with no repayment required.

### Disability Access Ramps Install

**7** Projects
2018 Total

**41**
Total since 2013



The Disability Ramp program builds and repairs permanent ramps, and lends portable, ADA approved aluminum ramps to persons who need a temporary ramp, for up to 12 months, with no project cost repayment required.

* Stated figures above include Foothills Housing Corporation and all it's affiliates including it's sister organization Rapidan Better Housing



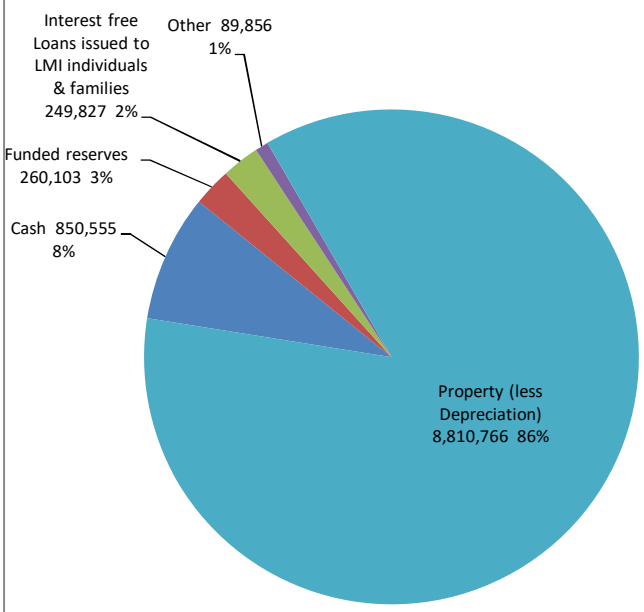

**$1 Contributed** = **FHC provided $6.61 in Valuable Community Programs & Services**

| | | | |
|---|---|---|---|
| **Total Value added to Community** | **$ 792,009** | = | **$ 6.61** |
| **Total Contributions & Donations** (Not incl. Grants) | **$ 119,909** | | |

To Donate please visit our website: www.foothillshousingcorp.com

## Foothills Housing Corporation Assets 2018

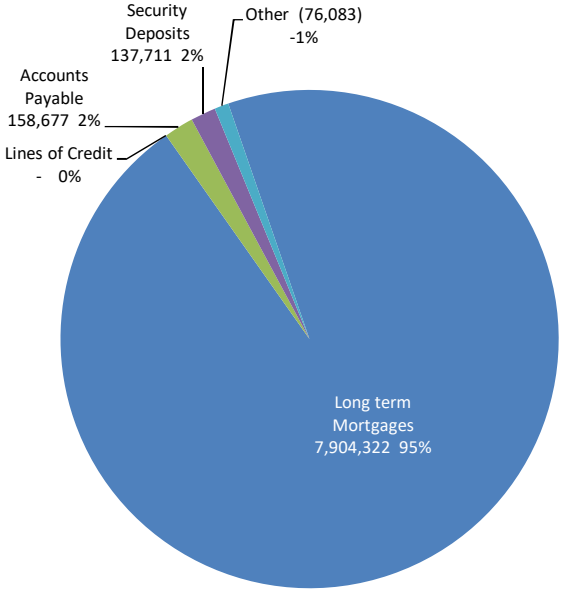
**(Consolidated Assets for FHC and all it's subsidiaries)**




**$10,261,107**

## Foothills Housing Corporation Liabilities 2018

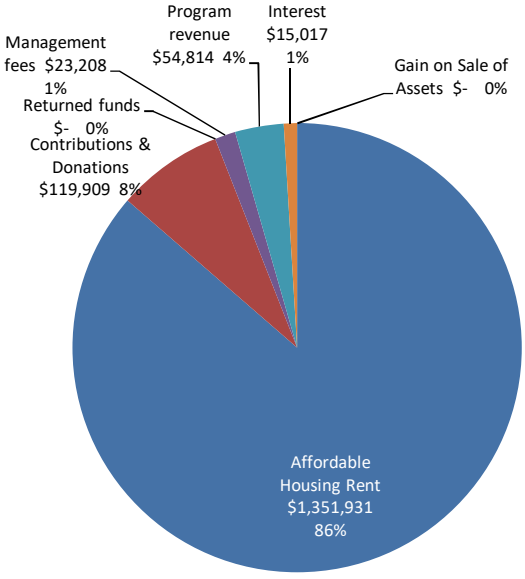
**(Consolidated Liabilities for FHC and all it's subsidiaries)**




**$7,999,627**

## Foothills Housing Corporation Revenue 2018

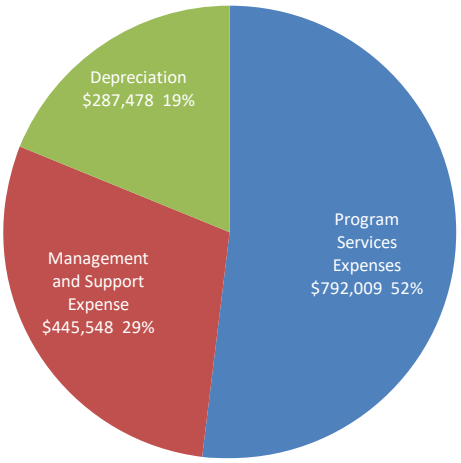
**(Consolidated Revenue for FHC and all it's subsidiaries)**




**$1,564,879**

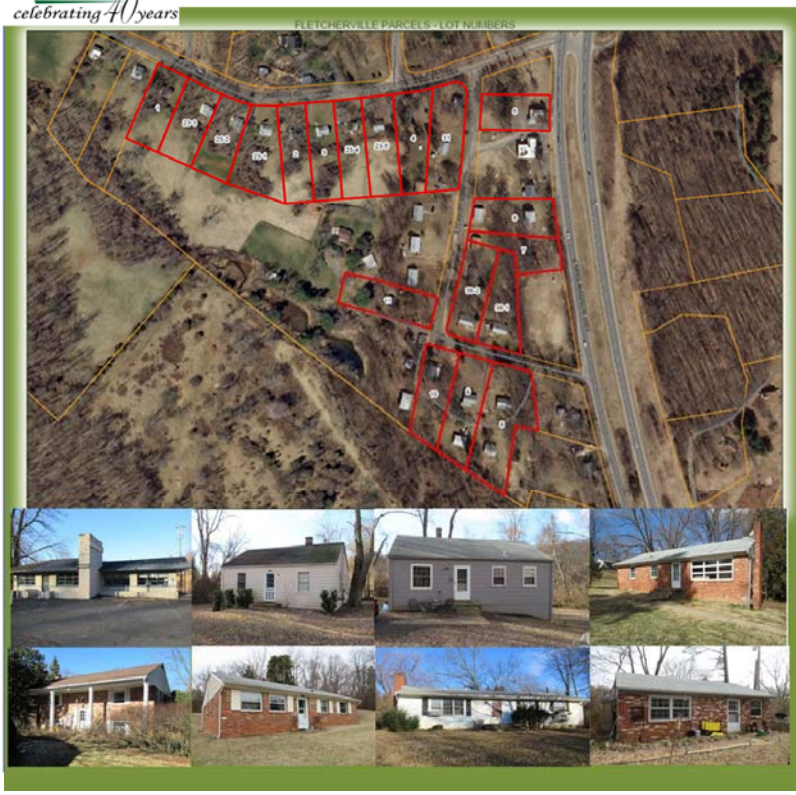
## Foothills Housing Corporation Expenditure 2018

**(Consolidated expenditure for FHC and all it's subsidiaries)**




**$1,524,983**

# Introducing Fletcherville Estates




Foothills Housing Corporation (FHC) is proud to announce it's newest affordable housing property Fletcherville, acquired in December, 2018.
This property consists of 39 rentable units located 1 mile from the Town of Warrenton on Route 17.
The development consists predominatly of single family 2 and 3 bedrooms homes, with 6 duplex units offered and a commercial building also.
To keep with our mission of providing affordable housing all rents have remained below 60% average median rent for Fauquier County, with many currently renting at or below 40% AMI. There are 54 tenants utilizing the affordable accomodation throughout the property.
This property provides much needed work force housing for the people and families that live in the local community and FHC is an advocate of preserving and maintaining shelter opportunities for those that could otherwise be forced out of housing.
The property is ageing with homes built between the 1950's and 1970's, although structurally sound they don't come without their challenges. FHC is excited to rehabilitate and improve with plans for grant funding applications in 2020.

**Foothills Housing Corporation would like to Thank everyone for their very generous donations throughout the 2018 year. FHC looks forward to continuing the great work helping people that live in our community in the coming year providing safe, decent and affordable housing opportunities.**

To Donate please visit our website: www.foothillshousingcorp.com

## BOARD OF DIRECTORS

**John S.M. Wayland**
*President*
**Maximilian A. Tufts Jr.**
*Vice President & Secretary*
**Sarah Godfrey**
*Treasurer*
**Robert Lee**
*Director*
**Huntley Thorpe**
*Director*
**Pat Washington**
*Director*
**Laura Fox**
*Director*

## STAFF

**John Reid**
*Executive Director*
**Grant Pearse**
*Chief Financial Officer*
**Tish Robinson**
*FHPM Property Manager*
**Christina Kirby**
*Project Manager*
**Janice Adams**
*Receptionist and Account Manager*
**Kaylyn Colvin**
*FHPM - Administrative assistant*
**Albert Sigouin**
*FHPM - Oaks maintenance personel*
**Jeri Burns**
*FHPM - Oaks maintenance personel*

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**STATEMENT OF FINANCIAL POSITION**
**DECEMBER 31, 2018**

ASSETS

| | Foothills Housing Corporation | Foothills Housing Property Management L.L.C. | Total Real Estate Investments | Inter-entity Eliminations | **Total** |
|---|---|---|---|---|---|
| Cash and Cash Equivalents | $ 89,640 | $ 3,333 | $ 516,222 | $ - | $ 609,195 |
| Restricted Cash | 94,420 | - | - | - | 94,420 |
| Restricted Cash - Tenant Security Deposits | - | - | 146,940 | - | 146,940 |
| Accounts Receivable, Net of Allowance | - | 3,380 | 1,602 | (3,381) | 1,601 |
| Accounts Receivable - IPR, Net of Allowance | 113,921 | - | - | - | 113,921 |
| Accounts Receivable - PI, Net of Allowance | 135,906 | - | - | - | 135,906 |
| Notes Receivable, Net of Allowance | 3,931,562 | - | - | (3,931,562) | - |
| Long Term Lease Receivable | - | - | 82,000 | (82,000) | - |
| Prepaid Expenses | 753 | - | 12,753 | - | 13,506 |
| Due From Affiliate | 205,000 | - | 718,764 | (923,764) | - |
| Fixed Assets, Net of Accum. Depreciation | - | - | 8,810,766 | - | 8,810,766 |
| Funded Reserves | - | - | 260,103 | - | 260,103 |
| Escrow Deposits | 1,000 | - | 73,747 | - | 74,747 |
| Total Assets | $ 4,572,202 | $ 6,713 | $ 10,622,897 | $ (4,940,707) | $ 10,261,105 |

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**STATEMENT OF FINANCIAL POSITION**
**DECEMBER 31, 2018**

LIABILITIES AND NET POSITION

| | Foothills Housing Corporation | Foothills Housing Property Management L.L.C. | Total Real Estate Investments | Inter-entity Eliminations | **Total** |
|---|---|---|---|---|---|
| Accounts Payable | $ 19,088 | $ - | $ 141,907 | $ (3,381) | $ 157,614 |
| Tenant Security Deposits | - | - | 137,711 | - | 137,711 |
| Accrued Interest | - | - | 124,138 | (100,652) | 23,486 |
| Deferred Revenue | 4,538 | - | 12,902 | - | 17,440 |
| Notes Payable | 124,477 | - | 7,935,470 | (155,512) | 7,904,435 |
| Deferred Developer Fee | - | - | 3,776,050 | (3,776,050) | - |
| Long-Term Lease | - | - | 82,000 | (82,000) | - |
| Due to Affiliate | - | - | 798,764 | (923,764) | (125,000) |
| Deferred Loan Costs | - | - | (116,328) | - | (116,328) |
| Payroll Liabilities | - | 268 | - | - | 268 |
| Total Liabilities | 148,103 | 268 | 12,892,614 | (5,041,359) | 7,999,626 |
| | | | | | |
| Net Assets With Donor Restriction | 204,956 | - | - | - | 204,956 |
| Net Assets Without Donor Restriction | 4,219,143 | 6,445 | (2,269,717) | 100,652 | 2,056,523 |
| Total Net Assets | 4,424,099 | 6,445 | (2,269,717) | 100,652 | 2,261,479 |
| | | | | | |
| Total Liabilities and Net Assets | $ 4,572,202 | $ 6,713 | $ 10,622,897 | $ (4,940,707) | $ 10,261,105 |

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**STATEMENT OF ACTIVITIES**
**FOR THE YEAR ENDED DECEMBER 31, 2018**

| | Foothills Housing Corporation | Foothills Housing Property Management L.L.C. | Total Real Estate Investments | Inter-entity Eliminations | **Total** |
|---|---|---|---|---|---|
| Net Assets Without Donor Restriction | | | | | |
| Revenue, Gains, and Other Support | | | | | |
| Management Fee Income | $ 50,913 | $ 59,905 | $ - | $ (110,818) | $ - |
| Rental Income | 3,980 | - | 1,347,951 | - | 1,351,931 |
| Emergency Home Repair Grant Revenue | 22,049 | - | - | - | 22,049 |
| Contributions | 97,860 | - | - | - | 97,860 |
| Other Income | - | 116,762 | 23,208 | (116,762) | 23,208 |
| Interest Income | 334,935 | - | 4,948 | (324,866) | 15,017 |
| Assets Released from Restriction | | | - | | |
| Program Expense Releases | 4,328 | - | - | - | 4,328 |
| Program Income Loans | 31,069 | - | - | - | 31,069 |
| IPR and PI Bad Debts | 14,165 | - | - | - | 14,165 |
| IPR-Loan Administration Fee Revenue | 5,252 | - | - | - | 5,252 |
| Total Revenues, Gains, and Other Support | 564,551 | 176,667 | 1,376,107 | (552,446) | 1,564,879 |
| Expenses and Losses | | | | | |
| Program Services | 84,848 | - | 1,037,767 | (330,606) | 792,009 |
| Management and General | 291,151 | 167,674 | 501,781 | (227,580) | 733,026 |
| Total Expenses and Losses | 375,999 | 167,674 | 1,539,548 | (558,186) | 1,525,035 |
| Change in Net Assets Without Donor Restriction | $ 188,552 | $ 8,993 | $ (163,441) | $ 5,740 | $ 39,844 |

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**STATEMENT OF ACTIVITIES**
**FOR THE YEAR ENDED DECEMBER 31, 2018**

(CONTINUED)

| | Foothills Housing Corporation | Foothills Housing Property Management L.L.C. | Total Real Estate Investments | Inter-entity Eliminations | **Total** |
|---|---|---|---|---|---|
| Net Assets With Donor Restriction | | | | | |
| IPR Loans | $ 34,500 | $ - | $ - | $ - | $ 34,500 |
| Assets Released from Restrictions | (54,814) | - | - | - | (54,814) |
| Change in Net Assets With Donor Restriction | (20,314) | - | - | - | (20,314) |
| Increase (Decrease) in Net Assets | 168,238 | 8,993 | (163,441) | 5,740 | 19,530 |
| Net Assets - Beginning of the Year | 4,235,861 | 17,452 | (2,106,276) | 94,912 | 2,241,949 |
| Equity Transfers | 20,000 | (20,000) | - | - | - |
| Net Assets - End of the Year | $ 4,424,099 | $ 6,445 | $ (2,269,717) | $ 100,652 | $ 2,261,479 |

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**STATEMENT OF FUNCTIONAL EXPENSES**
**FOR THE YEAR ENDED DECEMBER 31, 2018**

| | Program Services | | | | | | | | Supporting Services | |
|---|---|---|---|---|---|---|---|---|---|---|
| | Foothills Housing Corp. | Foothills Housing Property Management L.L.C. | Fletcherville Estates, L.L.C. | Countryside Associates L.L.C. | Stuart Street L.L.C. | Oaks Springs L.L.C. | Oaks II Associates L.P. | Total Real Estate Investments | Management and General | **Total** |
| Salaries | $ - | $ - | $ - | $ - | $ - | $ - | $ - | $ - | $ 350,677 | 350,677 |
| Payroll Taxes | - | - | - | - | - | - | - | - | 24,816 | 24,816 |
| Total Payroll Expenses | - | - | - | - | - | - | - | - | 375,493 | 375,493 |
| Emergency and Accessibility Repair | 20,865 | - | - | - | - | - | - | - | - | 20,865 |
| Indoor Plumbing Program | 5,851 | - | - | - | - | - | - | - | - | 5,851 |
| Housing Development | 55,562 | - | - | - | - | - | - | - | - | 55,562 |
| Interest Expense | - | - | | 23,678 | 28,001 | 483,003 | 74,332 | 609,014 | - | 609,014 |
| Insurance | 169 | - | 1,915 | 4,195 | 3,048 | 14,498 | 4,047 | 27,703 | 6,601 | 34,473 |
| Supplies | - | - | - | - | - | 7,640 | 500 | 8,140 | 3,693 | 11,833 |
| Repairs & Maintenance | 1,155 | - | - | 16,238 | 5,905 | 182,060 | 17,712 | 221,915 | 118 | 223,188 |
| Management Fees | - | - | - | - | - | - | - | - | 59,906 | 59,906 |
| Accounting Fees | - | - | - | - | - | 10,907 | - | 10,907 | 7,716 | 18,623 |
| Legal Fees | - | - | - | - | - | - | - | - | 350 | 350 |
| Professional Services | 675 | - | - | - | - | 667 | 1,865 | 2,532 | 1,193 | 4,400 |
| Travel | - | - | - | - | - | - | - | - | 4,901 | 4,901 |
| Utilities | 571 | - | - | 11,322 | 10,017 | 99,976 | 26,057 | 147,372 | - | 147,943 |
| Administrative | - | - | 832 | 152 | 281 | - | 2,129 | 3,394 | 165,584 | 168,978 |
| Taxes | - | - | 900 | - | - | - | 150 | 1,050 | - | 1,050 |
| Rent | - | - | - | - | - | - | - | - | 12,607 | 12,607 |
| Telephone | - | - | - | - | - | - | - | - | 15,372 | 15,372 |
| Bad Debt | - | - | - | - | - | 5,740 | - | 5,740 | 18,594 | 24,334 |
| Contributions | - | - | - | - | - | - | - | - | 1,000 | 1,000 |
| Depreciation & Amortization | - | - | - | - | - | - | - | - | 287,478 | 287,478 |
| Total Expenses | $ 84,848 | $ - | $ 3,647 | $ 55,585 | $ 47,252 | $ 804,491 | $ 126,792 | $ 1,037,767 | $ 960,606 | $ 2,083,221 |

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**STATEMENT OF CASH FLOWS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**

| | Foothills Housing Corporation | Foothills Housing Property Management L.L.C. | Total Real Estate Investments | **Total** |
|---|---|---|---|---|
| Cash Flows from Operating Activities | | | | |
| Excess of Revenue, Gains, and Other Support Over Expenses and Losses | $ 168,238 | $ 8,993 | $ (163,441) | $ 13,790 |
| Add - Non-Cash Interest Income | (166,918) | - | 340,736 | 173,818 |
| Add - Non-Cash Service Revenue | - | - | 4,049 | 4,049 |
| Depreciation & Amortization | - | - | 287,347 | 287,347 |
| <Increase> Decrease in Accounts Receivable | 21,481 | (3,381) | 18 | 18,118 |
| <Increase> Decrease in Security Deposits | - | - | (23) | (23) |
| <Increase> Decrease in Due from Affiliates | (20,000) | - | - | (20,000) |
| <Increase> Decrease in Prepaid Expenses | 330 | - | (4,962) | (4,632) |
| Increase <Decrease> in Accounts Payable | 8,750 | - | 113,345 | 122,095 |
| Increase <Decrease> in Due to Affiliates | - | - | 718,764 | 718,764 |
| Increase <Decrease> in Accrued Interest | - | - | (275) | (275) |
| Increase <Decrease> in Security Deposits | (995) | - | 35,294 | 34,299 |
| Increase <Decrease> in Defferred Revenue | 4,112 | - | (12,318) | (8,206) |
| Increase <Decrease> in Current Liabilities | (948) | (114) | 1,961 | 899 |
| Net Cash and Cash Equivalents Provided by (Used In) Operating Activities | $ 14,050 | $ 5,498 | $ 1,320,495 | $ 1,340,043 |

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**STATEMENT OF CASH FLOWS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**
(CONTINUED)

| | Foothills Housing Corporation | Foothills Housing Property Management L.L.C. | Total Real Estate Investments | **Total** |
|---|---|---|---|---|
| Cash Flows from Financing Activities | | | | |
| Payment of Deferred Developer Fee | $ - | $ - | $ (168,000) | $ (168,000) |
| Payment of Long-Term Borrowings | - | - | (673,178) | (673,178) |
| Line of Credit Payments | (125,000) | - | - | (125,000) |
| Loan Proceeds | - | - | 3,258,208 | 3,258,208 |
| Capital Distribution | - | - | 20,000 | 20,000 |
| Net Cash and Cash Equivalents Provided by (Used In) Financing Activities | (125,000) | - | 2,437,030 | 2,312,030 |
| Cash Flows from Investing Activities | | | | |
| <Increase> Decrease in Deposits and Funded Reserves | - | - | (75,314) | (75,314) |
| <Increase> Decrease in Land | - | - | (2,530,144) | (2,530,144) |
| <Increase> Decrease in Due from Affiliates | (125,000) | - | - | (125,000) |
| Loan Costs | | | (55,078) | (55,078) |
| Purchase of Equipment | - | - | (13,163) | (13,163) |
| <Increase> Decrease in Note Receivable | - | - | (718,764) | (718,764) |
| Contributed Equity | 20,000 | (20,000) | - | - |
| Net Cash and Cash Equivalents Provided by (Used In) Investing Activities | (105,000) | (20,000) | (3,392,463) | (3,517,463) |
| Net Increase (Decrease) in Cash and Cash Equivalents | (215,950) | (14,502) | 365,062 | 134,610 |
| Cash and Cash Equivalents at the Beginning of the Year | 400,010 | 17,835 | 298,100 | 715,945 |
| Cash and Cash Equivalents at the End of the Year | $ 184,060 | $ 3,333 | $ 663,162 | $ 850,555 |
| Unrestricted Cash | $ 89,640 | $ 3,333 | $ 516,222 | $ 609,195 |
| Restricted Cash | 94,420 | - | 146,940 | 241,360 |
| Total | $ 184,060 | $ 3,333 | $ 663,162 | $ 850,555 |

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**NOTES TO FINANCIAL STATEMENTS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**

Note 1: **Organization and Business**

Foothills Housing Corporation (FHC) is a 501(c)3 non-profit organization with the goal to assist in meeting the housing needs of low and moderate income individuals and families who are unable to meet these needs on their own in Culpeper, Fauquier, Madison, Orange, Warren, Frederick, Stafford, Clarke, Spotsylvania, Winchester, and Rappahannock Counties in Virginia. FHC addresses its mission to meet long-term needs as well as emergency needs of those needing assistance. To accomplish this purpose, funds are solicited from public and private sources.

Note 2: **Summary of Significant Accounting Policies**

Related party transactions and balances have been eliminated in combination and are noted with an asterisk (*).

The Organization is required to report information regarding its financial position and activities according to two classes of net assets: net assets with donor restriction and net assets without donor restriction.

Foothills Housing Corporation presents its consolidated financial statements under FASB ASC 958-810 (formally Statement of Position 94-3, Reporting related Entities by Not-for-Profit Organizations) which requires consolidation of all entities in which FHC has a controlling financial interest and all not-for-profit entities that share board control. Under the guidance of Emerging Issues Task Force Issue No. 04-05, Determining Whether General Partner, or the General Partner as a Group, Controls a Limited Partnership or Similar Entity when the limited Partners Have Certain Rights, the consolidated financial statements includes the accounts of the limited partnership or limited liability companies in which FHC is the general partner or managing member but does not hold majority financial interest. All significant intercompany transactions and balances have been eliminated in the consolidation.

A summary of the Organization's significant accounting policies follows:

Cash and Cash Equivalents - For the Purposes of reporting the Statement of Cash Flows, the Organization includes all cash accounts, which are not subject to withdrawal restrictions or penalties, and all highly liquid debt instruments purchased with maturity of three months or less as cash and cash equivalents.

Deferred Charges - Financing costs are amortized over the term of the mortgage loan using the effective yield method.

Organizational Costs - Organizational costs are expensed as incurred.

Fixed Assets - Assets with an estimated economic life of greater than one year are capitalized and depreciated over their estimated useful life using the straight line method.

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**NOTES TO FINANCIAL STATEMENTS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**
**(CONTINUED)**

Note 2: **Summary of Significant Accounting Policies (Continued)**

Investments - FHC reports all entities over which it has control using the consolidation method and reports any non-controlling interest on it's financial statements. See Note 4 for all investments.

Contributed Services - Foothills Housing Corporation reports gifts of cash and other assets as restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restriction are reclassified to net assets without donor restriction and reported in the statement of activities as net assets released from restriction.

The Organization reports gifts of land, buildings and equipment as without donor restriction unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long those long-lived assets must be maintained, the Organization reports expirations of donor restrictions when the donated or acquired long-lived assets are placed in service.

Income Taxes - Foothills Housing Corporation is exempt from income taxes under section 501(c)(3) of the Internal Revenue Code. No provision or liability for income taxes has been recorded for FHC or its real estate investments because FHC and the members and partners of the real estate investments are taxed on their proportionate shares of the Organization's and partnership's income. FHC has no material uncertain tax positions requiring disclosure. Fiscal years ending on or after December 31, 2015, remain subject to examination by federal and state tax authorities.

Impairment of Long-Term Assets - Foothills Housing Corporation reviews its investments in real estate for impairment whenever events or changes in circumstances indicate that the carrying value of such property may not be recoverable. Recoverability is measured by comparison of the carrying amount of the real estate to the future net undisclosed cash flow expected to be generated by the rental property. There were no impairment losses recognized during 2018.

Use of Estimates in Preparation of the Financial Statements - Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities and the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reported period. Actual results could differ from those estimates.

Tenant Security Deposits - Foothills Housing Corporation collects security deposits from each tenant to provide for costs incurred or unpaid rent when a tenant vacates the apartment. The cash collected is kept separate from operating funds and interest is paid on the security deposits in accordance with the lease agreement.

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**NOTES TO FINANCIAL STATEMENTS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**
**(CONTINUED)**

Note 2: **Summary of Significant Accounting Policies (Continued)**

Accounts Receivable and Bad Debts - Tenant receivables are charged to bad debt when they are determined to be uncollectible based on a periodic review of the accounts by management. U.S. generally accepted accounting principles require that the allowance method be used to recognize bad debts. Management's allowance is for delinquent accounts over 90 days old.

Rental Income - Rental income is recognized as rentals become due. Rental payments received in advance are deferred until earned. All leases between the Organization and tenants of the property are operating leases.

Grant Income - Grant income is recognized as grant requirements are met. Grant payments received in advance are deferred until earned. All grants between the Organization and grantors are reimbursable grants.

Advertising Costs - Advertising costs are charged to operations when incurred.

Note 3: **Availability and Liquidity**

The following represents the Organization's financial assets at December 31, 2018

| | 12/31/2018 |
|---|---|
| Cash and Cash Equivalents | $ 609,195 |
| Restricted Cash | 241,360 |
| Escrows and Reserves | 334,850 |
| Total Accounts Receivable | 251,428 |
| Total Financial Assets | 1,436,833 |
| Less Amounts Not Available to be Used Within One Year: | |
| Escrows and Reserves | 334,850 |
| Net Assets with Donor Restrictions | 204,956 |
| Nonavailable Funds | 539,806 |
| Financial Assets Available to Meet General Expenditures Over the Next Twelve Months | $ 897,027 |

The Organization manages its liquidity by completing annual operating budgets that provide sufficient funds for general expenditures in meeting liabilities and other obligations as they become due. The Organization's cash and cash equivalents is available within one year of the statement of financial position date to meet cash needs for general expenditures. In the event an unanticipated liquidity need is encountered, the Organization may be provided relief by certain related parties in the form of delaying payments for services provided.

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**NOTES TO FINANCIAL STATEMENTS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**
**(CONTINUED)**

Note 4: **Investments**

As part of FHC's mission, it owns and invests in low-income and very low-income housing. As of December 31, 2018, FHC has the following interests in real estate investments-- sole member interest in Stuart Street, L.L.C.; Sole member interest Countryside L.L.C.; Sole member interest in Oaks Springs L.L.C.; is the sole stock holder in the Oaks II Corporation, which owns a 99.99% general partner interest in The Oaks II Associates, L.P.; and the sole member interest in Fletcherville Estates, L.L.C.

| | Investment | FHC Ownership | Units |
|---|---|---|---|
| | Stuart Street, L.L.C. | 100% | 6 |
| | Countryside, L.L.C. | 100% | 8 |
| | Oaks Springs, L.L.C. | 100% | 96 |
| | The Oaks II Corporation | 100% | - |
| ^ | The Oaks II Associates, L.P. | 0.01% | 15 |
| ^ | The Oaks II Associates, L.P. | 99.99% | 15 |
| | Fletcherville Estates, L.L.C. | 100% | 39 |
| | Foothills Housing Property Management, L.L.C. | 100% | - |

FHC is sole member of Foothills Housing Property Management, L.L.C. (FHPM). This entity was created to manage FHC's real estate investments.

^ Indicates FHC has multiple ownership interests in the same property.

Note 5: **Accounts Receivable**

FHC has entered into a long term contract with the Virginia Department of Housing and Community Development (DHCD) to act as a program administrator for the state funded Indoor Plumbing Rehabilitation Program (IPR), Indoor Plumbing Rehabilitation - Program Income Loans (IPR-PI), and Emergency Home and Accessibility Repair Program (EHARP). FHC reviews applications, manages repair and installation of work performed under programs, and administers the repayment of the project and program loans. As of December 31, 2018, the following receivables are outstanding:

| Program | Balance 12/31/2018 |
|---|---|
| Indoor Plumbing Program | $ 113,921 |
| Indoor Plumbing Program - Program Loans | 135,906 |
| Tenant Receivable | 1,602 |
| | $ 251,429 |

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**NOTES TO FINANCIAL STATEMENTS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**
**(CONTINUED)**

Note 6: **Notes Receivable**

Foothills Housing Corporation has the following receivables due from the low-income housing projects it controls. The notes from Oaks Springs Associates, L.L.C. has been eliminated during consolidation.

| | | Balance 12/31/2018 |
|---|---|---|
| * | Oaks Springs Associates, L.L.C (1) | $ 3,157,547 |
| * | Oaks Springs Associates, L.L.C (2) | 155,512 |
| * | The Oaks II Associates, L.P. (1) | 618,503 |
| | | $ 3,931,562 |

* Note has been Eliminated

* The Oaks Springs Associates, L.L.C (1) note accrues interest at a rate of 10% annually. This note will be repaid from available cash flow from operations. Principal plus all unpaid interest is due to the Foothills Housing Corporation upon the earlier of 90 days following the expiration of the compliance period or the sale, conveyance, or refinancing of the project. The compliance period end September 1, 2011. As of December 31, 2018, the note remains outstanding.

* The Oaks Spring Associates, L.L.C (2) note accrues interest at a rate of 5% annually. This note will be repaid from available cash flow from operations. Principal balance of this note plus all unpaid accrued interest is payable upon the earlier of 90 days following the expiration of the compliance period or the sale, conveyance, or refinancing of the project. The compliance period ended September 1, 2011. As of December 31, 2018, the note remains outstanding.

* The Oaks II Associates, L.P. has a $223,375 note at 7% interest payable to Foothills Housing Corporation. Payments on this note, including accrued interest, are paid from cash flow from operations with the entire balance due on the tenth anniversary of the placement-in-service date of the Oaks II Apartments (December 1, 2011) or the sale of the project. At December 31, 2018, the note balance with accrued interest was $618,503.

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**NOTES TO FINANCIAL STATEMENTS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**
**(CONTINUED)**

Note 7: **Fixed Assets**

Changes in Fixed Assets:

A summary of Foothills Housing Corporation and Affiliates fixed assets at December 31, 2018, is as follows:

| | Balance 1/1/2018 | Additions | Sales and Retirements | Balance 12/31/2018 |
|---|---|---|---|---|
| Land | $ 1,325,800 | $ 1,100,000 | $ - | $ 2,425,800 |
| Land Improvements | 79,916 | 9,644 | - | 89,560 |
| Building | 9,832,744 | 1,427,300 | - | 11,260,044 |
| Fixtures and Equipment | 797,535 | 6,363 | - | 803,898 |
| | $ 12,035,995 | $ 2,543,307 | $ - | $ 14,579,302 |

Changes in Accumulated Depreciation:

| | Balance 1/1/2018 | Current Provision | Balance 12/31/2018 | Net Balance 12/31/2018 |
|---|---|---|---|---|
| Land | $ - | $ - | $ - | $ 2,425,800 |
| Land Improvements | 68,286 | 4,709 | 72,995 | 16,565 |
| Building | 4,840,511 | 248,045 | 5,088,556 | 6,171,488 |
| Fixtures and Equipment | 576,616 | 30,369 | 606,985 | 196,913 |
| | $ 5,485,413 | $ 283,123 | $ 5,768,536 | $ 8,810,766 |

Note 8: **Reserves and Escrows**

Funded reserves and escrow deposits as required per debt convents and partnership agreements and as of December 31, 2018, the respective balances are as follows:

| | Funded Reserves | Escrows | Balance 12/31/2018 |
|---|---|---|---|
| Oaks Springs Associates L.L.C. | $ 239,688 | $ 9,110 | $ 248,798 |
| The Oaks II Associates, L.P. | 20,415 | 3,637 | 24,052 |
| Foothills Housing Corporation | - | 1,000 | 1,000 |
| Fletcherville | - | 61,000 | 61,000 |
| | $ 260,103 | $ 74,747 | $ 334,850 |

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**NOTES TO FINANCIAL STATEMENTS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**
**(CONTINUED)**

Note 9: **Related Parties**

As of December 31, 2018, FHC had three note receivables as mentioned in Note 6 totaling $3,931,562 due from Oaks Springs L.L.C. and The Oaks II Associates, L.P., in the amounts of $3,313,059 and $618,503, respectively.

During 2018, FHC was paid a bookkeeping fee by FHPM of $50,913.

During 2018, FHPM was paid management fees of:

| | | |
|---|---|---|
| Stuart Street, L.L.C. | $ | 3,787 |
| Countryside, L.L.C. | | 3,758 |
| Oaks Springs, L.L.C. | | 44,052 |
| The Oaks II Associates, L.P. | | 8,309 |
| | $ | 59,906 |

During 2018, FHC was paid $168,000 by Oaks Springs Associates L.L.C. towards reducing the accrued interest on outstanding developer fee.

As mentioned in Note 12, The Oaks II Associates, L.P. has a long-term lease with Oaks Springs Associates, L.L.C., for the rental of the land the partnership occupies and was eliminated.

During 2016, FHC, the managing member of The Oaks II, L.L.C., advanced The Oaks II, L.L.C. $60,000. These funds are classified as long-term due to/from and eliminated. In 2018 a further $20,000 was advanced to Oaks II bringing the balance to $80,000.

On December 21, 2018, a note receivable was created between Oaks Springs Associates, LLC. and Fletcherville Estates, L.L.C., an affiliate of the sole member FHC, for the amount of $718,764. Beginning January 21, 2019, the note is to be repaid in monthly principal and interest installments of $4,033.22. Interest shall accrue on the unpaid principal balance of this note at a rate of 4.37% per annum. If not sooner paid, the entire principal balance and any unpaid interest shall be due and payable on maturity date, December 21, 2023.

During 2018, a real estate deposit of $125,000 was placed into Fletcherville Estates, L.L.C. by Foothills Housing Corporation, for the purposes of establishing the entity. These funds are classified as long-term due to/from and eliminated.

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**NOTES TO FINANCIAL STATEMENTS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**
**(CONTINUED)**

Note 10: **Notes Payable**

As of December 31, 2018, Foothills Housing Corporation and its Affiliates had the following notes outstanding after elimination(*):

| | Balance 12/31/2018 |
|---|---|
| Stuart Street L.L.C. - UFMB | $ 625,344 |
| Countryside Associates L.L.C. - UFMB | 532,700 |
| Foothills Housing Corporation - UFMB - 2 | 124,477 |
| Oaks Spring Associates, L.L.C. (1) | 2,808,666 |
| Oaks Spring Associates, L.L.C. (2) | 1,270,000 |
| The Oaks II Associates, L.P. (1) | 80,000 |
| The Oaks II Associates, L.P. (2) | 463,248 |
| Fletcherville Estates, L.L.C. - VCC | 2,000,000 |
| | $ 7,904,435 |

Note 9: **Notes Payable (Continued)**

Foothills Housing Corporation has permanent financing with Union First Market Bank. The Loan is secured by a deed of trust over Countryside L.L.C. and Stuart Street L.L.C. On February 6, 2015, FHC refinanced the mortgages on two of the low income housing properties. The refinance Note to Union First Market Bank (Union) in the amount of $1,275,000. The note payable is due February 2020 and bears interest at 4.35% per annum. The note requires monthly payments of $7,023 until maturity and a final payment of $1,125,540 upon maturity. The note at December 31, 2018, is reflected in the liabilities for Stuart Street, L.L.C. as $625,344 and Countryside Associates, L.L.C. $532,700.

Foothills Housing Corporation also holds a $200,000 line of credit with Union First Market Bank (UFMB-2) and bears interest at the interest rate of 4.5%. FHC is required to make monthly interest only payments on the Line of Credit. Balance at December 31, 2018, was $124,477. The line is intended for development projects expenses with repayment taken out of proceeds once projects are finalized. A draw-down of $125,000 was used as a real estate deposit from Fletcherville Estates, L.L.C. and is due from the affiliate, as discussed in Note 9.

The Oak Spring Associates, L.L.C. (1) Virginia Housing Development Authority note was refinanced in March 2016. There finance included a $350,000 increase to the note bringing the original balance to $2,976,150 and reduced the interest rate from 7.107% to 5.38% per annum. Also, the maturity date of the new refinanced loan was extended from April 2036 to March 2041. Payments of principal plus interest of $18,063 are due monthly until maturity.

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**NOTES TO FINANCIAL STATEMENTS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**
**(CONTINUED)**

Note 10: **Notes Payable (Continued)**

The Oaks Springs Associates, L.L.C. (2) Community Capital Bank (VCCI) Mortgage was assumed on December 21, 2018, and is secured by a Deed of Trust on the Project. The note bears interest at 4.37% per annum and requires monthly payments including principal and interest of $7,011.36 until December 21, 2023, at which time the outstanding balance of the note and any accrued interest shall be due in full.

The Oaks II Associates, L.P. (1) Wrinkle-In-Time Foundation note is originally for $200,000, at a stated interest rate of 8%. This note is payable in quarterly payments of $2,750, interest only. Principal and accrued interest were due on December 31, 2016. Effective in October 2004, the partnership was eligible for a five year interest rate reduction from 8% to 5.5%. During 2014, the interest rate reduction was extended till maturity and the note accrues interest at the reduced rate of 5.5%. In December 2016 half the note ($100,000) was paid. On January 1, 2017, $20,000 was forgiven from the note with the remaining $80,000 owed to remain at 5.5% interest until maturity. Interest of $1,100 will continue to be paid quarterly in 2019.

The Oaks II Associates, L.P. (2) Virginia Housing Partnership Revolving Fund mortgage is originally for $750,000 and 5% interest rate. This note is payable in 360 monthly installments of $4,026.17, beginning in January 2002. This mortgage is secured by Deed of Trust.

The Fletcherville Estates, L.L.C. Community Capital Bank (VCCI) Mortgage was assumed on December 21, 2018, and is secured by a Deed of Trust on the Project. The note bears interest at 5.00% per annum, the first six months of the note are interest only drawing on an interest escrow of $61,000. Thereafter monthly principal and interest payments for 30 months based on a 25 year amortization schedule. The remaining principal due on maturity December 21, 2021.

Principal payments for the next five years are as follows:

| Year | Amount |
|---|---|
| 2019 | $ 381,815 |
| 2020 | 1,294,184 |
| 2021 | 2,072,602 |
| 2022 | 142,252 |
| 2023 | 1,259,916 |
| Remaining | 2,753,666 |
| | $ 7,904,435 |

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**NOTES TO FINANCIAL STATEMENTS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**
**(CONTINUED)**

Note 11: **Interest Cost**

The total interest cost incurred during the year ended December 31, 2018, was $281,675.

Note 12: **Long Term Lease**

The Oaks II Associates, L.P. has a long-term lease with Oaks Springs Associates, L.L.C., for the rental of the land the partnership occupies. The lease calls for sixty annual payments of $1,666.67, commencing on December 31, 2000. The lease also calls for an interest rate of 7% to be accrued on the outstanding balance. At December 31, 2018, the outstanding balance of the lease was $82,000 and the accrued interest was $100,652. The accrued interest receivable of $100,652 is a doubtful debt on Oaks Springs Associates, L.L.C. books and is offset by an allowance shown in the financials as an elimination of Net Assets Without Donor Restriction.

Note 13: **Current Vulnerability Due to Certain Concentrations**

The Organization's operations are concentrated in the multifamily real estate market. In addition, the Organization operates in regulated environment. The operations of the Organization are subject to administrative directives, rules, and regulations of federal and state regulatory agencies. Such administrative directives, rules, and regulations are subject to change.

Note 14: **Commitments and Contingencies**

Both Oaks Springs Associates and Oaks II are subject to an Extended Use Agreement with VHDA restricting unit rents.

Note 15: **Subsequent Events**

Management has evaluated subsequent events through October 29, 2019.

**FOOTHILLS HOUSING CORPORATION AND AFFILIATES**
**NOTES TO FINANCIAL STATEMENTS**
**FOR THE YEAR ENDED DECEMBER 31, 2018**
**(CONTINUED)**

Note 16: **Risk and Uncertainties**

The Organization maintains its cash in financial institutions insured by the Federal Deposit Insurance Corporation (FDIC). Deposit amounts, at times, may exceed federally insured limits. The Organization has not experienced any losses in such accounts and believes it is not exposed to any significant credit risk on cash and cash equivalents.

Note 17: **Net Assets With Donor Restriction**

| Type of Restriction | Balance 12/31/2018 |
|---|---|
| Grant Income - IPR | $ 204,956 |
| | $ 204,956 |

Until 2017 FHC managed region four of the Indoor Plumbing Rehabilitation Program (IPR) for the Department of Housing and Community Development. During 2017 FHC voluntarily withdrew from actively managing the program due to new program constraints. The revenues received from managing the IPR program are designated as with donor restriction until used for other community development programs or loans. When funds are used as authorized by DHCD they are released from net assets with donor restriction and recognized as current revenue and expenses. At December 31, 2018, FHC had a Net Assets with Donor Restriction balance of $204,956 and Restricted Cash of $94,420.

Note 18: **Change in Accounting Principle**

In August 2016, FASB issued ASU 2016-14, Not-for-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities (the "Standard"). The Standard was adopted in 2018 and applied on a retrospective basis to the financial statements presented in this annual financial report. The following changes to the financial statement presentation have been incorporated to implement provisions of this Standard. As of January 1, 2018, net assets of $225,270 previously reported as temporarily restricted are now reported as net assets with donor restrictions. The Standard also required an analysis of expenses by both natural and functional expense categories to be provided in one location. The Organization has elected to present this information as a statement of functional expenses. In addition, enhanced disclosures about liquidity and availability of resources have been added.

IRS Department of the Treasury
Internal Revenue Service

OGDEN UT 84201-0029

In reply refer to: 4077591934
Apr. 28, 2016 LTR 4168C 0
54-1128998 000000 00
00068961
BODC: TE

FOOTHILLS HOUSING CORPORATION
47 GARRETT ST STE 205
WARRENTON VA 20186-3118

011781

Employer ID Number: 54-1128998
Form 990 required: YES

Dear Taxpayer:

This is in response to your request dated Apr. 06, 2016, regarding A NAME CHANGE

We issued you a determination letter in SEPTEMBER 1994, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

Our records also indicate you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If a return is required, you must file Form 990, 990-EZ, 990-N, or 990-PF by the 15th day of the fifth month after the end of your annual accounting period. IRC Section 6033(j) provides that, if you don't file a required annual information return or notice for three consecutive years, your exempt status will be automatically revoked on the filing due date of the third required return or notice.

For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).

If you have questions, call 1-877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific Time).

4077591934
Apr. 28, 2016 LTR 4168C 0
54-1128998 000000 00
00068962

FOOTHILLS HOUSING CORPORATION
47 GARRETT ST STE 205
WARRENTON VA 20186-3118

Sincerely yours,

Jeffrey I. Cooper
Director, EO Rulings & Agreement

INTERNAL REVENUE SERVICE
DISTRICT DIRECTOR
31 HOPKINS PLAZA
BALTIMORE, MD 21201

DEPARTMENT OF THE TREASURY

Date:
SEP 12 1994

FAUQUIER HOUSING CORPORATION
PO BOX 357
WARRENTON, VA 22186-0357

Employer Identification Number:
54-1128998
Case Number:
524237022
Contact Person:
MRS. S. PRATT
Contact Telephone Number:
(410) 962-9431
Accounting Period Ending:
December 31
Form 990 Required:
Yes
Addendum Applies:
Yes

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of $100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment, or other Federal taxes, please let us know.

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(1) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(1) organization.

Donors may deduct contributions to you as provided in section 170 of the

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE:** **January 13, 2020**

| **IDENTIFICATION** | |
|---|---|
| *Organization/Agency Name*: | Aging Together |
| *Street Name:* | 1835 Industry Drive |
| *Mailing Address:* | PO Box 367, Culpeper, VA 22701 |
| *Agency Contact:* | Ellen Phipps |
| *Telephone Number:* | 540-829-6405 |
| *E-mail Address – Agency Contact* | ephipps@agingtogether.org |
| *Agency's Web Address:* | www.agingtogether.org |
| *Federal Tax ID#:* | 46-204659 |
| *Audit:* | ☐Yes x☐No |

**PURPOSE/NARRATIVE**

**The Mission** of Aging Together is, through partnerships to connect people to communities and resources to improve quality of life as we age. Our Vision is for age-friendly communities that actively engage, support, and value older adults.

**OUR 3-YEAR STRATEGIC PLAN INCLUDES THE FOLLOWING GOALS FOR 2020-2023:**

1. TO SUPPORT HEALTH, SAFETY AND QUALITY OF LIFE FOR OLDER ADULTS AND THEIR FAMILIES
2. TO PROMOTE THE VALUE THAT OLDER ADULTS BRING TO THE COMMUNITY AND TO CREATE OPPORTUNITIES FOR FULL ENGAGEMENT WITH ALL AGES
3. TO CHAMPION COMMUNITY RESPONSE TO THE CHALLENGES FACING OLDER ADULTS

*Experience and Accomplishments: :* Aging Together has over 150 community partners including individuals and organizations dedicated to improving the lives of older adults and their families, as well as caregivers. We were established in 2003 and became our own 501-c-3 in 2013. Aging Together implements local programs and activities through the Madison Aging Together Team. Team members include caregivers, home care providers, and representatives of local community resources, such as DSS and the Senior Center, faith-based organizations, etc. Aging Together participates in Madison Non-Profit Council and, Madison MUNCH – Madison United in Nutrition, Community and Health to provide a Mobile Food Pantry in Madison County. Aging Together also conducts regional programs encompassing Madison, Culpeper, Orange, Rappahannock and Fauquier Counties.

Aging Together's Madison Team continues to provide educational workshops and community events for Madison County residents. In January 2020 we will be hosting the Dementia Friends sessions in each county, including Madison. This program is free and open to the public and helps to raise of awareness of Dementia and what friends and neighbors can do to help if they notice signs or symptoms. The Madison Team co-chair is Peggy Hobbs with Skyline Cap. Valerie Ward, Madison County Department of Social Services Director, is on Aging Together's Board of Directors.

Aging Together orchestrates four regional events each year that are heavily promoted to Madison County seniors and caregivers: "Five Over Fifty" awards program (last year's recipient was Max Lacy) Senior-Senior Prom; Workshop or Conference for Caregivers of those with Dementia; and the Art of Aging Expo.

*Benefits of Funding:* The 2010 US census documented the increase in older adults living in Madison County. According to Weldon Cooper projections, 30% of the Madison population will be over age 60 by the year 2020 and by 2030 that percentage is expected to increase to 34%. While the general population is projected to increase only 5% in Madison County, those 60+ are predicted to increase by almost 20%. On top of that, many Madison seniors live in isolated areas with little access to assistance from neighbors or family. It is imperative that these elders be made aware of community services that could help them age in their homes, safely and in good health.

With the funds requested from the County, Aging Together will be able to address these needs:

1. Support, education and training for family caregivers. More than 80% of all caregiving for frail senior citizens is done by relatives, most of whom also work outside the home.

There is a real need to support both these unpaid workers as well as their employers who are feeling the impact of stressed and stretched employees on their productivity.

2. No one organization has the resources to address all the needs of senior citizens or caregivers. Aging Together provides a collaborative framework that has and will continue to benefit many needed resources in Madison County. Aging Together has helped to create, currently convenes, or currently participates in numerous partnerships that have brought new funding and new programs into the County and Planning District 9 regionally. Over its history, we have brought more than $2 million in new dollars in to our territory. In 2018 we formed an exciting relationship with AARP-VA which will continue to bring new dollars and relationships as well.

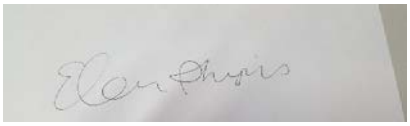
*Intention of Use:* Funds will be used to help implement the new Strategic Plan. Aging Together adopted the three-year Strategic Plan for 2020-2023, informed by the Community Conversations Needs Assessment of 2018-2019 (Community Conversations). The Community Conversation's identified common themes across the board in all 5 counties (Culpeper, Madison, Fauquier, Rappahannock, Orange). The topics identified were access to food; transportation; affordable housing – including long-term care options; social isolation; caregiver support; and understanding of dementia. The Aging Together team has joined forces with other groups in Madison County to address access to food and is working closely with MUNCH to help launch the Mobile Food Pantry in the Spring of 2020. The Madison County team is also exploring legislative issues that impact older adults and forming an advocacy group to help address important issues. Aging Together continues to provide opportunities for education to caregivers and the general public. Other activities include: Aging Together will hold its regional "Art of Aging Expo" on October 6, 2020 with a possible "mini expo" in Madison County before hand – the expo is a free event for older adults and caregivers with exhibitors, classes, demonstrations, giveaways and much more. 2019's event hosted 668 attendees from our five counties. It is held at Germanna Community College's Daniel Technology Center since that is easily accessible, plenty of parking, and central to our territory. In 2019, the Madison Senior Center participants were bussed in by the RRCS vehicle.

In the area of **caregiving**, Aging Together, as part of a consortium known as the Piedmont Dementia Education Committee, will host its fourth annual caregiver's conference (Live Webinar) on April 3rd, 2020, with Teepa Snow, internationally known expert in dementia care. Grant funds have been received to keep the cost low to attendees and scholarships are available for those not able to pay the fee. When Ms. Snow came in previous years, we have had more than 400 attenddees. The Live Webinar will offer an opportunity for caregivers and professional workers to attend without leaving home or place of work.

In the area of **outreach**, we are exploring the idea of creating a "rack" card or other brochure type to provide printed materials of important phone numbers for seniors. The item will be made available in as many public places as possible. We will continue to work with faith community leaders, medical offices, government leaders and others to ensure that they are adequately equipped to serve and provide seniors with appropriate and accurate referrals to community resources, such as long-term care facilities, home care agencies, home-delivered meals, etc. We will also publicly recognize and honor the contributions of Madison County older adults in a variety of ways, including our "Five Over Fifty" Award Ceremony held each

spring. We have not chosen the 2020 award winner yet, but several worthy candidates have been nominated.
In the area of **social isolation,** Aging Together will continue its annual, regional "Senior-Prom" to engage seniors and promote awareness (via the media) of the vibrant and active senior population we have in Madison County and the rest of our region.

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>x ☐ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 5000.00 |

Signature: __  _____Executive Director Title:
_____

Printed Name: Ellen Phipps Date: 1/5/2020

AGING TOGETHER
five communities creating choices

# MADISON COUNTY FY'21 FUNDING APPLICATION ADDENDUM

**COPY of most recent financial statements:** attached

**Most recent IRS form 990ez:** attached

**IRS Letter of Exemption:** attached

**Date of Fiscal Year End:** June 30th

**Proposed revenues & expenses for 2021:** Our Board of Directors will not put together the budget for FY'2021 until May, 2020. However, we do not expect our revenue or expenses to increase or decrease by more than 5%.

**YTD budgeted revenue and expenses for 2019:** attached

**Actual revenues and expenses for 2019:** see above, attached, most recent financial statements

**ANALYSIS OF CLIENTS SERVED FOR 2019 (ACTUAL):** approx. 2,000 for entire five-county region

**PROJECTED FOR 2020:** approx. 2,500

**PROJECTED FOR 2021:** approx. 3,000

It is virtually impossible for us to know how many clients live in each of our localities since virtually all our programs are free and open to the public and we don't require sign-ins for our large events, such as Senior Prom and Art of Aging Expo. We have just recently implemented a sign in system and strive to capture these numbers in future. We also have no way to delete duplicates.

We arrived at our number for 2019 by adding attendance at all events across all counties. We are building infrastructure and seek to expand our services to grow by reaching 3000 people by 2021.

**AGING TOGETHER LIST OF FUNDING SOURCES EACH LOCALITY -requested for 2021**

Culpeper County - $2500

Madison County - $3000

Rappahannock County - $7500

Fauquier County DSS - $1200

Orange County - $5000

In-kind office space, photo copy, phones – Culpeper Human Services - $30,000

**RAPPAHANNOCK JUVENILE CENTER**
**Draft Revenue Source - FY 2020 - 2021**

| | | |
|---|---|---|
| **Budget Expenses** | | **$ 7,953,241** |
| **Sources of Revenue:** | | |
| DJJ Block Grant | $ 1,587,900 | |
| Net DJJ Block Grant | | $ 1,587,900 |
| **Misc. Revenue/Other Funding Sources:** | | |
| USDA Fund Transfer | | $ 75,000 |
| Community Placement Program | | $ 1,400,000 |
| Estimated Interest | | $ 40,000 |
| Estimated Per Diem - Non Jurisdictional | | $ 24,000 |
| Total Misc. Rev./Other Funding Sources: | | $ 1,539,000 |
| **Use of RJC Fund Balance:** | | |
| Capital Equipment Repair/Replacement | $ 420,000 | |
| Bonus/Incentive | $ 65,000 | |
| Contingency | $ 300,000 | |
| Total RJC Funding | | $ 785,000 |
| Sub-Total | | $ 3,911,900 |
| **Locality Revenues:** | | |
| Grand Total Revenue less DJJ, RJC | $ 4,041,341 | |
| Total Locality Revenues | | $ 4,041,341 |
| **Grand Total Revenue** | | **$ 7,953,241** |

| | | | |
|---|---|---|---|
| **FREDERICKSBURG - CCD = 2485** | | | |
| Appropriations | 10.578% | $ | 427,493 |
| | | $ | - |
| TOTAL | | $ | 427,493 |
| **KING GEORGE - CCD = 1425** | | | |
| Appropriations | 6.066% | $ | 245,148 |
| | | $ | - |
| TOTAL | | $ | 245,148 |
| **LOUISA - CCD = 961** | | | |
| Appropriations | 4.091% | $ | 165,331 |
| | | $ | - |
| TOTAL | | $ | 165,331 |
| **MADISON - CCD = 610** | | | |
| Appropriations | 2.597% | $ | 104,954 |
| | | $ | - |
| TOTAL | | $ | 104,954 |
| **ORANGE - CCD = 1334** | | | |
| Appropriations | 5.679% | $ | 229,508 |
| | | $ | - |
| TOTAL | | $ | 229,508 |
| **SPOTSYLVANIA - CCD = 7601** | | | |
| Appropriations | 32.356% | $ | 1,307,616 |
| | | $ | - |
| TOTAL | | $ | 1,307,616 |
| **STAFFORD - CCD = 9076** | | | |
| Appropriations | 38.633% | $ | 1,561,291 |
| | | $ | - |
| TOTAL | | $ | 1,561,291 |
| Grand Total | 100.000% | **$** | **4,041,341** |

**RAPPAHANNOCK JUVENILE CENTER**

**DRAFT BUDGET WORKSHEET - FY 2020-2021**

| | | EXPENSE CATEGORY | FY 2016 - 2017 BUDGET | FY 2016 - 2017 ACTUAL | FY 2017 - 2018 BUDGET | FY 2017 - 2018 ACTUAL | FY 2018 - 2019 BUDGET | FY 2018 - 2019 ACTUAL | FY 2019 - 2020 BUDGET | FY 2019 - 2020 ACTUAL 12/31/19 | Budget FY 2020- 2021 | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | A | ***SALARY & BENEFITS*** | | | | | | | | | | |
| 10-5105 | 1 | ***Salaries*** | $ 3,435,465 | $ 3,371,111 | $ 3,643,555 | $ 3,422,311 | $ 3,718,916 | $ 3,798,614 | $ 4,162,116 | $ 2,069,473 | $ 4,305,009 | 2.5% COLA -2 positions |
| | | | | | | | | | | | | 1.3% Compression |
| | 2 | ***Additional Wages*** | | | | | | | | | | 1.5 Bonus 65000.00 |
| 10-5111 | | a. Overtime | $ 40,000 | $ 15,980 | $ 40,000 | $ 28,122 | $ 30,000 | $ 56,826 | $ 40,000 | $ 19,211 | $ 40,000 | |
| 10-5115 | | b. Part Time | $ 10,000 | $ 60,441 | $ 25,000 | $ 39,913 | $ 50,000 | $ 64,534 | $ 30,000 | $ 28,014 | $ 50,000 | |
| 10-5120 | | c. Holiday | $ - | | | | | | | | | |
| 10-5121 | | d. Termination | $ - | $ 10,148 | | $ 27,714 | | $ 34,629 | | $ 18,141 | | |
| 10-5125 | | e. Opt Out Health Ins | $ 34,000 | $ 23,500 | $ 32,000 | $ 24,750 | $ 26,000 | $ 28,250 | $ 28,000 | $ 13,375 | $ 28,000 | |
| | | SUBTOTAL WAGES | $ 3,519,465 | $ 3,481,180 | **$ 3,740,555** | **$ 3,542,810** | **$ 3,824,916** | **$ 3,982,853** | **$ 4,260,116.00** | **$ 2,148,214** | **$ 4,423,009.00** | |
| | 3 | ***Benefits*** | | | | | | | | | | |
| 10-5136 | | PCORI FEE | | $ 200 | | | $ 300 | $ 215 | $ 300 | $ 300 | $ 300 | |
| 10-5145 | | a. FICA | $ 218,207 | $ 211,411 | $ 231,914 | $ 215,863 | $ 237,145 | $ 243,199 | $ 264,127 | $ 133,189 | $ 274,227 | |
| 10-5147 | | b. Medicare | $ 51,032 | $ 49,443 | $ 54,238 | $ 50,484 | $ 55,461 | $ 56,878 | $ 61,772 | $ 31,149 | $ 64,134 | |
| 10-5150 | | c. VRS Retirement | $ 178,988 | $ 172,023 | $ 189,829 | $ 174,804 | $ 156,566 | $ 157,895 | $ 175,225 | $ 111,922 | $ 216,111 | |
| 10-5153 | | d. VRS Health Credit | $ 6,184 | $ 6,935 | $ 7,651 | $ 7,052 | $ 7,810 | $ 8,879 | $ 9,989 | $ 5,156 | $ 12,054 | |
| 10-5155 | | e. VRS Group Life | $ 45,005 | $ 43,261 | $ 47,731 | $ 44,040 | $ 48,718 | $ 48,618 | $ 54,524 | $ 28,142 | $ 57,687 | |
| 10-5158 | | f. VRS / ING - 457b Match | $ 16,000 | $ 15,887 | $ 16,000 | $ 15,988 | $ 16,000 | $ 15,864 | $ 16,000 | $ 7,430 | $ 16,000 | |
| 10-5160 | | g. Health Insurance | $ 560,000 | $ 520,064 | $ 600,000 | $ 541,084 | $ 575,000 | $ 661,612 | $ 705,000 | $ 338,698 | $ 720,000 | +5% cannot confirm til Feb |
| 10-5165 | | h. Workers' Compensation | $ 80,000 | $ 75,148 | $ 90,000 | $ 70,450 | $ 80,000 | $ 63,208 | $ 75,000 | $ 80,556 | $ 95,000 | |
| 10-5167 | | i. Retiree Health Care | $ 19,000 | $ 8,418 | $ 19,000 | $ 9,105 | $ 10,000 | $ 9,660 | $ 10,000 | $ 4,830 | $ 11,000 | |
| 10-5169 | | j. VA Corp Hybrid Short Term Disability | $ 4,000 | $ 5,656 | $ 8,000 | $ 6,155 | $ 8,000 | $ 8,102 | $ 8,000.00 | $ 4,223 | $ 8,500.00 | |
| 10-5170 | | k. Employee Physicals & Background | $ 500 | $ 100 | $ 500 | $ 150 | $ 500 | $ 350 | $ 200 | $ 100 | $ 300 | |
| 10-5180 | | l. VEC Unemployment Reimbursement | | | | $ 2,136 | | $ 4,136 | | | | |
| | | SUBTOTAL BENEFITS | $ 1,178,916 | $ 1,108,546 | $ 1,264,864 | $ 1,137,311 | $ 1,195,500 | $ 1,278,401 | $ 1,380,137 | $ 745,395 | $ 1,475,313 | |
| | | **TOTAL SALARY EXPENSE** | **$ 4,698,381** | **$ 4,589,726** | **$ 5,005,419** | **$ 4,680,121** | **$ 5,020,416** | **$ 5,261,254** | **$ 5,640,253** | **$ 2,893,609** | **$ 5,898,322** | |
| | B | ***OPERATING EXPENSES*** | | | | | | | | | | |
| | 1 | ***Commission*** | | | | | | | | | | |
| 10-5305 | | a. Legal | $ 22,500 | $ 21,000 | $ 25,235 | $ 21,000 | $ 25,235 | $ 24,000 | $ 25,000 | $ 12,000 | $ 25,625 | 2.5 % increase |
| 10-5310 | | b. Misc. Expenses | $ 1,000 | $ 668 | $ 1,000 | $ 926 | $ 1,000 | $ 1,042 | $ 1,000 | $ 963 | $ 1,000 | |
| | 2 | ***Cost of Operations*** | | | | | | | | | | |
| 10-5355 | | a. Property Lease - Regional Jail | $ 6,000 | $ 6,000 | $ 6,000 | $ 6,000 | $ 6,000 | $ 6,000 | $ 6,000 | $ 6,000 | $ 6,000 | |
| 10-5360 | | b. Admin. Fee - Regional Jail | $ 8,000 | $ 8,029 | $ 13,700 | $ 8,110 | $ 13,700 | $ 8,227 | $ 10,000 | $ 3,305 | $ 9,000 | |
| 10-5365 | | c. Host Fee - Stafford County | $ 40,000 | $ 40,000 | $ 40,000 | $ 40,000 | $ 40,000 | $ 40,000 | $ 40,000 | $ 20,000 | $ 40,000 | |
| | 3 | ***Equipment*** | | | | | | | | | | |
| 10-5410 | | Furn, Fix,Sm Equip.Purchase/replace | $ 22,500 | $ 27,363 | $ 24,000 | $ 37,713 | $ 24,000 | $ 22,623 | $ 30,000 | $ 17,918 | $ 30,000 | |
| | 4 | ***Food Service*** | | | | | | | | | | |
| 10-5455 | | a. Meals - Regional Jail | $ 245,000 | $ 201,078 | $ 155,600 | $ 140,899 | $ 159,490 | $ 149,178 | $ 216,646 | $ 44,657 | $ 200,000 | |
| | | b. Meals, Snacks, Incentives | | | $ 90,000 | $ 57,040 | $ 70,000 | $ 68,355 | $ 70,000 | $ 65,613 | $ 80,000 | |
| 10-5460 | | c. Kitchen Supplies - In House | $ 2,000 | $ 2,408 | $ 2,000 | $ 4,431 | $ 2,000 | $ 5,726 | $ 2,000 | $ 3,381 | $ 3,000 | |
| | 5 | ***Insurance*** | | | | | | | | | | |
| 10-5505 | | a. Bldg/Auto/Bonding/VML | $ 21,000 | $ 15,092 | $ 21,000 | $ 15,494 | $ 19,000 | $ 17,064 | $ 20,000 | $ 18,908 | $ 20,000 | |
| 10-5515 | | b. Va. Risk - General Liability | $ 5,000 | $ 4,003 | $ 5,000 | $ 4,003 | $ 5,000 | $ 4,003 | $ 5,000 | $ 4,003 | $ 5,000 | |
| 10-5550 | 6 | ***Janitorial Supplies*** | $ 45,000 | $ 37,672 | $ 45,000 | $ 38,276 | $ 40,000 | $ 42,857 | $ 45,000 | $ 19,392 | $ 45,000 | |
| | 7 | ***Laundry*** | | | | | | | | | | |
| 10-5605 | | a. Services - Regional Jail | $ 7,800 | $ 7,896 | $ 8,100 | $ 7,658 | $ 8,303 | $ 1,781 | $ 8,000 | $ - | $ 2,500 | |
| 10-5610 | | b. Supplies - In House | $ 2,000 | $ 236 | $ 2,000 | $ 990 | $ 1,700 | $ 1,427 | $ 6,000 | $ 623 | $ 2,500 | |

**RAPPAHANNOCK JUVENILE CENTER**

**DRAFT BUDGET WORKSHEET - FY 2020-2021**

| | | EXPENSE CATEGORY | FY 2016 - 2017 BUDGET | FY 2016 - 2017 ACTUAL | FY 2017 - 2018 BUDGET | FY 2017 - 2018 ACTUAL | FY 2018 - 2019 BUDGET | FY 2018 - 2019 ACTUAL | FY 2019 - 2020 BUDGET | FY 2019 - 2020 ACTUAL 12/31/19 | Budget FY 2020- 2021 | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 8 | ***Maintenance Building/Grounds*** | | | | | | | | | | |
| 10-5655 | | a. Service Agreements/Inspections | $ 45,000 | $ 41,276 | $ 54,000 | $ 52,888 | $ 58,000 | $ 54,691 | $ 58,000 | $ 35,905 | $ 62,000 | |
| 10-5660 | | b. Maintenance (Grounds) | $ 5,000 | $ 4,002 | $ 7,600 | $ 4,742 | $ 5,000 | $ 5,641 | $ 5,000 | | $ 5,000 | |
| 10-5665 | | c. Trash Removal | $ 7,000 | $ 4,997 | $ 5,580 | $ 5,133 | $ 5,700 | $ 5,136 | $ 5,700 | $ 2,646 | $ 5,500 | |
| 10-5670 | | d. Supplies | $ 20,000 | $ 20,628 | $ 20,000 | $ 14,014 | $ 20,000 | $ 20,159 | $ 20,000 | $ 3,986 | $ 20,000 | |
| | 9 | ***Medical Service*** | | | | | | | | | | |
| 10-5705 | | a. Professional Fees - Physician | $ 54,739 | $ 53,009 | $ 56,000 | $ 54,069 | $ 56,000 | $ 54,070 | $ 56,000 | $ 22,529 | $ 55,000 | |
| 10-5720 | | b. Medicines & Supplies | $ 6,000 | $ 4,245 | $ 5,000 | $ 4,881 | $ 5,000 | $ 4,259 | $ 5,000 | $ 2,346 | $ 5,000 | |
| 10-5725 | | c. Referrals/Hospital/Labs | $ 3,500 | $ 2,362 | $ 2,000 | $ 8,832 | $ 3,500 | $ 10,703 | $ 6,000 | $ 7,172 | $ 6,000 | |
| 10-5755 | 10 | ***Miscellaneous*** | $ 3,000 | $ 3,576 | $ 3,500 | $ 1,820 | $ 3,000 | $ 3,920 | $ 3,000 | $ 2,979 | $ 3,000 | |
| | 11 | ***Office Supplies*** | | | | | | | | | | |
| 10-5805 | | a. Contracts & Services Office Equip. | $ 9,000 | $ 10,253 | $ 11,000 | $ 13,554 | $ 12,000 | $ 12,823 | $ 14,000 | $ 4,057 | $ 14,000 | |
| 10-5820 | | b. Accounting Fees & Contracts | $ 24,500 | $ 24,310 | $ 24,000 | $ 25,681 | $ 24,000 | $ 23,127 | $ 27,000 | $ 22,009 | $ 27,000 | |
| 10-5825 | | c. Supplies | $ 18,000 | $ 17,596 | $ 18,000 | $ 18,135 | $ 18,000 | $ 20,408 | $ 18,000 | $ 9,103 | $ 18,000 | |
| 10-5826 | | d. Fiscal Software Support | $ 9,200 | $ 8,792 | $ 9,200 | $ 8,875 | $ 12,000 | $ 15,163 | $ 12,000 | | $ 15,200 | |
| | 12 | ***Residential Programs*** | | | | | | | | | | |
| 10-5855 | | a. Education | $ - | $ 413 | | | | | | | | |
| 10-5860 | | b. Post Dispositional Program | $ 2,000 | $ 905 | $ 2,000 | $ 1,174 | $ 2,000 | $ 306 | $ 2,000 | $ 289 | $ 1,000 | |
| 10-5864 | | d. CPP Program | $ 5,000 | $ 6,304 | $ 8,000 | $ 10,871 | $ 10,000 | $ 17,989 | $ 12,000 | $ 3,907 | $ 15,000 | |
| 10-5865 | | e. Recreation | $ 2,000 | $ 2,000 | $ 2,500 | $ 2,500 | $ 2,500 | $ 2,500 | $ 2,500 | $ 2,557 | $ 2,500 | |
| 10-5870 | | f. Mental Health Services | $ 43,000 | $ 41,112 | $ 44,290 | $ 41,960 | $ 45,600 | $ 41,940 | $ 45,618 | $ 17,475 | $ 45,000 | 3% COLA |
| 10-5875 | | g. Volunteers | $ 100 | $ 110 | | $ 80 | | $ 100 | | | | |
| | 13 | ***Human Resources*** | | | | | | | | | | |
| 10-5880 | | a. Employee Incentives | $ 750 | $ 2,162 | $ 750 | $ 981 | $ 1,000 | $ 980 | $ 750 | | $ 1,000 | |
| 10-5881 | | b. Recruitment | $ 2,000 | $ 82 | $ 1,500 | $ 2,407 | $ 1,000 | $ 5,754 | $ 2,500 | $ 1,578 | $ 2,500 | |
| 10-5882 | | c. Acknowledgements | $ 500 | $ 670 | $ 500 | $ 330 | $ 500 | $ 1,539 | $ 500 | $ 136 | $ 500 | |
| | 14 | ***Staff Development*** | | | | | | | | | | |
| 10-5905 | | a. Training Expenses/Fees & Tuition | $ 12,000 | $ 7,095 | $ 12,000 | $ 26,861 | $ 12,000 | $ 12,201 | $ 15,000 | $ 10,394 | $ 13,000 | |
| 10-5908 | | b. P.O.V. Mileage | $ 3,000 | $ 944 | $ 3,000 | $ 1,179 | $ 3,000 | $ 1,416 | $ 2,000 | $ 512 | $ 2,000 | |
| 10-5910 | | c. Travel Per Diems & Lodging | $ 12,000 | $ 14,399 | $ 12,000 | $ 22,099 | $ 12,000 | $ 24,547 | $ 20,000 | $ 15,765 | $ 27,000 | |
| | 15 | ***Information Systems/Tech Support*** | | | | | | | | | | |
| 10-5950 | | a. Equipment & Software Upgrades | $ 3,000 | $ 2,339 | $ 5,000 | $ 5,363 | $ 5,000 | $ 4,969 | $ 5,000 | $ 487 | $ 5,000 | |
| 10-5960 | | b. Onsite I.T. Services | $ 20,000 | $ 20,272 | $ 25,000 | $ 21,204 | $ 25,000 | $ 23,169 | $ 24,000 | $ 9,558 | $ 28,000 | 2.5 % COLA |
| | 16 | ***Transportation*** | | | | | | | | | | |
| 10-6005 | | a. Resident Transport - Regional Jail | $ 265,000 | $ 259,725 | $ 266,000 | $ 262,674 | $ 272,650 | $ 272,458 | $ 281,137 | $ 110,253 | $ 277,094 | |
| 10-6010 | | b. Vehicle Maintenance and Operation | $ 5,000 | $ 6,939 | $ 5,000 | $ 8,670 | $ 5,000 | $ 11,149 | $ 6,000 | $ 4,641 | $ 7,500 | |
| | 17 | ***Hygiene & Clothing*** | | | | | | | | | | |
| 10-6055 | | a. Resident Clothing | $ 8,000 | $ 2,511 | $ 8,000 | $ 7,731 | $ 8,000 | $ 3,378 | $ 10,000 | $ 1,670 | $ 8,000 | |
| 10-6060 | | b. Staff Uniforms | $ 8,000 | $ 12,990 | $ 8,000 | $ 11,127 | $ 12,000 | $ 16,665 | $ 15,000 | $ 5,922 | $ 20,000 | Pants included in uniform |
| 10-6065 | | c. Resident Hygiene | $ 8,000 | $ 7,909 | $ 8,500 | $ 12,004 | $ 8,500 | $ 15,962 | $ 12,000 | $ 6,131 | $ 15,000 | |
| | 18 | ***Utilities*** | | | | | | | | | | |
| 10-6105 | | a. Electric | $ 80,000 | $ 73,159 | $ 80,000 | $ 72,501 | $ 75,000 | $ 71,735 | $ 76,000 | $ 37,267 | $ 75,000 | |
| 10-6110 | | b. Natural Gas | $ 32,000 | $ 26,850 | $ 32,000 | $ 27,068 | $ 29,000 | $ 24,723 | $ 30,000 | $ 5,840 | $ 26,500 | |
| 10-6115 | | c. Water/Sewer | $ 15,000 | $ 14,064 | $ 15,000 | $ 15,762 | $ 14,500 | $ 18,976 | $ 17,000 | $ 9,294 | $ 18,000 | |
| 10-6120 | | e. Fuel Oil | $ 2,000 | | $ 2,000 | $ 1,874 | $ 1,000 | | $ 2,000 | | $ 2,000 | |
| 10-6125 | | f. Telecom/Sat. TV/email | $ 33,500 | $ 22,910 | $ 33,500 | $ 35,556 | $ 26,000 | $ 32,923 | $ 35,000 | $ 14,880 | $ 38,000 | Price increases Phone/TV |
| | | ***TOTAL OPERATING EXPENSES*** | **$ 1,194,589** | **$ 1,092,355** | **$ 1,229,055** | **$ 1,187,140** | **$ 1,208,878** | **$ 1,227,762** | **$ 1,330,351.00** | **$ 588,048** | **$ 1,334,919.00** | |

**RAPPAHANNOCK JUVENILE CENTER**

**DRAFT BUDGET WORKSHEET - FY 2020-2021**

| | | EXPENSE CATEGORY | FY 2016 - 2017 BUDGET | FY 2016 - 2017 ACTUAL | FY 2017 - 2018 BUDGET | FY 2017 - 2018 ACTUAL | FY 2018 - 2019 BUDGET | FY 2018 - 2019 ACTUAL | FY 2019 - 2020 BUDGET | FY 2019 - 2020 ACTUAL 12/31/19 | Budget FY 2020- 2021 |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | 19 | ***Capital Outlay*** | | | | | | | | | |
| 15-XXXX | | Capital Projects | $ 190,000 | $ 197,613 | $ 250,000 | $ 155,704 | $ 445,000 | $ 143,179 | $ 380,000 | $ 60,084 | $ 420,000 |
| | | ***TOTAL CAPITAL EXPENSES*** | **$ 190,000** | **$ 197,613** | **$ 250,000** | **$ 155,704** | **$ 445,000** | **$ 143,179** | **$ 380,000.00** | **$ 60,084** | **$ 420,000.00** |
| | 20 | | | | | | | | | | |
| 40-XXXX | | OPEB | | | | $ 148,000 | $ 200,000 | $ 200,000 | | | $ - |
| 40-XXXX | | Contingency | $ 200,000 | $ 20,433 | $ 200,000 | $ 7,271 | $ 200,000 | | $ 200,000 | $ 3,750 | $ 300,000 |
| | | ***TOTAL DEBT SERVICE EXPENSE*** | **$ 200,000** | **$ 20,433** | **$ 200,000** | **$ 155,271** | **$ 400,000** | **$ -** | **$ 200,000.00** | **$ 3,750** | **$ 300,000.00** |
| | 21 | ***Long-Term Debt*** | | | | | | | | | |
| 40-XXXX | | Debt Service | $ 624,928 | $ 624,927 | $ 626,029 | $ 625,959 | $ 625,505 | | $ - | | $ - |
| | | ***TOTAL DEBT SERVICE EXPENSE*** | **$ 624,928** | **$ 624,927** | **$ 626,029** | **$ 625,959** | **$ 625,505** | **$ -** | **$ -** | **$ -** | **$ -** |
| | | | | | | | | | | | |
| | | ***GRAND TOTAL OPERATING BUDGET*** | **$ 6,907,898** | **$ 6,525,054** | **$ 7,310,503** | **$ 6,804,195** | **$ 7,699,799** | **$ 6,632,195** | **$ 7,550,604** | **$ 3,545,491** | **$ 7,953,241** |

# Aging Together
## Profit & Loss Budget Performance
### June 2019

| | Jun 19 | Jul '18 - Jun 19 | Annual Budget | $ Over Budget |
|---|---|---|---|---|
| **Ordinary Income/Expense** | | | | |
| **Income** | | | | |
| **4* · Contributed support** | | | | |
| **4000 · Revenue-Direct Contributions** | | | | |
| **4010 · Individual** | 0.00 | 7,013.75 | 5,000.00 | 2,013.75 |
| **Total 4000 · Revenue-Direct Contributions** | 0.00 | 7,013.75 | 5,000.00 | 2,013.75 |
| **4100 · Donated goods & services** | | | | |
| **4130 · Gifts in kind - goods** | 0.00 | 0.00 | 0.00 | 0.00 |
| **Total 4100 · Donated goods & services** | 0.00 | 0.00 | 0.00 | 0.00 |
| **4200 · Revenue from non-govt grants** | | | | |
| **4210 · Corporate/business grants** | 0.00 | 1,000.00 | 3,000.00 | -2,000.00 |
| **4230 · Grants & Foundations** | 10,000.00 | 10,000.00 | | |
| **4250 · Nonprofit organization grants** | | | | |
| **4255 · Northern Piedmont Comm Found** | 0.00 | 11,000.00 | 0.00 | 11,000.00 |
| **4256 · PATH Foundation** | | | | |
| **4257 · PATH Foundation - DRPT** | 0.00 | 5,000.00 | | |
| **4258 · PATH Fdn - Meet Older Adults** | 0.00 | 62,000.00 | | |
| **4256 · PATH Foundation - Other** | 0.00 | 101,010.00 | 62,000.00 | 39,010.00 |
| **Total 4256 · PATH Foundation** | 0.00 | 168,010.00 | 62,000.00 | 106,010.00 |
| **4250 · Nonprofit organization grants - Other** | 0.00 | 0.00 | 10,000.00 | -10,000.00 |
| **Total 4250 · Nonprofit organization grants** | 0.00 | 179,010.00 | 72,000.00 | 107,010.00 |
| **Total 4200 · Revenue from non-govt grants** | 10,000.00 | 190,010.00 | 75,000.00 | 115,010.00 |
| **4400 · Revenue-indirect contributions** | | | | |
| **4405 · Give Local Piedmont** | 0.00 | 0.00 | 2,000.00 | -2,000.00 |
| **4410 · UW or CFC contributions** | 0.00 | 3,223.41 | 189.55 | 3,033.86 |
| **Total 4400 · Revenue-indirect contributions** | 0.00 | 3,223.41 | 2,189.55 | 1,033.86 |
| **4500 · Revenue from government grants** | | | | |
| **4510 · Government agency grants** | | | | |
| **4512 · RRCSB-AAA** | 0.00 | 3,000.00 | 3,000.00 | 0.00 |
| **Total 4510 · Government agency grants** | 0.00 | 3,000.00 | 3,000.00 | 0.00 |
| **4530 · State grants** | | | | |
| **4533 · DRPT** | 0.00 | 14,298.00 | 16,000.00 | -1,702.00 |
| **Total 4530 · State grants** | 0.00 | 14,298.00 | 16,000.00 | -1,702.00 |
| **4540 · Local government grants** | | | | |
| **4541 · Culpeper County** | 0.00 | 2,000.00 | 2,000.00 | 0.00 |
| **4542 · Fauquier County** | 0.00 | 12,000.00 | 12,000.00 | 0.00 |
| **4544 · Madison County** | 0.00 | 3,000.00 | 3,000.00 | 0.00 |
| **4546 · Orange County** | 0.00 | 5,000.00 | 5,000.00 | 0.00 |
| **4548 · Rappahannock County** | 0.00 | 7,500.00 | 7,500.00 | 0.00 |
| **Total 4540 · Local government grants** | 0.00 | 29,500.00 | 29,500.00 | 0.00 |
| **Total 4500 · Revenue from government grants** | 0.00 | 46,798.00 | 48,500.00 | -1,702.00 |
| **Total 4* · Contributed support** | 10,000.00 | 247,045.16 | 130,689.55 | 116,355.61 |
| **5800 · Special Events** | | | | |
| **5810 · Art of Aging Expo** | 0.00 | 12,266.07 | 9,000.00 | 3,266.07 |
| **5815 · Five Over Fifty** | 423.01 | 9,209.34 | 8,000.00 | 1,209.34 |
| **5835 · Caregiving** | 0.00 | 15,572.28 | 3,000.00 | 12,572.28 |
| **5860 · Senior Prom** | 0.00 | 1,200.00 | 2,000.00 | -800.00 |
| **Total 5800 · Special Events** | 423.01 | 38,247.69 | 22,000.00 | 16,247.69 |
| **Total Income** | 10,423.01 | 285,292.85 | 152,689.55 | 132,603.30 |
| **Expense** | | | | |
| **7000 · Grant & contract expense** | | | | |

# Aging Together
## Profit & Loss Budget Performance
June 2019

| | Jun 19 | Jul '18 - Jun 19 | Annual Budget | $ Over Budget |
|---|---|---|---|---|
| 7020 · Grants to other organizations | | | | |
| 7024 · PATH Grant Expense | 0.00 | 0.00 | 0.00 | 0.00 |
| Total 7020 · Grants to other organizations | 0.00 | 0.00 | 0.00 | 0.00 |
| Total 7000 · Grant & contract expense | 0.00 | 0.00 | 0.00 | 0.00 |
| 7200 · Salaries & related expenses | | | | |
| 7210 · Directors salary | 4,291.67 | 51,499.93 | 50,000.00 | 1,499.93 |
| 7220 · Salaries & wages - other | 3,410.75 | 33,013.02 | 33,150.00 | -136.98 |
| 7250 · FICA Taxes Match | 589.23 | 6,465.13 | 6,361.00 | 104.13 |
| 7260 · Federal Unemployment Taxes | 7.18 | 123.59 | 84.00 | 39.59 |
| 7270 · State Unemployment Taxes | 1.31 | 24.86 | 17.60 | 7.26 |
| Total 7200 · Salaries & related expenses | 8,300.14 | 91,126.53 | 89,612.60 | 1,513.93 |
| 7500 · Contract service expenses | | | | |
| 7540 · Other contractual expenses | 989.97 | 6,159.96 | 8,500.00 | -2,340.04 |
| Total 7500 · Contract service expenses | 989.97 | 6,159.96 | 8,500.00 | -2,340.04 |
| 8000 · Merchant Fees | | | | |
| 8030 · Eventbrite fees | 0.00 | 55.83 | | |
| 8070 · Paypal fees | 0.00 | 7.56 | | |
| Total 8000 · Merchant Fees | 0.00 | 63.39 | | |
| 8100 · Non-personnel expenses | | | | |
| 8110 · Office Supplies | 4.99 | 682.71 | 250.00 | 432.71 |
| 8115 · Food - program related | 2,951.34 | 8,296.38 | 9,000.00 | -703.62 |
| 8117 · Supplies - program related | 672.38 | 1,949.05 | 3,000.00 | -1,050.95 |
| 8120 · Donated materials & supplies | 0.00 | 0.00 | 0.00 | 0.00 |
| 8140 · Postage, shipping, delivery | 157.99 | 514.47 | 400.00 | 114.47 |
| 8170 · Printing & copying | 208.81 | 5,776.53 | 4,500.00 | 1,276.53 |
| 8180 · Books, subscriptions, reference | 0.00 | 182.79 | 175.00 | 7.79 |
| Total 8100 · Non-personnel expenses | 3,995.51 | 17,401.93 | 17,325.00 | 76.93 |
| 8200 · Occupancy expenses | | | | |
| 8210 · Venue Rental | 0.00 | 1,600.00 | 2,525.00 | -925.00 |
| Total 8200 · Occupancy expenses | 0.00 | 1,600.00 | 2,525.00 | -925.00 |
| 8300 · Travel & meetings expenses | | | | |
| 8310 · Food and Lodging | 161.44 | 858.73 | 0.00 | 858.73 |
| 8320 · Meetings and conferences | 65.00 | 130.00 | | |
| Total 8300 · Travel & meetings expenses | 226.44 | 988.73 | 0.00 | 988.73 |
| 8500 · Other expenses | | | | |
| 8520 · Insurance | 0.00 | 2,624.82 | 2,689.00 | -64.18 |
| 8530 · Membership dues - organization | 0.00 | 695.00 | 290.00 | 405.00 |
| 8540 · Staff development - Workshops | 0.00 | 500.00 | 0.00 | 500.00 |
| 8550 · Marketing/Outreach | 0.00 | 55.00 | 106.00 | -51.00 |
| 8560 · Outside computer services | 185.91 | 983.85 | 2,000.00 | -1,016.15 |
| 8565 · Website redesign | 1,257.00 | 3,366.45 | 200.00 | 3,166.45 |
| 8570 · Advertising expenses | 0.00 | 5,222.00 | 4,000.00 | 1,222.00 |
| 8595 · Misc expenses | 0.00 | 187.78 | | |
| Total 8500 · Other expenses | 1,442.91 | 13,634.90 | 9,285.00 | 4,349.90 |
| 8700 · DRPT Sub-grantee (RRCS) | | | | |
| 8710 · RRCS | 75.00 | 9,074.00 | 6,400.00 | 2,674.00 |
| 8720 · Volunteer Luncheon | 0.00 | 745.07 | 1,468.00 | -722.93 |
| Total 8700 · DRPT Sub-grantee (RRCS) | 75.00 | 9,819.07 | 7,868.00 | 1,951.07 |
| Total Expense | 15,029.97 | 140,794.51 | 135,115.60 | 5,678.91 |
| Net Ordinary Income | -4,606.96 | 144,498.34 | 17,573.95 | 126,924.39 |
| **Net Income** | **-4,606.96** | **144,498.34** | **17,573.95** | **126,924.39** |

# Aging Together
## Profit & Loss Budget Performance
### June 2018

| | Jun 18 | Jul '17 - Jun 18 | Annual Budget | $ Over Budget |
|---|---|---|---|---|
| **Ordinary Income/Expense** | | | | |
| **Income** | | | | |
| **4* · Contributed support** | | | | |
| **4000 · Revenue-Direct Contributions** | | | | |
| **4010 · Individual** | 0.00 | 4,512.87 | 833.00 | 3,679.87 |
| **Total 4000 · Revenue-Direct Contributions** | 0.00 | 4,512.87 | 833.00 | 3,679.87 |
| **4100 · Donated goods & services** | | | | |
| **4130 · Gifts in kind - goods** | 0.00 | 0.00 | 0.00 | 0.00 |
| **Total 4100 · Donated goods & services** | 0.00 | 0.00 | 0.00 | 0.00 |
| **4200 · Revenue from non-govt grants** | | | | |
| **4210 · Corporate/business grants** | 0.00 | 3,800.00 | 0.00 | 3,800.00 |
| **4250 · Nonprofit organization grants** | | | | |
| **4252 · Culpeper Wellness Foundation** | 0.00 | 0.00 | 0.00 | 0.00 |
| **4255 · Northern Piedmont Comm Found** | 0.00 | 3,000.00 | 0.00 | 3,000.00 |
| **4256 · PATH Foundation** | 0.00 | 2,000.00 | 20,000.00 | -18,000.00 |
| **4258 · Rapp Village** | 0.00 | 0.00 | 0.00 | 0.00 |
| **4250 · Nonprofit organization grants - Other** | 0.00 | 0.00 | 30,000.00 | -30,000.00 |
| **Total 4250 · Nonprofit organization grants** | 0.00 | 5,000.00 | 50,000.00 | -45,000.00 |
| **Total 4200 · Revenue from non-govt grants** | 0.00 | 8,800.00 | 50,000.00 | -41,200.00 |
| **4400 · Revenue-indirect contributions** | | | | |
| **4405 · Give Local Piedmont** | 7,525.03 | 7,525.03 | 1,667.00 | 5,858.03 |
| **4410 · UW or CFC contributions** | 0.00 | 140.80 | 135.41 | 5.39 |
| **Total 4400 · Revenue-indirect contributions** | 7,525.03 | 7,665.83 | 1,802.41 | 5,863.42 |
| **4500 · Revenue from government grants** | | | | |
| **4510 · Government agency grants** | | | | |
| **4512 · RRCSB-AAA** | 0.00 | 5,000.00 | 3,000.00 | 2,000.00 |
| **Total 4510 · Government agency grants** | 0.00 | 5,000.00 | 3,000.00 | 2,000.00 |
| **4530 · State grants** | | | | |
| **4533 · DRPT** | 0.00 | 16,325.00 | 16,000.00 | 325.00 |
| **4537 · Foothills Housing Network** | 0.00 | 0.00 | 0.00 | 0.00 |
| **Total 4530 · State grants** | 0.00 | 16,325.00 | 16,000.00 | 325.00 |
| **4540 · Local government grants** | | | | |
| **4541 · Culpeper County** | 0.00 | 2,992.88 | 2,000.00 | 992.88 |
| **4542 · Fauquier County** | 0.00 | 12,000.00 | 12,000.00 | 0.00 |
| **4544 · Madison County** | 0.00 | 3,000.00 | 3,000.00 | 0.00 |
| **4546 · Orange County** | 0.00 | 5,000.00 | 5,000.00 | 0.00 |
| **4548 · Rappahannock County** | 0.00 | 7,500.00 | 7,500.00 | 0.00 |
| **Total 4540 · Local government grants** | 0.00 | 30,492.88 | 29,500.00 | 992.88 |
| **Total 4500 · Revenue from government grants** | 0.00 | 51,817.88 | 48,500.00 | 3,317.88 |
| **Total 4* · Contributed support** | 7,525.03 | 72,796.58 | 101,135.41 | -28,338.83 |
| **5800 · Special Events** | | | | |
| **5810 · Art of Aging Expo** | 0.00 | 8,840.89 | 5,000.00 | 3,840.89 |

# Aging Together
## Profit & Loss Budget Performance
### June 2018

| | Jun 18 | Jul '17 - Jun 18 | Annual Budget | $ Over Budget |
|---|---|---|---|---|
| 5815 · Five Over Fifty | 0.00 | 10,217.25 | 5,000.00 | 5,217.25 |
| 5835 · Caregiving | 0.00 | 5,000.00 | 5,000.00 | 0.00 |
| 5860 · Senior Prom | 0.00 | 1,857.80 | 5,000.00 | -3,142.20 |
| 5800 · Special Events - Other | 0.00 | 291.00 | 0.00 | 291.00 |
| Total 5800 · Special Events | 0.00 | 26,206.94 | 20,000.00 | 6,206.94 |
| Total Income | 7,525.03 | 99,003.52 | 121,135.41 | -22,131.89 |
| Expense | | | | |
| 7200 · Salaries & related expenses | | | | |
| 7210 · Directors salary | 4,166.66 | 49,999.92 | 50,000.00 | -0.08 |
| 7220 · Salaries & wages - other | 1,955.00 | 27,514.50 | 33,150.00 | -5,635.50 |
| 7250 · FICA Taxes Match | 468.31 | 5,929.98 | 6,361.00 | -431.02 |
| 7260 · Federal Unemployment Taxes | 0.00 | 84.01 | 84.00 | 0.01 |
| 7270 · State Unemployment Taxes | 0.00 | 17.60 | 21.00 | -3.40 |
| Total 7200 · Salaries & related expenses | 6,589.97 | 83,546.01 | 89,616.00 | -6,069.99 |
| 7500 · Contract service expenses | | | | |
| 7540 · Other contractual expenses | 4,248.92 | 5,448.92 | 500.00 | 4,948.92 |
| Total 7500 · Contract service expenses | 4,248.92 | 5,448.92 | 500.00 | 4,948.92 |
| 8100 · Non-personnel expenses | | | | |
| 8110 · Office Supplies | 0.00 | 370.59 | 2,200.00 | -1,829.41 |
| 8115 · Food - program related | 0.00 | 1,799.67 | 0.00 | 1,799.67 |
| 8117 · Supplies - program related | 4.84 | 6,049.84 | 2,000.00 | 4,049.84 |
| 8120 · Donated materials & supplies | 0.00 | 0.00 | 0.00 | 0.00 |
| 8140 · Postage, shipping, delivery | 0.00 | 464.04 | 800.00 | -335.96 |
| 8170 · Printing & copying | 35.00 | 2,582.74 | 2,000.00 | 582.74 |
| 8180 · Books, subscriptions, reference | 0.00 | 172.16 | 0.00 | 172.16 |
| Total 8100 · Non-personnel expenses | 39.84 | 11,439.04 | 7,000.00 | 4,439.04 |
| 8200 · Occupancy expenses | | | | |
| 8210 · Venue Rental | 4,219.12 | 5,244.12 | 1,500.00 | 3,744.12 |
| Total 8200 · Occupancy expenses | 4,219.12 | 5,244.12 | 1,500.00 | 3,744.12 |
| 8300 · Travel & meetings expenses | | | | |
| 8310 · Food and Lodging | 0.00 | 0.00 | 500.00 | -500.00 |
| Total 8300 · Travel & meetings expenses | 0.00 | 0.00 | 500.00 | -500.00 |
| 8500 · Misc expenses | | | | |
| 8510 · Interest expense | 0.00 | 0.00 | 0.00 | 0.00 |
| 8520 · Insurance | 0.00 | 2,574.00 | 3,850.00 | -1,276.00 |
| 8530 · Membership dues - organization | 225.00 | 965.00 | 750.00 | 215.00 |
| 8540 · Staff development - Workshops | 0.00 | 0.00 | 1,200.00 | -1,200.00 |
| 8550 · Marketing/Outreach | 0.00 | 160.00 | 750.00 | -590.00 |
| 8560 · Outside computer services | 0.00 | 1,908.76 | 1,500.00 | 408.76 |
| 8570 · Advertising expenses | 235.00 | 4,926.88 | 7,400.00 | -2,473.12 |
| 8590 · Bank fees & finance charges | 0.00 | 153.36 | 0.00 | 153.36 |
| 8500 · Misc expenses - Other | 0.00 | 93.22 | 0.00 | 93.22 |
| Total 8500 · Misc expenses | 460.00 | 10,781.22 | 15,450.00 | -4,668.78 |
| 8700 · DRPT Sub-grantee (RRCS) | | | | |

# Aging Together
## Profit & Loss Budget Performance
### June 2018

| | Jun 18 | Jul '17 - Jun 18 | Annual Budget | $ Over Budget |
|---|---|---|---|---|
| 8710 · RRCS | 1,064.00 | 6,480.92 | 6,400.00 | 80.92 |
| 8720 · Volunteer Luncheon | 0.00 | 1,468.31 | 2,400.00 | -931.69 |
| Total 8700 · DRPT Sub-grantee (RRCS) | 1,064.00 | 7,949.23 | 8,800.00 | -850.77 |
| Total Expense | 16,621.85 | 124,408.54 | 123,366.00 | 1,042.54 |
| Net Ordinary Income | -9,096.82 | -25,405.02 | -2,230.59 | -23,174.43 |
| **Net Income** | **-9,096.82** | **-25,405.02** | **-2,230.59** | **-23,174.43** |

Form **990**

Department of the Treasury
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

► Do not enter social security numbers on this form as it may be made public.
► Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

**2018**

**Open to Public Inspection**

**A** For the 2018 calendar year, or tax year beginning 7/01 , 2018, and ending 6/30 , 2019

**B** Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

**C**
AGING TOGETHER CORPORATION
1835 INDUSTRY DRIVE
CULPEPER, VA 22701

**D** Employer identification number
46-2046459

**E** Telephone number
(540) 829-6405

**G** Gross receipts $ 288,278.

**F** Name and address of principal officer:
SAME AS C ABOVE

**H(a)** Is this a group return for subordinates? ☐ Yes ☒ No

**H(b)** Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◄ (insert no.) ☐ 4947(a)(1) or ☐ 527

**J** Website: ► AGINGTOGETHER.ORG

**H(c)** Group exemption number ►

**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ► **L** Year of formation: 2013 **M** State of legal domicile: VA

## Part I Summary

**Activities & Governance**

1 Briefly describe the organization's mission or most significant activities: AGING TOGETHER BUILDS COLLABORATIONS THAT CREATE AND ENHANCE SUPPORT FOR OLDER PERSONS, THEIR FAMILIES, AND THEIR CAREGIVERS.

2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

| | | | |
|---|---|---|---|
| 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 10 |
| 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 10 |
| 5 | Total number of individuals employed in calendar year 2018 (Part V, line 2a) | 5 | 3 |
| 6 | Total number of volunteers (estimate if necessary) | 6 | 0 |
| 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0. |
| b | Net unrelated business taxable income from Form 990-T, line 38 | 7b | 0. |

**Revenue**

| | | Prior Year | Current Year |
|---|---|---|---|
| 8 | Contributions and grants (Part VIII, line 1h) | | 250,031. |
| 9 | Program service revenue (Part VIII, line 2g) | | 38,247. |
| 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | |
| 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | |
| 12 | Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 288,278. |

**Expenses**

| | | | |
|---|---|---|---|
| 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | 9,074. |
| 14 | Benefits paid to or for members (Part IX, column (A), line 4) | | |
| 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 91,127. |
| 16a | Professional fundraising fees (Part IX, column (A), line 11e) | | |
| b | Total fundraising expenses (Part IX, column (D), line 25) ► | | |
| 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 40,965. |
| 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | | 141,166. |
| 19 | Revenue less expenses. Subtract line 18 from line 12 | | 147,112. |

**Net Assets or Fund Balances**

| | | Beginning of Current Year | End of Year |
|---|---|---|---|
| 20 | Total assets (Part X, line 16) | 16,892. | 164,383. |
| 21 | Total liabilities (Part X, line 26) | 2,463. | 2,841. |
| 22 | Net assets or fund balances. Subtract line 21 from line 20 | 14,429. | 161,542. |

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

▶ Signature of officer — Date

▶ ELLEN PHIPPS — EXECUTIVE DIRECTOR
Type or print name and title

**Paid Preparer Use Only**

| Print/Type preparer's name | Preparer's signature | Date | Check ☐ if self-employed | PTIN |
|---|---|---|---|---|
| DAVID M. JONES | DAVID M. JONES | | | P00849655 |

Firm's name ► NICHOLAS, JONES & CO., PLC
Firm's address ► 301 S. WEST STREET
CULPEPER, VA 22701
Firm's EIN ► 45-3740381
Phone no. 540-825-8005

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . . X

1 Briefly describe the organization's mission:

AGING TOGETHER BUILDS COLLABORATIONS THAT CREATE AND ENHANCE SUPPORT FOR OLDER PERSONS, THEIR FAMILIES, AND THEIR CAREGIVERS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

EDUCATION AND TRAINING: LOCAL AND REGIONAL EDUCATION ON TOPICS NEEDED BY SENIORS; FAMILY AND PROFESSIONAL CAREGIVER TRAINING. APPROXIMATELY 800 PEOPLE SERVED.

**4b** (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

OUTREACH: ART OF AGING EXPO FEATURING CLASSES AND EXHIBITORS; PHYSICIAN, CHURCH, HOSPITAL OUTREACH TO CONNECT SENIORS WITH COMMUNITY RESOURCES.

**4c** (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

SAFETY, ABUSE, AND ISOLATION PREVENTION: SENIOR PROM, WORK WITH DEPARTMENTS OF SOCIAL SERVICES, HOLIDAY PARTY AND OTHER EVENTS.

**4d** Other program services (Describe in Schedule O.) SEE SCHEDULE O

(Expenses $ including grants of $ ) (Revenue $ )

**4e** Total program service expenses ► 0.

## Part IV Checklist of Required Schedules

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If 'Yes,' complete Schedule A* | 1 | X | |
| 2 | Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)? | 2 | | X |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If 'Yes,' complete Schedule C, Part I* | 3 | | X |
| 4 | **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If 'Yes,' complete Schedule C, Part II* | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If 'Yes,' complete Schedule C, Part III* | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If 'Yes,' complete Schedule D, Part I* | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If 'Yes,' complete Schedule D, Part II* | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If 'Yes,' complete Schedule D, Part III* | 8 | | X |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If 'Yes,' complete Schedule D, Part IV* | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If 'Yes,' complete Schedule D, Part V* | 10 | | X |
| 11 | If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | | |
| a | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If 'Yes,' complete Schedule D, Part VI* | 11 a | | X |
| b | Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VII* | 11 b | | X |
| c | Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VIII* | 11 c | | X |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part IX* | 11 d | | X |
| e | Did the organization report an amount for other liabilities in Part X, line 25? *If 'Yes,' complete Schedule D, Part X* | 11 e | | X |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If 'Yes,' complete Schedule D, Part X* | 11 f | | X |
| 12 a | Did the organization obtain separate, independent audited financial statements for the tax year? *If 'Yes,' complete Schedule D, Parts XI and XII* | 12a | | X |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? *If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional* | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? *If 'Yes,' complete Schedule E* | 13 | | X |
| 14 a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If 'Yes,' complete Schedule F, Parts I and IV* | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If 'Yes,' complete Schedule F, Parts II and IV* | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If 'Yes,' complete Schedule F, Parts III and IV* | 16 | | X |
| 17 | Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If 'Yes,' complete Schedule G, Part I* (see instructions) | 17 | | X |
| 18 | Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If 'Yes,' complete Schedule G, Part II* | 18 | | X |
| 19 | Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If 'Yes,' complete Schedule G, Part III* | 19 | | X |
| 20a | Did the organization operate one or more hospital facilities? *If 'Yes,' complete Schedule H* | 20a | | X |
| b | If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If 'Yes,' complete Schedule I, Parts I and II* | 21 | X | |

**Part IV Checklist of Required Schedules** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| **22** | Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If 'Yes,' complete Schedule I, Parts I and III* | 22 | | X |
| **23** | Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If 'Yes,' complete Schedule J* | 23 | | X |
| **24a** | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a* | 24a | | X |
| **b** | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| **c** | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| **d** | Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | 24d | | |
| **25a** | **Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If 'Yes,' complete Schedule L, Part I* | 25a | | X |
| **b** | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If 'Yes,' complete Schedule L, Part I* | 25b | | X |
| **26** | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If 'Yes,' complete Schedule L, Part II* | 26 | | X |
| **27** | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If 'Yes,' complete Schedule L, Part III* | 27 | | X |
| **28** | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| **a** | A current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV* | 28a | | X |
| **b** | A family member of a current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV* | 28b | | X |
| **c** | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If 'Yes,' complete Schedule L, Part IV* | 28c | | X |
| **29** | Did the organization receive more than $25,000 in non-cash contributions? *If 'Yes,' complete Schedule M* | 29 | | X |
| **30** | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If 'Yes,' complete Schedule M* | 30 | | X |
| **31** | Did the organization liquidate, terminate, or dissolve and cease operations? *If 'Yes,' complete Schedule N, Part I* | 31 | | X |
| **32** | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If 'Yes,' complete Schedule N, Part II* | 32 | | X |
| **33** | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If 'Yes,' complete Schedule R, Part I* | 33 | | X |
| **34** | Was the organization related to any tax-exempt or taxable entity? *If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1* | 34 | | X |
| **35a** | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| **b** | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If 'Yes,' complete Schedule R, Part V, line 2* | 35b | | |
| **36** | **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If 'Yes,' complete Schedule R, Part V, line 2* | 36 | | X |
| **37** | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If 'Yes,' complete Schedule R, Part VI* | 37 | | X |
| **38** | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O | 38 | X | |

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V ☐

| | | | | Yes | No |
|---|---|---|---|---|---|
| **1a** | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | 0 | | |
| **b** | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | 0 | | |
| **c** | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | | | |

**Part V Statements Regarding Other IRS Filings and Tax Compliance** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| **2a** | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return **2a** 3 | | | |
| **b** | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | **2b** | X | |
| | **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions) | | | |
| **3a** | Did the organization have unrelated business gross income of $1,000 or more during the year? | **3a** | | X |
| **b** | If 'Yes,' has it filed a Form 990-T for this year? *If 'No' to line 3b, provide an explanation in Schedule O* | **3b** | | |
| **4a** | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | **4a** | | X |
| **b** | If 'Yes,' enter the name of the foreign country: ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | |
| **5a** | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | **5a** | | X |
| **b** | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | **5b** | | X |
| **c** | If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? | **5c** | | |
| **6a** | Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | **6a** | | X |
| **b** | If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | **6b** | | |
| **7** | **Organizations that may receive deductible contributions under section 170(c).** | | | |
| **a** | Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? | **7a** | | X |
| **b** | If 'Yes,' did the organization notify the donor of the value of the goods or services provided? | **7b** | | |
| **c** | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | **7c** | | X |
| **d** | If 'Yes,' indicate the number of Forms 8282 filed during the year **7d** | | | |
| **e** | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | **7e** | | X |
| **f** | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | **7f** | | X |
| **g** | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | **7g** | | |
| **h** | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | **7h** | | |
| **8** | **Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | **8** | | X |
| **9** | **Sponsoring organizations maintaining donor advised funds.** | | | |
| **a** | Did the sponsoring organization make any taxable distributions under section 4966? | **9a** | | |
| **b** | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | **9b** | | |
| **10** | **Section 501(c)(7) organizations.** Enter: | | | |
| **a** | Initiation fees and capital contributions included on Part VIII, line 12 **10a** | | | |
| **b** | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b** | | | |
| **11** | **Section 501(c)(12) organizations.** Enter: | | | |
| **a** | Gross income from members or shareholders **11a** | | | |
| **b** | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b** | | | |
| **12a** | **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041? | **12a** | | |
| **b** | If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year **12b** | | | |
| **13** | **Section 501(c)(29) qualified nonprofit health insurance issuers.** | | | |
| **a** | Is the organization licensed to issue qualified health plans in more than one state? | **13a** | | |
| | **Note.** See the instructions for additional information the organization must report on Schedule O. | | | |
| **b** | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b** | | | |
| **c** | Enter the amount of reserves on hand **13c** | | | |
| **14a** | Did the organization receive any payments for indoor tanning services during the tax year? | **14a** | | X |
| **b** | If 'Yes,' has it filed a Form 720 to report these payments? *If 'No,' provide an explanation in Schedule O* | **14b** | | |
| **15** | Is the organization 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? If 'Yes,' see instructions and file Form 4720, Schedule N. | **15** | | X |
| **16** | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O. | **16** | | X |

**Part VI** **Governance, Management, and Disclosure** *For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI . . . . . X

## Section A. Governing Body and Management

| | | | Yes | No |
|---|---|---|---|---|
| 1a | Enter the number of voting members of the governing body at the end of the tax year . . . . . 1a | 10 | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent . . . . . 1b | 10 | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . . 2 | | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . . . 3 | | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . . 4 | | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . . 5 | | | X |
| 6 | Did the organization have members or stockholders? . . . . . 6 | | | X |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . . 7a | | | X |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . . 7b | | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| a | The governing body? . . . . . 8a | | X | |
| b | Each committee with authority to act on behalf of the governing body? . . . . . 8b | | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If 'Yes,' provide the names and addresses in Schedule O* . . . . . 9 | | | X |

## Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

| | | | Yes | No |
|---|---|---|---|---|
| 10a | Did the organization have local chapters, branches, or affiliates? . . . . . 10a | | | X |
| b | If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . . 10b | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . . 11a | | X | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O | | | |
| 12a | Did the organization have a written conflict of interest policy? *If 'No,' go to line 13* . . . . . 12a | | | X |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . . 12b | | | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this was done* . . . . . 12c | | | |
| 13 | Did the organization have a written whistleblower policy? . . . . . 13 | | | X |
| 14 | Did the organization have a written document retention and destruction policy? . . . . . 14 | | | X |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| a | The organization's CEO, Executive Director, or top management official . . SEE SCHEDULE O . . . . . 15a | | X | |
| b | Other officers or key employees of the organization . . . . . 15b | | | X |
| | If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . . 16a | | | X |
| b | If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . 16b | | | |

## Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► NONE

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O

20 State the name, address, and telephone number of the person who possesses the organization's books and records ►

ELLEN PHIPPS 1835 INDUSTRY DRIVE CULPEPER VA 22701 (540) 829-6405

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

Check if Schedule O contains a response or note to any line in this Part VII ☐

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

**1 a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) LISA PEACOCK<br>CHAIRMAN | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (2) JOSEPH SAKOLE<br>TREASURER | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (3) RAY PARKS<br>VICE-CHAIR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (4) ERICA M. NIXON<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (5) LISA MORGAN<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (6) JAN SELBO<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (7) PATRICK MAUNEY<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (8) VALERIE WARD<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (9) MITTIE WALLACE<br>DIRECTOR | 5<br>0 | X | | | | | | 0. | 0. | 0. |
| (10) KIM MORRIS<br>DIRECTOR | 0<br>0 | X | | | | | | 0. | 0. | 0. |
| (11) CAROL G. SIMPSON<br>EXECUTIVE DIR. | 40<br>0 | | | X | | | | 51,500. | 0. | 0. |
| (12) | | | | | | | | | | |
| (13) | | | | | | | | | | |
| (14) | | | | | | | | | | |

**Part VII** **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

| (A) Name and title | (B) Average hours per week (list any hours for related organiza - tions below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (15) | | | | | | | | | | |
| (16) | | | | | | | | | | |
| (17) | | | | | | | | | | |
| (18) | | | | | | | | | | |
| (19) | | | | | | | | | | |
| (20) | | | | | | | | | | |
| (21) | | | | | | | | | | |
| (22) | | | | | | | | | | |
| (23) | | | | | | | | | | |
| (24) | | | | | | | | | | |
| (25) | | | | | | | | | | |
| **1 b Sub-total** ► | | | | | | | | 51,500. | 0. | 0. |
| **c Total from continuation sheets to Part VII, Section A** ► | | | | | | | | 0. | 0. | 0. |
| **d Total (add lines 1b and 1c)** ► | | | | | | | | 51,500. | 0. | 0. |

**2** Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ► 0

| | | Yes | No |
|---|---|---|---|
| **3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual* | **3** | | X |
| **4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If 'Yes,' complete Schedule J for such individual* | **4** | | X |
| **5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If 'Yes,' complete Schedule J for such person* | **5** | | X |

## Section B. Independent Contractors

**1** Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ► 0

## Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
|---|---|---|---|---|---|---|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a Federated campaigns | 1a 6,109. | | | | |
| | b Membership dues | 1b | | | | |
| | c Fundraising events | 1c | | | | |
| | d Related organizations | 1d | | | | |
| | e Government grants (contributions) | 1e 46,798. | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f 197,124. | | | | |
| | g Noncash contributions included in lines 1a-1f: $ | | | | | |
| | h **Total.** Add lines 1a-1f | | 250,031. | | | |
| Program Service Revenue | | Business Code | | | | |
| | 2a EVENTS FOR SENIORS | 624100 | 38,247. | 38,247. | | |
| | b | | | | | |
| | c | | | | | |
| | d | | | | | |
| | e | | | | | |
| | f All other program service revenue | | | | | |
| | g **Total.** Add lines 2a-2f | | 38,247. | | | |
| Other Revenue | 3 Investment income (including dividends, interest and other similar amounts) | | | | | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | |
| | 5 Royalties | | | | | |
| | | (i) Real / (ii) Personal | | | | |
| | 6a Gross rents | | | | | |
| | b Less: rental expenses | | | | | |
| | c Rental income or (loss) | | | | | |
| | d Net rental income or (loss) | | | | | |
| | | (i) Securities / (ii) Other | | | | |
| | 7a Gross amount from sales of assets other than inventory | | | | | |
| | b Less: cost or other basis and sales expenses | | | | | |
| | c Gain or (loss) | | | | | |
| | d Net gain or (loss) | | | | | |
| | 8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 a | | | | | |
| | b Less: direct expenses b | | | | | |
| | c Net income or (loss) from fundraising events | | | | | |
| | 9a Gross income from gaming activities. See Part IV, line 19 a | | | | | |
| | b Less: direct expenses b | | | | | |
| | c Net income or (loss) from gaming activities | | | | | |
| | 10a Gross sales of inventory, less returns and allowances a | | | | | |
| | b Less: cost of goods sold b | | | | | |
| | c Net income or (loss) from sales of inventory | | | | | |
| | Miscellaneous Revenue | Business Code | | | | |
| | 11a | | | | | |
| | b | | | | | |
| | c | | | | | |
| | d All other revenue | | | | | |
| | e **Total.** Add lines 11a-11d | | | | | |
| | 12 **Total revenue.** See instructions | | 288,278. | 38,247. | 0. | 0. |

## Part IX Statement of Functional Expenses

*Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).*

Check if Schedule O contains a response or note to any line in this Part IX. ☐

| *Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.* | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|---|---|---|---|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 9,074. | 9,074. | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 51,500. | 0. | 0. | 0. |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0. | 0. | 0. | 0. |
| 7 Other salaries and wages | 33,013. | | | |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 Other employee benefits | | | | |
| 10 Payroll taxes | 6,614. | | | |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | | | | |
| c Accounting | | | | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) | | | | |
| 12 Advertising and promotion | 5,277. | | | |
| 13 Office expenses | 713. | | | |
| 14 Information technology | 4,395. | | | |
| 15 Royalties | | | | |
| 16 Occupancy | | | | |
| 17 Travel | | | | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | | | | |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | | | | |
| 23 Insurance | 2,625. | | | |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a FOOD - PROGRAMS | 8,297. | 8,297. | | |
| b CONTRACTUAL SERVICES | 6,160. | | | |
| c PRINTING AND PUBLICATIONS | 5,777. | | | |
| d SUPPLIES - PROGRAMS | 2,217. | 2,217. | | |
| e All other expenses | 5,504. | 1,600. | | |
| 25 **Total functional expenses.** Add lines 1 through 24e | 141,166. | 21,188. | 0. | 0. |
| 26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720) | | | | |

## Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

| | | | (A) Beginning of year | | (B) End of year |
|---|---|---|---|---|---|
| Assets | 1 | Cash — non-interest-bearing | 16,892. | 1 | 164,383. |
| | 2 | Savings and temporary cash investments | | 2 | |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | | 4 | |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L | | 6 | |
| | 7 | Notes and loans receivable, net | | 7 | |
| | 8 | Inventories for sale or use | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a | | | |
| | b | Less: accumulated depreciation — 10b | | 10c | |
| | 11 | Investments — publicly traded securities | | 11 | |
| | 12 | Investments — other securities. See Part IV, line 11 | | 12 | |
| | 13 | Investments — program-related. See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | 15 | |
| | 16 | **Total assets.** Add lines 1 through 15 (must equal line 34) | 16,892. | 16 | 164,383. |
| Liabilities | 17 | Accounts payable and accrued expenses | 2,463. | 17 | 2,841. |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | | 25 | |
| | 26 | **Total liabilities.** Add lines 17 through 25 | 2,463. | 26 | 2,841. |
| Net Assets or Fund Balances | | **Organizations that follow SFAS 117 (ASC 958), check here ► [X] and complete lines 27 through 29, and lines 33 and 34.** | | | |
| | 27 | Unrestricted net assets | 14,429. | 27 | 161,542. |
| | 28 | Temporarily restricted net assets | | 28 | |
| | 29 | Permanently restricted net assets | | 29 | |
| | | **Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.** | | | |
| | 30 | Capital stock or trust principal, or current funds | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| | 33 | Total net assets or fund balances | 14,429. | 33 | 161,542. |
| | 34 | Total liabilities and net assets/fund balances | 16,892. | 34 | 164,383. |

## Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI ☐

| | | | |
|---|---|---|---|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 288,278. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 141,166. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 147,112. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 14,429. |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 161,541. |

## Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☐

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other _____ | | | |
| | If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | | X |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| b | Were the organization's financial statements audited by an independent accountant? | 2b | | X |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| c | If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | 2c | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a | | X |
| b | If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | 3b | | |

**SCHEDULE A**
**(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

# Public Charity Status and Public Support

**Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.**

► **Attach to Form 990 or Form 990-EZ.**

► **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

**2018**

**Open to Public Inspection**

| **Name of the organization** | **Employer identification number** |
|---|---|
| AGING TOGETHER CORPORATION | 46-2046459 |

## Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 ☐ An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . .

g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) Is the organization listed in your governing document? Yes | (iv) No | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|---|---|---|---|---|---|---|
| (A) | | | | | | |
| (B) | | | | | | |
| (C) | | | | | | |
| (D) | | | | | | |
| (E) | | | | | | |
| Total | | | | | | |

## Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

### Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.') | 88,930. | 143,745. | 103,510. | 72,797. | | 408,982. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | 0. |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0. |
| 4 **Total.** Add lines 1 through 3 | 88,930. | 143,745. | 103,510. | 72,797. | 0. | 408,982. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 0. |
| 6 **Public support.** Subtract line 5 from line 4 | | | | | | 408,982. |

### Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 7 Amounts from line 4 | 88,930. | 143,745. | 103,510. | 72,797. | 0. | 408,982. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | 0. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | 0. |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | 0. |
| 11 **Total support.** Add lines 7 through 10 | | | | | | 408,982. |

12 Gross receipts from related activities, etc. (see instructions) 12 45,260.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► [X]

### Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2017 Schedule A, Part II, line 14 15 %

16a **33-1/3% support test—2018.** If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► [ ]

b **33-1/3% support test—2017.** If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► [ ]

17a **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ► [ ]

b **10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ► [ ]

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

## Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

### Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.') | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 **Total.** Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 **Public support.** (Subtract line 7c from line 6.) | | | | | | |

### Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 **Total support.** (Add lines 9, 10c, 11, and 12.) | | | | | | |

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

### Section C. Computation of Public Support Percentage

| | | |
|---|---|---|
| 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2017 Schedule A, Part III, line 15 | 16 | % |

### Section D. Computation of Investment Income Percentage

| | | |
|---|---|---|
| 17 Investment income percentage for **2018** (line 10c, column (f), divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from **2017** Schedule A, Part III, line 17 | 18 | % |

19a **33-1/3% support tests—2018.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

b **33-1/3% support tests—2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

## Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

| | | Yes | No |
|---|---|---|---|
| **1** | Are all of the organization's supported organizations listed by name in the organization's governing documents? *If 'No,' describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.* | 1 | | |
| **2** | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If 'Yes,' explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).* | 2 | | |
| **3a** | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If 'Yes,' answer (b) and (c) below.* | 3a | | |
| **b** | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If 'Yes,' describe in* ***Part VI*** *when and how the organization made the determination.* | 3b | | |
| **c** | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If 'Yes,' explain in* ***Part VI*** *what controls the organization put in place to ensure such use.* | 3c | | |
| **4a** | Was any supported organization not organized in the United States ('foreign supported organization')? *If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.* | 4a | | |
| **b** | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If 'Yes,' describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.* | 4b | | |
| **c** | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If 'Yes,' explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.* | 4c | | |
| **5a** | Did the organization add, substitute, or remove any supported organizations during the tax year? *If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in* ***Part VI,*** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).* | 5a | | |
| **b** | **Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | | |
| **c** | **Substitutions only.** Was the substitution the result of an event beyond the organization's control? | 5c | | |
| **6** | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If 'Yes,' provide detail in* ***Part VI.*** | 6 | | |
| **7** | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).* | 7 | | |
| **8** | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).* | 8 | | |
| **9a** | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If 'Yes,' provide detail in* ***Part VI****.* | 9a | | |
| **b** | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If 'Yes,' provide detail in* ***Part VI****.* | 9b | | |
| **c** | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If 'Yes,' provide detail in* ***Part VI****.* | 9c | | |
| **10a** | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If 'Yes,' answer 10b below.* | 10a | | |
| **b** | Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)* | 10b | | |

**Part IV Supporting Organizations** *(continued)*

| | | Yes | No |
|---|---|---|---|
| **11** | Has the organization accepted a gift or contribution from any of the following persons? | | |
| **a** | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? | **11a** | |
| **b** | A family member of a person described in (a) above? | **11b** | |
| **c** | A 35% controlled entity of a person described in (a) or (b) above? *If 'Yes' to a, b, or c, provide detail in* ***Part VI.*** | **11c** | |

## Section B. Type I Supporting Organizations

| | | Yes | No |
|---|---|---|---|
| **1** | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If 'No,' describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax* year. | **1** | |
| **2** | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If 'Yes,' explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.* | **2** | |

## Section C. Type II Supporting Organizations

| | | Yes | No |
|---|---|---|---|
| **1** | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If 'No,' describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).* | **1** | |

## Section D. All Type III Supporting Organizations

| | | Yes | No |
|---|---|---|---|
| **1** | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | **1** | |
| **2** | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If 'No,' explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).* | **2** | |
| **3** | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If 'Yes,' describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.* | **3** | |

## Section E. Type III Functionally Integrated Supporting Organizations

**1** *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* ***(see instructions).***

**a** ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

**b** ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

**c** ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a government entity (see instructions).*

| | | Yes | No |
|---|---|---|---|
| **2** | Activities Test. ***Answer (a) and (b) below.*** | | |
| **a** | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If 'Yes,' then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.* | **2a** | |
| **b** | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If 'Yes,' explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.* | **2b** | |
| **3** | Parent of Supported Organizations. ***Answer (a) and (b) below.*** | | |
| **a** | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.*** | **3a** | |
| **b** | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If 'Yes,' describe in* ***Part VI*** *the role played by the organization in this regard.* | **3b** | |

## Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

**1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

### Section A – Adjusted Net Income

| | | | (A) Prior Year | (B) Current Year (optional) |
|---|---|---|---|---|
| **1** | Net short-term capital gain | **1** | | |
| **2** | Recoveries of prior-year distributions | **2** | | |
| **3** | Other gross income (see instructions) | **3** | | |
| **4** | Add lines 1 through 3. | **4** | | |
| **5** | Depreciation and depletion | **5** | | |
| **6** | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | **6** | | |
| **7** | Other expenses (see instructions) | **7** | | |
| **8** | **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4) | **8** | | |

### Section B – Minimum Asset Amount

| | | | (A) Prior Year | (B) Current Year (optional) |
|---|---|---|---|---|
| **1** | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | | |
| **a** | Average monthly value of securities | **1a** | | |
| **b** | Average monthly cash balances | **1b** | | |
| **c** | Fair market value of other non-exempt-use assets | **1c** | | |
| **d** | **Total** (add lines 1a, 1b, and 1c) | **1d** | | |
| **e** | **Discount** claimed for blockage or other factors (explain in detail in **Part VI**): | | | |
| **2** | Acquisition indebtedness applicable to non-exempt-use assets | **2** | | |
| **3** | Subtract line 2 from line 1d. | **3** | | |
| **4** | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). | **4** | | |
| **5** | Net value of non-exempt-use assets (subtract line 4 from line 3) | **5** | | |
| **6** | Multiply line 5 by .035. | **6** | | |
| **7** | Recoveries of prior-year distributions | **7** | | |
| **8** | **Minimum Asset Amount** (add line 7 to line 6) | **8** | | |

### Section C – Distributable Amount

| | | | | Current Year |
|---|---|---|---|---|
| **1** | Adjusted net income for prior year (from Section A, line 8, Column A) | **1** | | |
| **2** | Enter 85% of line 1. | **2** | | |
| **3** | Minimum asset amount for prior year (from Section B, line 8, Column A) | **3** | | |
| **4** | Enter greater of line 2 or line 3. | **4** | | |
| **5** | Income tax imposed in prior year | **5** | | |
| **6** | **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | **6** | | |

**7** ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

**Part V** **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

| **Section D – Distributions** | **Current Year** |
|---|---|
| **1** Amounts paid to supported organizations to accomplish exempt purposes | |
| **2** Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | |
| **3** Administrative expenses paid to accomplish exempt purposes of supported organizations | |
| **4** Amounts paid to acquire exempt-use assets | |
| **5** Qualified set-aside amounts (prior IRS approval required) | |
| **6** Other distributions (describe in **Part VI**). See instructions. | |
| **7** **Total annual distributions.** Add lines 1 through 6. | |
| **8** Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions. | |
| **9** Distributable amount for 2018 from Section C, line 6 | |
| **10** Line 8 amount divided by line 9 amount | |

| **Section E – Distribution Allocations (see instructions)** | **(i) Excess Distributions** | **(ii) Underdistributions Pre-2018** | **(iii) Distributable Amount for 2018** |
|---|---|---|---|
| **1** Distributable amount for 2018 from Section C, line 6 | | | |
| **2** Underdistributions, if any, for years prior to 2018 (reasonable cause required – explain in Part VI). See instructions. | | | |
| **3** Excess distributions carryover, if any, to 2018 | | | |
| **a** From 2013 . . . . . | | | |
| **b** From 2014 . . . . . | | | |
| **c** From 2015 . . . . . | | | |
| **d** From 2016 . . . . . | | | |
| **e** From 2017 . . . . . | | | |
| **f** **Total** of lines 3a through e | | | |
| **g** Applied to underdistributions of prior years | | | |
| **h** Applied to 2018 distributable amount | | | |
| **i** Carryover from 2013 not applied (see instructions) | | | |
| **j** Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| **4** Distributions for 2018 from Section D, line 7: $ | | | |
| **a** Applied to underdistributions of prior years | | | |
| **b** Applied to 2018 distributable amount | | | |
| **c** Remainder. Subtract lines 4a and 4b from 4. | | | |
| **5** Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. | | | |
| **6** Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. | | | |
| **7** **Excess distributions carryover to 2019.** Add lines 3j and 4c. | | | |
| **8** Breakdown of line 7: | | | |
| **a** Excess from 2014 . . . . . | | | |
| **b** Excess from 2015 . . . . . | | | |
| **c** Excess from 2016 . . . . . | | | |
| **d** Excess from 2017 . . . . . | | | |
| **e** Excess from 2018 . . . . . | | | |

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b;Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**SCHEDULE I** (Form 990)

Department of the Treasury
Internal Revenue Service

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22.**
► **Attach to Form 990.**
► **Go to *www.irs.gov/Form990* for the latest information**

OMB No. 1545-0047

**2018**

**Open to Public Inspection**

Name of the organization: AGING TOGETHER CORPORATION

**Employer identification number**: 46-2046459

## Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ **Yes** ☒ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| (1) PAPPAHANNOCK RAPIDAN COMMUNIT<br>15361 BRADFORD ROAD<br>CULPEPER, VA 22701 | | | 9,074. | 0. | | | |
| (2) | | | | | | | |
| (3) | | | | | | | |
| (4) | | | | | | | |
| (5) | | | | | | | |
| (6) | | | | | | | |
| (7) | | | | | | | |
| (8) | | | | | | | |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ► 1

3 Enter total number of other organizations listed in the line 1 table ► 0

**Part III** **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| | (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of noncash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
|---|---|---|---|---|---|---|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |

**Part IV** **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

| SCHEDULE O (Form 990 or 990-EZ) | Supplemental Information to Form 990 or 990-EZ | OMB No. 1545-0047 |
|---|---|---|
| | Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. | 2018 |
| Department of the Treasury Internal Revenue Service | ► Go to *www.irs.gov/Form990* for the latest information. | Open to Public Inspection |

| Name of the organization | Employer identification number |
|---|---|
| AGING TOGETHER CORPORATION | 46-2046459 |

**FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION**

TRANSPORTATION SUPPORT, INCLUDING THE EXPENSES OF WHEELCHAIR VANS AND RECRUITMENT OF VOLUNTEER DRIVERS.

OTHER PROGRAMS, INCLUDING PROGRAMS HIGHLIGHTING THE ACCOMPLISHMENTS OF OLDER ADULTS.

**FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS**

THE ANNUAL FORM 990 IS REVIEWED AND APPROVED BY THE EXECUTIVE DIRECTOR AND THE TREASURER; THEY RECEIVE FULL BOARD APPROVAL PRIOR TO FILING THE RETURN.

**FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT**

THE ORGANIZATION'S BOARD OF DIRECTORS REVIEWS AND DETERMINES THE EXECUTIVE DIRECTOR'S COMPENSATION. THE EXECUTIVE DIRECTOR'S COMPENSATION IS ASSESSED AND DETERMINED ANNUALLY IN CONJUNCTION WITH THE ANNUAL PERFORMANCE EVALUATION PROCESS.

**FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE**

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CERTAIN POLICY DOCUMENTS, AND ITS FINANCIAL STATEMENTS AVAILABLE ON REQUEST, AT THE DISCRETION OF MANAGEMENT.

**FORM 990, PART IX, LINE 24E**
**OTHER EXPENSES**

| | (A) TOTAL | (B) PROGRAM SERVICES | (C) MANAGEMENT & GENERAL | (D) FUNDRAISING |
|---|---|---|---|---|
| BOOKS, SUBSCRIPTIONS | 183. | | | |
| MEETINGS AND CONFERENCES | 989. | | | |
| MEMBERSHIP DUES | 695. | | | |
| OTHER EXPENSES | 249. | | | |
| POSTAGE AND SHIPPING | 543. | | | |
| STAFF DEVELOPMENT | 500. | | | |
| VENUE RENTAL | 1,600. | 1,600. | | |
| VOLUNTEER APPRECIATION LUNCHEO | 745. | | | |
| TOTAL | $ 5,504. | $ 1,600. | $ 0. | $ 0. |

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: JUN 11 2014

AGING TOGETHER CORPORATION
PO BOX 367
CULPEPER, VA 22701-0367

Employer Identification Number:
46-2046459
DLN:
17053134311033
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
June 30
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
February 6, 2013
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Sincerely,

Tamera Ripperda
Director, Exempt Organizations

Enclosure: Publication 4221-PC

Letter 947

Rappahannock-Rapidan
REGIONAL COMMISSION

OFFICERS

CHAIRMAN
ROBERT COINER

VICE-CHAIRMAN
MEAGHAN TAYLOR

TREASURER
JERRY WOOD

SECRETARY &
EXECUTIVE DIRECTOR
PATRICK L. MAUNEY

COMMISSIONERS

CULPEPER COUNTY
JOHN EGERTSON
STEVEN L. WALKER

TOWN OF CULPEPER
CHRIS HIVELY
MEAGHAN TAYLOR

FAUQUIER COUNTY
CHRISTOPHER T. BUTLER
PAUL S. McCULLA

TOWN OF THE PLAINS
CHRISTOPHER R. MALONE

TOWN OF REMINGTON
EVAN H. "SKEET" ASHBY

TOWN OF WARRENTON
BRANDIE SCHAEFFER
JERRY WOOD

MADISON COUNTY
JACK HOBBS
CHARLOTTE HOFFMAN

TOWN OF MADISON
WILLIAM L. LAMAR

ORANGE COUNTY
JAMES CROZIER
R. BRYAN DAVID

TOWN OF GORDONSVILLE
ROBERT COINER

TOWN OF ORANGE
MARTHA B. ROBY
GREG WOODS

RAPPAHANNOCK COUNTY
GARREY W. CURRY, JR.
ROGER WELCH

TOWN OF WASHINGTON
FREDERIC CATLIN

As of October 2019

December 27, 2019

Ms. Mary Jane Costello
Madison County Finance Director
302 Thrift Road
Madison, VA 22727
* Via Email: mjcostello@madisonco.virginia.gov *

Dear Ms. Costello:

Please find attached a copy of the Regional Commission's FY 2021 annual budget request/per capita dues assessment and associated supporting documentation, as authorized by the Members of the Regional Commission at their August 23, 2019 meeting. At that time, the Regional Commission adopted an unchanged per capita rate of $0.83 along with the utilization of 2018 population estimates from the U.S. Census Bureau population estimates program, per the organizational bylaws.

Accordingly, funds are requested for FY 2021 to support the Regional Commission's work in support of priorities and projects identified by the Commission Board and our member jurisdictions. The total amount requested from the County to support the Regional Commission's FY 2021 annual budget is **$10,833.16** and is outlined below.

| | Est. Population (2018) | | less town(s) | | per capita rate | | FY'21 assessment |
|---|---|---|---|---|---|---|---|
| Madison | (13,295 | - | 243) | x | .83 | = | $10,833.16 |

The County's past and ongoing support plays a critical role in enabling staff to leverage outside grant monies on behalf of member jurisdictions. In recent years, an increasing number of public, non-profit, and private funding sources having instituted thresholds for the amount of cash match required in order for organizations to qualify for grant awards. Staff at the Regional Commission continues to identify new funding sources to offset these changes. As always, our pledge remains to serve as careful and conservative stewards of local resources, using those funds to support priorities identified by the Regional Commission and our member jurisdictions.

On behalf of the Rappahannock-Rapidan Regional Commission, I thank you for the County's past and continuing support, and for the County's support of the Regional Housing funding for Foothills Housing Network submitted under separate cover.

Sincerely,

Patrick L. Mauney
Executive Director

Encl

420 Southridge Parkway, Suite 106, Culpeper, Virginia 22701
Phone 540.829.7450 Fax 540.829-7452

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE: January 13, 2020**

| **IDENTIFICATION** | |
|---|---|
| *Organization/Agency Name*: | Rappahannock-Rapidan Regional Commission<br>**Foothills Housing Network Request** |
| *Street Name:* | 420 Southridge Parkway, Suite 106<br>Culpeper, VA 22701 |
| *Mailing Address:* | Same as above |
| *Agency Contact:* | Patrick Mauney, Executive Director |
| *Telephone Number:* | (540) 829-7450, ext. 11 |
| *E-mail Address – Agency Contact* | plmauney@rrregion.org |
| *Agency's Web Address:* | http://www.rrregion.org<br>http://www.foothillshousing.org |
| *Federal Tax ID#:* | 54-0944913 |
| *Audit:* | ☒Yes ☐No |

| **PURPOSE/NARRATIVE** |
|---|
| *Missions and Goals:*<br><br>The Foothills Housing Network (FHN) is a partnership of homeless service providers and other health and human services stakeholders in the Rappahannock-Rapidan region. RRRC serves as the lead agency and is responsible for administration of FHN as well as coordination of grant applications on behalf of FHN to the state and federal government, program evaluation, Point-in-Time count coordination and reporting, and ensuring compliance with state and federal Continuum of Care (CoC) requirements.<br><br>Member organizations that serve the Madison County community include the Madison County Department of Social Services, Madison Emergency Services Association, Services to Abused Families (SAFE), Legal Aid Works, Rappahannock-Rapidan Community Services, |

Skyline CAP, Aging Together, Culpeper Community Development Corporation, Community Touch, and the Rappahannock-Rapidan Regional Commission.

The FHN 10-year Plan includes three overarching goals for the region to ensure that homelessness is brief, rare, and non-recurring:

1. Reduce the number of individuals/households who become homeless
2. Shorten the length of time an individual or household is homeless
3. Reduce the number of individuals/households that return to homelessness

FHN is guided by a strategic plan completed in 2017 and 2018. The planning process developed a set of strategies to enhance the collaboration and improve coordination in the region.

*Experience and Accomplishments:*

Since 2009, the Rappahannock-Rapidan Regional Commission (RRRC) has served as lead agency for the Foothills Housing Network (FHN), which is the partnership that coordinates homeless services for the PD9 region. Since 2012, RRRC has been responsible for administering and providing project management for all state and federal homeless prevention and Rapid Re-housing grants in the region.

This request to Madison County, when combined with requests to the other four counties and eight towns in the Rappahannock-Rapidan region and leveraged state funds from the Virginia Homeless Solutions Program (VHSP), provides funding for RRRC's Human Services Program Manager/Continuum of Care Coordinator position. This position serves as the FHN facilitator, grant-writer, grant administrator and project manager for most of the federal and state homeless grants in the region. Grant funding pays only a small percentage of the position cost and it is not possible to sustain the position without contribution from all of RRRC's member localities. This Lead Agency position is necessary for the operation of FHN rapid re-housing, prevention and central entry programs. Individual nonprofit service providers cannot apply independently for the state and federal homeless grants; applications must be submitted through a regional Lead Agency.

*Benefits of Funding:*

In FY 2020, state and federal grants awarded to the Foothills Housing Network, with grant-writing and coordination support from RRRC totaled over $610,000 and helped prevent homelessness and provide housing assistance for more than 200 individuals through Homelessness Prevention and Rapid Re-Housing grants. In total, FHN partners operating shelters or transitional housing units served nearly 620 individuals, including more than 260 children during the 2019 fiscal year.

FHN uses the Homeless Management Information System (HMIS) to record data on services provided and outcomes achieved for each individual and household served. Quarterly and

annual reports are produced from HMIS data. Point-in-time results are used to produce trend outcomes. For example, while the number of homeless individuals identified in the annual Point-in-time Count has been trending downward since 2011. The 2019 Point-in-Time count found 165 individuals in 92 households in homeless shelters or unsheltered in the region.

FHN's Homeless Central Entry Program, which is operated by RRRC, received over 2,300 calls in FY 2019. These numbers reflect citizens and residents of the region seeking housing assistance, ranging from homeless households to citizens seeking eviction assistance, rental information, or other housing requests. While Foothills Housing Network can assist those residents that are homeless or are immediately facing homelessness through existing grant resources, the partnership also provides resource referral and diversion, in accordance with federal and state guidelines.

A conservative approach would instruct FHN to expect similar requests in future fiscal years with some potential for variation based on geography. In FY 2019, 32.1% of requests met pre-screening requirements for Homeless Prevention and/or Rapid Re-Housing funding available through FHN partners. However, it should also be noted that the amount of funding available through state and federal grants is limited and does not ensure that all requests are able to be met. Funding and/or service provision is not projected nor budgeted by jurisdiction at this time.

**FHN Central Entry (FY 2019)**

| County | Requests (FY 2019) |
|---|---|
| **Culpeper** | 890 (37.9%) |
| **Fauquier** | 817 (35.9%) |
| **Madison** | 112 (4.8%) |
| **Orange** | 331 (14.1%) |
| **Rappahannock** | 24 (1.0%) |
| **Outside Region** | 172 (7.3%) |

*Intention of Use:*

The requested funds will be used as Madison County's allocation for one-half of the FY 2021 salary of the RRRC Program Manager who oversees the Foothills Housing Network and its homeless services programs. This staff position is responsible for homeless services grant writing and administration, program evaluation, the annual Point-in-time count, facilitating FHN meetings, and ensuring compliance with state and federal Continuum of Care requirements, which includes producing a 10-year Plan to End Homelessness, and mandated policies and procedures. The funds will allow continuation of this regional cooperative effort, which has been in effect since FY 2016. The local funding provided by each county and town in the region enabled RRRC and the Foothills Housing Network to secure over $610,000 in state and federal grants for the region in FY 2020. These funds would be unavailable without the presence of FHN as the coordinating and convening entity for homelessness response. A summary of the FY 2020 grants received in support of FHN is attached.

Local funding for the FHN request is received from each county and town in the Rappahannock-Rapidan region. The funding equation that is in place was conceived in 2015 using 2013 population estimates and remains unchanged for this request. Each jurisdiction contributes at a per capita rate of $0.196, with each of the five counties contributing a base rate of $3,000 in addition to the per capita rate. Madison County's requested FY 2021 contribution ($5,548.42) is equal to 11.4% of the total request ($48,604.38) to the region's jurisdictions (see attachment for complete breakdown).

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☒ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☒ *General Community/Civic*<br>☒ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 5,548.42 |

Signature: _____ Title: Executive Director

Printed Name: Patrick L. Mauney Date: 12/27/2019

## RRRC Regional Housing Support - Local Funding Breakdown

| | Population (2013) | Percent Overall | 3K per county | Pct Pop * Remaining Amount | Total |
|---|---|---|---|---|---|
| *formula* | | | | | |
| **Culpeper County** | 31,361 | 18.3% | 3,000 | $ 6,160.08 | 9,160.08 |
| Town of Culpeper | 17,145 | 10.0% | | $ 3,367.71 | 3,367.71 |
| **Fauquier County** | 56,509 | 33.0% | 3,000 | $ 11,099.78 | 14,099.78 |
| Town of Remington | 615 | 0.4% | | $ 120.80 | 120.80 |
| Town of The Plains | 221 | 0.1% | | $ 43.41 | 43.41 |
| Town of Warrenton | 9,862 | 5.8% | | $ 1,937.14 | 1,937.14 |
| **Madison County** | 12,974 | 7.6% | 3,000 | $ 2,548.42 | 5,548.42 |
| Town of Madison | 226 | 0.1% | | $ 44.39 | 44.39 |
| **Orange County** | 28,279 | 16.5% | 3,000 | $ 5,554.70 | 8,554.70 |
| Town of Gordonsville | 1,555 | 0.9% | | $ 305.44 | 305.44 |
| Town of Orange | 4,855 | 2.8% | | $ 953.64 | 953.64 |
| **Rappahannock County** | 7,344 | 4.3% | 3,000 | $ 1,442.54 | 4,442.54 |
| Town of Washington | 134 | 0.1% | | $ 26.32 | 26.32 |
| | **171,080** | 100.0% | 15,000 | $ 33,604.38 | 48,604.38 |

| **Foothills Housing Network FY20 Grants** | Grant Amount | RRRC Salaries |
|---|---|---|
| • VHDA Capacity Building; Grantee: RRRC<br>For AmeriCorps VISTA Member Support | $30,000 | $0 |
| • HUD Continuum of Care; Grantee: People, Inc.<br>For Rapid Re-housing | $46,510 | $0 |
| • HUD CoC Permanent Supportive Housing;<br>Grantee: People, Inc. | $114,404 | $0 |
| • Virginia Homeless Solutions Program (VHSP)<br>Grantees:<br>o CCDC Emergency Shelter - $48,945<br>o People, Incorporated - RRH and Prevention - $256,929<br>o FHN Planning - $25,101<br>o RRRC Central Entry - $55,000*<br>o FHN Homeless Management Information System - $18,043<br>o FHN Administration - $10,826 | $414,844 | $84,501* |
| • PATH Outreach Grant; Grantee: RRRC | $5,000 | $0 |
| TOTAL FY 20 | $610,758 | $84,501 |

**Applied For As of Request Deadline**

| | | |
|---|---|---|
| Virginia Housing Trust Fund; Grantee: People, Inc.<br>For Outreach/Case Management by RRCS-AAA | $100,000 | $0 |

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION

AUDITED FINANCIAL STATEMENTS
YEAR ENDED JUNE 30, 2019

DUNHAM, AUKAMP & RHODES, PLC
Certified Public Accountants
Chantilly, Virginia

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION COMMISSIONERS

As of June 30, 2019

Culpeper County
Mr. John Egertson
Mr. Steven L. Walker

Town of Culpeper
Mr. Chris Hively
Ms. Meaghan Taylor, Commission Vice-Chair

Fauquier County
Mr. Christopher T. Butler
Mr. Paul S. McCulla

Town of Warrenton
Ms. Brandie Schaeffer
Mr. Jerry Wood, Commission Treasurer

Town of Remington
Mr. Evan H."Skeet" Ashby, III

Town of The Plains
Mr. Christopher R. Malone

Madison County
Mr. Jack Hobbs
Ms. Charlotte Hoffman

Town of Madison
Mr. William L. Lamar

Orange County
Mr. James P. "Jim" Crozier
Mr. R. Bryan David

Town of Orange
Ms. Martha B. Roby
Mr. Greg Woods

Town of Gordonsville
Mr. Robert K. 'Bob' Coiner, Commission Chair

Rappahannock County
Mr. Garrey W. Curry, Jr.
Mr. Roger Welch

Town of Washington
Mr. Frederic Catlin

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION

## TABLE OF CONTENTS


| | Page |
|---|---|
| Independent Auditor's Report | 1-2 |
| Management's Discussion and Analysis | 3-7 |
| Financial Statements | |
| Statement of Net Position | 8 |
| Statement of Revenues, Expenses and Changes in Net Position | 9-10 |
| Statement of Cash Flows | 11 |
| Notes to Financial Statements | 12-29 |
| Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards* | 30-31 |
| Schedule of Revenues and Expenses – Budget and Actual (Budgetary Basis) | 32-34 |
| Schedule of Changes in the Commission's Net Pension Liability and Related Ratios | 35 |
| Schedule of Employer Contributions | 36 |
| Notes to Required Supplementary Information | 37 |

**Dunham, Aukamp & Rhodes, PLC**
*Certified Public Accountants*

4437 Brookfield Corporate Dr., Suite 205-D
Chantilly, VA 20151

# INDEPENDENT AUDITOR'S REPORT

To the Board of Commissioners
Rappahannock-Rapidan Regional Commission
Culpeper, Virginia

**Report on the Financial Statements**

We have audited the accompanying financial statements of the business-type activities and the aggregate remaining fund information of the Rappahannock-Rapidan Regional Commission as of and for the year ended June 30, 2019, and the related notes to the financial statements, which collectively comprise the Commission's basic financial statements as listed in the table of contents.

***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

***Auditor's Responsibility***

Our responsibility is to express opinions on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the *Specifications for Audits of Authorities, Boards, and Commissions*, issued by the Auditor of Public Accounts of the Commonwealth of Virginia. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made be management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

*Opinions*

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the business-type activities and the aggregate remaining fund information of the Rappahannock-Rapidan Regional Commission as of June 30, 2019 and the respective changes in financial position, and where applicable, cash flows thereof for the year then ended in accordance with accounting principles generally accepted in the United States of America.

*Other Matters*

*Required Supplementary Information*

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis, schedule of revenue and expenses-budget and actual (budgetary basis), the schedule of employer's share of net pension liability and related ratios, and the schedule of employer contributions on pages 3 through 7 and pages 32 through 37 be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

***Other Reporting Required by Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated December 11, 2019, on our consideration of the Rappahannock-Rapidan Regional Commission's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Rappahannock-Rapidan Regional Commission's internal control over financial reporting and compliance.

Dunham, Aukamp & Rhodes, PLC

Certified Public Accountants
Chantilly, Virginia

December 11, 2019

# Management's Discussion and Analysis

As management of the Rappahannock-Rapidan Regional Commission we offer this narrative overview and analysis of the financial performance of the Commission's financial activities for the year ended June 30, 2019.

## Overview of the Financial Statements

This discussion and analysis is intended to serve as an introduction to the Commission's basic financial statements. Since the Commission is engaged only in business-type activities, its basic financial statements are comprised of only two components: 1) financial statements and 2) notes to the financial statements.

**Enterprise fund financial statements.** The enterprise fund financial statements are designed to provide readers with a broad overview of the Commission's finances, in a manner similar to a private-sector business.

The statement of net position presents information on the Commission's assets, deferred outflow of resources, liabilities and deferred inflow of resources, with the difference between them reported as net position. Over time, increases or decreases in net position may serve as a useful indicator of whether the financial position of the Commission is improving or deteriorating.

The statement of revenues, expenses and changes in net position presents information showing how the Commission's net position changed during the most recent fiscal year. All changes in net position are reported as soon as the underlying event giving rise to the change occurs, regardless of the timing of the cash flows. Thus, revenues and expenses are reported in this statement for some items that will only result in cash flows in future fiscal periods, (i.e. earned but unused vacation leave).

**Notes to financial statements.** The notes to the financial statements provide additional disclosure required by governmental accounting standards and provide information to assist the reader in understanding the Commission's financial condition. The MD&A is intended to explain the significant changes in financial position and the differences in operation between the current year and prior year.

## Financial Highlights FY2019

The financial position of the Rappahannock-Rapidan Regional Commission has stabilized over the past several fiscal years, following a period between 2010 and 2015 that required annual utilization of reserve funds to balance revenues and expenditures. In FY 2017, the Commission made the determination to begin restoring reserve funds with a primary goal of achieving a balance of six months' operating expenses. This stated strategy, along with successful grant applications for environmental, transportation, housing, and hazard mitigation activities beginning in FY 2016 have resulted in increases in net position in FY 2017, FY 2018, and FY 2019.

In FY 2019, the Commission continued its successful programmatic efforts in housing and homelessness leadership, transportation and mobility planning, tourism, environmental coordination, and regional coordination. Of particular note in FY 2019 are the successful work of the Commission on Chesapeake Bay Watershed Implementation Planning in coordination with the Virginia Department of Environmental Quality and Secretary of Natural Resources.

## Financial Analysis

The following table reflects the condensed Statements of Net Position:

**Summary Statements of Net Position**
**June 30,**

| | 2019 | 2018 |
|---|---|---|
| Current Assets | $373,794 | $337,950 |
| Capital Assets (net) | 208,456 | 195,153 |
| Net Pension Asset | 331,439 | 449,945 |
| Total Assets | 913,689 | 983,048 |
| Deferred Outflows of Resources | 96,814 | 24,629 |
| Current Liabilities | 97,498 | 86,721 |
| Long-term Liabilities | 176,806 | 191,932 |
| Total Liabilities | 274,304 | 278,653 |
| Deferred Inflows of Resources | 13,925 | 172,357 |
| Invested in capital assets, net of debt | 16,524 | (11,204) |
| Unassigned | 705,750 | 567,871 |
| Total Net Position | $722,274 | $556,667 |

The Commission's total net position (which is the Commission's bottom line) increased by $165,607 during the year. It should be noted that $112,111 of this increase was due to the current year GASB 68 adjustment and that readily accessible assets increased by $35,844 during the year. This increase in net position reflects our efforts to secure new grants and to manage expenses for the agency. The improved net position also enables the Commission to better manage our cash flow and provide needed cash match for new grants, to maintain staffing levels to support future needs of our member jurisdictions, and to maintain reserve funds for long-term liabilities, including the Commission-owned office building.

The following summarizes the revenues and expenses of the Commission:

| | Changes in Net Position For the Years Ended June 30, 2019 | 2018 |
|---|---|---|
| Operating revenues | | |
| Grants | $744,908 | $ 761,532 |
| Dues | 145,375 | 143,555 |
| Other operating revenues | 82,228 | 51,326 |
| Total operating revenues | 972,511 | 956,413 |
| Non-operating revenues | | |
| GASB 68 adjustment | 112,111 | 167,553 |
| Interest | 3,487 | 1,848 |
| Net gain/(loss) on investments | 3,927 | (335) |
| Loss on disposal of equipment | - | (451) |
| Total non-operating revenues | 119,525 | 168,615 |
| Total Revenues | 1,092,036 | 1,125,028 |
| Operating Expenses | | |
| Salaries and wages | 395,999 | 391,349 |
| Freedom grant | 220,496 | 200,254 |
| Fringe benefits | 72,188 | 98,232 |
| Farmers market promotion program | 65,660 | 48,238 |
| Regional ride sharing | 51,170 | 47,154 |
| Veteran transportation and community living | 19,831 | - |
| Virginia Housing Development Authority | 11,000 | 24,313 |
| Vanpool | 8,552 | - |
| Other grant expenses | 5,438 | 3,851 |
| Regional tourism | 4,717 | 10,531 |
| PATH planning grant | 2,470 | 5,113 |
| Other operating expenses | 46,684 | 43,265 |
| Total operating expenses | 904,205 | 872,300 |
| Depreciation and amortization | 12,733 | 12,164 |
| Interest paid on debt | 9,491 | 10,159 |
| Total expenses | 926,429 | 894,623 |
| Change in net position | 165,607 | 230,405 |
| Net position beginning of year | 556,667 | 326,262 |
| Net position end of year | $722,274 | $ 556,667 |

## Revenues

For the fiscal year ended June 30, 2019, total revenues decreased by $32,992 from the prior year. However, $55,442 of the decrease was due to the decrease in current year GASB 68 adjustment. Operating revenues increased $16,098 from FY2018 to FY2019. The increased operating revenue is largely due to continued work on the Section 5310 (New Freedom) grants for mobility management and Foothills Express operation through the Department of Rail and Public Transportation, Farmers Market Promotion Program, and closeout of several grants during the year. Additionally, the continuation of grants from the Department of Rail and Public Transportation in support of RRRC's Commuter Services program, and the Rural Transportation Planning grant from the Virginia Department of Transportation are important for RRRC's ability to continue providing support for successful, long-term projects. Finally, RRRC's regional housing efforts were aided by successful grants from the Virginia Homeless Solutions Program, but also from funding allocated by member jurisdictions in support of a 0.5 Full-Time Equivalent housing position.

## Expenses

For the fiscal year ended June 30, 2019, total expenses increased by $31,806 from the prior year. Personnel costs such as health insurance and retirement were stable from FY 2018 to FY 2019, although salaries and wages – the largest expense for the Commission – increased by $45,120 with a full staff for most of the fiscal year. Total expenses were lower than our total revenues.

## Capital Assets

At the end of fiscal year 2019, the Commission had invested $426,745 in capital assets which consisted of the office building, office furniture and equipment. This amount has been depreciated by $218,289, for a carrying amount of $208,456.

## Long-Term Debt

On August 12, 2000 the Commission received loan proceeds in the amount of $376,000 from the U.S. Department of Agriculture to finance construction of office facilities. The loan is due in monthly installments of $1,993 through July 12, 2029. Interest on the loan is at 4.75%. The balance of this loan was $191,932 as of June 30, 2019.

## Economic Factors and Future Projects

The Commission receives a substantial amount of its support from local and state governments. The Regional Commission was successful in beginning to restore its reserve fund balance in FY 2017 based on controlling expenses and continued success with state and federal grant applications. The Regional Commission expects that revenues and expenses will be more closely balanced in future years. Operating expenses will generally remain at a level in proportion to the revenues.

Presently, management of the Commission is not aware of any significant changes in conditions that would have a significant effect on the financial position or results of activity of the Commission in the near future. However, uncertainty at the federal and state level may cause some long-term changes, depending upon funding priorities and availability of grant funding. In particular, funding for housing, transit, mobility management, and environmental planning has been the subject of discussion at the state and federal levels during the past fiscal year.

The Commission is currently involved in numerous projects including but not limited to agricultural development, rural transportation planning, ridesharing, environmental planning, regional housing, economic development, community development planning, and regional tourism.

## Contacting the Commission's Financial Management

This financial report is designed to provide a general overview of the Commission's finances for all those with an interest in the government's finances. Questions concerning any of the information provided in the report or requests for additional financial information should be directed to the Commission's Executive Director at 420 Southridge Parkway, Suite 106, Culpeper, VA 22701.

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION
## STATEMENT OF NET POSITION
### JUNE 30, 2019

| | |
|---|---|
| ASSETS | |
| Cash and investments | $ 264,035 |
| Accounts receivable | 109,759 |
| Net pension asset | 331,439 |
| Capital assets, net | 208,456 |
| Total Assets | 913,689 |
| DEFERRED OUTFLOWS OF RESOURCES | |
| Pension contributions after the measurement date | 1,368 |
| Difference between expected and actual experience | 95,446 |
| Total Deferred Outflows of Resources | 96,814 |
| LIABILITIES | |
| Accounts payable | 46,234 |
| Accrued liabilities | 10,758 |
| Accrued annual leave | 25,380 |
| Rural Development loan payable | 191,932 |
| Total Liabilities | 274,304 |
| DEFERRED INFLOWS OF RESOURCES | |
| Net difference between projected and actual earnings on plan investments | 13,925 |
| Total Deferred Inflows of Resources | 13,925 |
| NET POSITION | |
| Investment in capital assets, net of related debt | 16,524 |
| Unrestricted | 705,750 |
| Total Net Position | $ 722,274 |

See accompanying notes.

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION
# STATEMENT OF REVENUES, EXPENSES AND CHANGES IN NET POSITION
## FOR THE YEAR ENDED JUNE 30, 2019

| | |
|---|---|
| Operating Revenues: | |
| DEQ Chesapeake Bay watershed implementation plan III | $ 50,000 |
| Dues | 145,375 |
| Freedom grant | 242,057 |
| Hazard Mitigation | 13,820 |
| Rideshare program | 118,400 |
| Rural transportation program | 57,800 |
| State regional planning grant | 75,971 |
| Van pool grant | 8,000 |
| Virginia homeless solution program | 84,501 |
| Virginia Housing Development Authority VISTA grant | 11,000 |
| USDA farmers market promotion program | 83,359 |
| Other Income | |
| Orange County community development block grant | 2,000 |
| Regional housing | 48,605 |
| Regional tourism | 7,000 |
| VTC marketing leverage program grant | 19,831 |
| Miscellaneous | 4,792 |
| Total Operating Revenues | 972,511 |
| Operating Expenses: | |
| Annual meeting | 4,457 |
| Audit | 3,650 |
| Depreciation | 12,733 |
| Equipment | 1,733 |
| Freedom grant | 220,496 |
| Insurance health | 34,247 |
| Insurance liability | 1,295 |
| Insurance workers' compensation | 500 |
| Maintenance and repairs | 5,144 |
| Membership dues | 3,495 |
| Miscellaneous | 365 |
| PATH planning grant | 2,470 |
| Payroll taxes | 29,083 |
| Postage | 558 |

See accompanying notes.

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION
# STATEMENT OF REVENUES, EXPENSES AND CHANGES IN NET POSITION
## FOR THE YEAR ENDED JUNE 30, 2019

Operating Expenses (Continued):

| | |
|---|---|
| Printing | $ 1,760 |
| Regional tourism | 4,717 |
| Retirement | 8,358 |
| Rideshare | 51,170 |
| Rural transportation planning | 988 |
| Salary | 395,999 |
| Subscriptions and publications | 400 |
| Supplies | 4,267 |
| Technology | 4,381 |
| Travel | 10,239 |
| Utilities | 4,940 |
| USDA farmers market promotion program | 65,660 |
| Vanpool expense | 8,552 |
| Virginia Housing Development Authority | 11,000 |
| VTC marketing leverage program grant | 19,831 |
| Virginia homeless solution program expense | 4,036 |
| Watershed implementation plan | 414 |
| Total Operating Expenses | 916,938 |
| Operating Gain | 55,573 |
| Nonoperating Income (Expense) | |
| GASB 68 actuarial adjustment | 112,111 |
| Interest income | 3,487 |
| Net gain on investments | 3,927 |
| Interest expense | (9,491) |
| Total Nonoperating Income (Expense) | 110,034 |
| Change in Net Position | 165,607 |
| Net Position at beginning of year | 556,667 |
| Net Position at end of year | $ 722,274 |

See accompanying notes.

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION
## STATEMENT OF CASH FLOWS
### FOR THE YEAR ENDED JUNE 30, 2019

| | | |
|---|---|---|
| Cash Flows from Operating Activities: | | |
| Cash received from customers and users | $ | 958,719 |
| Payments to suppliers | | (499,273) |
| Payments to employees | | (390,929) |
| Net Cash Provided by Operating Activities | | 68,517 |
| Cash Flows from Capital and Related Financing Activities: | | |
| Principal payments on debt | | (14,425) |
| Interest payments on debt | | (9,491) |
| Net Cash Used in Capital and Related Financing Activities | | (23,916) |
| Cash Flows from Investing Activities | | |
| Purchases of new equipment | | (26,036) |
| Proceeds from investments | | 4,037 |
| Purchases of investments | | (4,037) |
| Interest earned | | 3,487 |
| Net Cash Used in Investing Activities | | (22,549) |
| Net Change in Cash and Cash Equivalents | | 22,052 |
| CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR | | 241,983 |
| CASH AND CASH EQUIVALENTS AT END OF YEAR | $ | 264,035 |
| Reconciliation of Operating Gain to Net Cash Provided by Operating Activities | | |
| Operating Gain | $ | 55,573 |
| Adjustments to Reconcile Operating Loss to Net Cash Provided by Operating Activities: | | |
| Depreciation | | 12,733 |
| GASB 68 adjustment | | 112,111 |
| Gain on investments | | 3,927 |
| Changes in current assets and liabilities: | | |
| Increase in accounts receivable | | (13,792) |
| Decrease in net pension asset | | 118,506 |
| Increase in deferred outflows | | (72,185) |
| Increase in accounts payable | | 5,006 |
| Increase in accrued liabilities | | 269 |
| Increase in accrued annual leave | | 4,801 |
| Decrease in deferred inflows | | (158,432) |
| Net Cash Provided by Operating Activities | $ | 68,517 |

See accompanying notes.

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION
## NOTES TO FINANCIAL STATEMENTS

NOTE 1 – Summary of Significant Accounting Policies

The financial statements of the Rappahannock-Rapidan Regional Commission conform to generally accepted accounting principles (GAAP) applicable to government units promulgated by the Government Accounting Standards Board (GASB). The following is a summary of the more significant accounting policies:

A. The Financial Reporting Entity

The Rappahannock-Rapidan Regional Commission was chartered in 1971. The Commission includes the Counties of Culpeper, Fauquier, Madison, Orange and Rappahannock and the towns of Remington, Warrenton, Culpeper, Orange, Madison, Gordonsville, Washington and The Plains. Regional Commissions achieved their being and legal status by the Virginia Area Development Act, passed by the General Assembly on March 13, 1968. The Act was an amendment of Chapters 34 and 35 of the *Code of Virginia* and provided the State with a uniform set of sub-state administrative boundaries and local government the authority to create planning and/or service district commissions, all in an effort to improve state and local relations which would enable government to be more responsive to the needs of its people.

B. Financial Statement Presentation

Management's Discussion and Analysis – GASB Statement #34 requires the financial statements be accompanied by a narrative introduction and analytical overview of the government's financial activities in the form of "management's discussion and analysis" (MD&A).

Enterprise Fund Financial Statements:

The Statement of Net Position is designed to display the financial position of the Commission. Governments will report all capital assets and will report depreciation expense – the cost of "using up" capital assets – in the Statement of Revenues, Expenses and Changes in Net Position. The net position of the government is broken down into three categories – 1) invested in capital assets, net of related debt; 2) restricted; and 3) unassigned.

C. Basis of Accounting

The accounting and reporting policies of the Commission relating to the accompanying basic financial statements conform to accounting principles generally accepted in the United States of America applicable to state and local governments. Generally accepted accounting principles for local governments include those principles prescribed by the Governmental Accounting Standards Board (GASB) the American Institute of Certified Public Accountants in the Publication entitled Audits of State and Local Government Units and by the Financial Accounting Standards Board (when applicable).

D. Budgets and Budgetary Accounting

A budget is prepared for information and fiscal planning purposes. None of the participating entities are required to approve the budget. The budget is adopted as a planning document and is not a legal control on expenses. The budget is prepared on the same basis of accounting as the actual financial statements are prepared except for depreciation and capital asset purchases are expensed.

NOTE 1 – Summary of Significant Accounting Policies (continued)

E. Capital Assets

Property, plant and equipment purchased is stated at cost or estimated cost for all items with an initial costs exceeding $1,000. Donated property is recorded at fair market value prevailing at the date of donation. Depreciation for capital asset has been provided for over the following estimated useful lives using the straight-line method:

| | |
|---|---|
| Equipment | 3-12 years |
| Buildings | 39 years |

Activity of the capital assets for the Commission for the year ended June 30, 2019 was as follows:

| | Balance July 1, 2018 | Additions | Disposals | Balance June 30, 2019 |
|---|---|---|---|---|
| Office furniture and equipment | $ 32,454 | $ 4,183 | $ - | $ 36,637 |
| Buildings and improvements | 368,255 | 21,853 | - | 390,108 |
| Less: Accumulated Depreciation | (205,556) | (12,733) | - | (218,289) |
| Net capital assets | $195,153 | $ 13,303 | $ - | $ 208,456 |

F. Cash and Cash Equivalents

For purposes of the statement of cash flows, the Commission considers all highly liquid investments with a maturity of three months or less to be cash equivalents.

G. Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principals requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

H. Accounts Receivable

Accounts receivable are reported at their gross value when earned as the underlying exchange transaction occurs. Receivables related to non-exchange transactions are recognized when their eligibility requirements have been met. Receivables are reduced by the estimated portion that is expected to be uncollectible. This estimate is made based on collection history and current information regarding the credit worthiness of the debtors. When continued collection activity results in receipts of amounts previously written off, revenue is recognized for the amount collected. Management considers all of the receivables collectible at June 30, 2019, and no allowance for doubtful accounts has been provided.

NOTE 1 – Summary of Significant Accounting Policies (continued)

I. Deferred Outflows/Inflows of Resources

The Commission reports deferred outflows of resources on its statement of net position. Deferred outflows of resources represent a consumption of net position that applies to a future period(s) and so will not be recognized as an outflow of resources (expense/expenditure) until the applicable period. The Commission has two items that qualify for reporting in this category. They are the employer pension contributions made after the actuarial measurement date and the difference between expected and actual experience. Employer contributions made after the measurement date of June 30, 2019, were $1,368. The difference between expected and actual experience, per the actuarial report dated of June 30, 2018, was $95,446.

The Commission reports deferred inflows of resources on its statement of net position. Deferred inflows of resources represent an acquisition of net position that applies to a future period(s) and so will not be recognized as an inflow of resources (revenue) until a future period. The Commission had three items that qualify for reporting in this category. The net difference between the projected and actual earnings on plan investments, per the actuarial report dated of June 30, 2018, was $13,925.

J. Pension

For purposes of measuring the net pension liability, deferred outflows of resources and deferred inflows of resources related to pensions, and pension expense, information about the fiduciary net position of the Commission's Retirement Plan and additions to/deductions from the Commission's Retirement Plan's net fiduciary position have been determined on the same basis as they were reported by Virginia Retirement System (VRS). For this purpose, benefit payments (including refunds of employee contributions) are recognized when due and payable in accordance with the benefit terms. Investments are reported at fair value.

K. Restricted Resources

When both restricted and unrestricted resources are available for use, it is the Commission's policy to use restricted resources first, then unrestricted, as they are needed.

L. Advertising Costs

Advertising costs are expensed as incurred.

NOTE 2 - Cash and Investments

State statute authorizes the Commission to invest in obligations of the U. S. Treasury, agencies, and instrumentalities, repurchase agreements, certificates of deposit or time deposits insured by the FDIC, and the local government investment pool. Cash and cash equivalents include amounts in demand deposits as well as short-term, highly liquid investments with a maturity date within three months of the date acquired by the Commission. Deposits are carried at cost, which approximates fair value. At year end, the carrying value of the Commission's bank account balances was $30,862, and the bank balances totaled $45,422.

There is no custodial credit risk to these accounts, as the entire bank balance was covered by federal depository insurance or collateralized in accordance with the Virginia Security for Public Deposits Act (Act). Under the Act, banks holding public deposits in excess of the amounts insured by the FDIC must pledge collateral in the amount of 50% of excess deposits to a collateral pool in the name of the State Treasury Board. Savings and loan institutions are required to collateralize 100% of deposits in excess of FSLIC limits. The State Treasury Board is responsible for monitoring compliance by banks and savings and loans. Accordingly, there is no custodial risk for either of the accounts as they are fully collateralized. In addition there is no interest rate risk as the interest rates are adjusted daily.

The Commission is a participant in the Virginia Investment Pool, a jointly-administered investment pool. Jointly-administered investment pools, such as VIP, are allowable investment as identified in the Investment of Public Funds Act. Participants own and control VIP, which is a governmental trust under Section 115 of the Internal Revenue Code. Public Trust Advisors, LLC (PTA) serves as Investment Manager. PTA is a Securities and Exchange Commission registered, independent investment advisor with significant local government investment pool experience. PTA manages more than $30 billion in public funds nationwide. Wells Fargo Bank is VIP's custodian bank.

The investment pool has not been assigned a risk category since the Commission is not issued securities, but rather owns an undivided interest in the assets of the pool. At June 30, 2019 the Commission's balance in the investment pool was $233,174 and included the follow investments:

| | |
|---|---|
| VIP Liquidity Pool Account | $129,690 |
| VIP Long Term Bond Fund | 103,484 |

NOTE 3 – Rural Development Loan

The Commission received loan proceeds in the amount of $376,000 from the Department of Agriculture on August 12, 2000. The loan is secured by the Commission's real estate and due in monthly installments of $1,993 including interest of 4.75% through July 12, 2029.

Current year debt activity was as follows:

| Beginning Balance | Increases | Decreases | Ending Balance |
|---|---|---|---|
| $206,357 | $ - | $ 14,425 | $191,932 |

NOTE 3 – Rural Development Loan (continued)

Mandatory debt service requirements consist of the following:

| Year Ending June 30, | Principal | Interest |
|---|---|---|
| 2020 | $ 15,126 | $ 8,790 |
| 2021 | 15,860 | 8,056 |
| 2022 | 16,630 | 7,286 |
| 2023 | 17,437 | 6,479 |
| 2024 | 18,288 | 5,628 |
| 2025-2029 | 105,632 | 13,948 |
| 2030 | 2,959 | 16 |
| Total | $ 191,932 | $ 50,203 |

NOTE 4 – Defined Benefit Pension Plan

Pensions

The Virginia Retirement System (VRS) Political Subdivision Retirement Plan is a multi-employer, agent plan. For purposes of measuring the net pension liability, deferred outflows of resources and deferred inflows of resources related to pensions, and pension expense, information about the fiduciary net position of the Commission's Retirement Plan and the additions to/deductions from the Commission's Retirement Plan's net fiduciary position have been determined on the same basis as they were reported by the Virginia Retirement System (VRS). For this purpose, benefit payments (including refunds of employee contributions) are recognized when due and payable in accordance with the benefit terms. Investments are reported at fair value.

Plan Description

All full-time, salaried permanent employees of the Commission are automatically covered by a VRS Retirement Plan upon employment. This plan is administered by the Virginia Retirement System (the System) along with plans for other employer groups in the Commonwealth of Virginia. Members earn one month of service credit for each month they are employed and for which they and their employer pay contributions to VRS. Members are eligible to purchase prior service, based on specific criteria as defined in the *Code of Virginia*, as amended. Eligible prior service that may be purchased includes prior public service, active military service, certain periods of leave, and previously refunded service.

The System administers three different benefit structures for covered employees – Plan 1, Plan 2, and Hybrid. Each of these benefit structures has a different eligibility criteria. The specific information for each plan and the eligibility for covered groups within each plan are set out in the table below:

NOTE 4 – Defined Benefit Pension Plan (continued)

| RETIREMENT PLAN PROVISIONS | | |
|---|---|---|
| **PLAN 1** | **PLAN 2** | **HYBRID RETIREMENT** |
| **About Plan 1**<br>Plan 1 is a defined benefit plan. The retirement benefit is based on a member's age, creditable service and average final compensation at retirement using a formula. | **About Plan 2**<br>Plan 2 is a defined benefit plan. The retirement benefit is based on a member's age, creditable service and average final compensation at retirement using a formula. | **About the Hybrid Retirement Plan**<br>The Hybrid Retirement Plan combines the features of a defined benefit plan and a defined contribution plan.<br>• The defined benefit is based on a member's age, creditable service and average final compensation at retirement using a formula.<br>• The benefit from the defined contribution component of the plan depends on the member and employer contributions made to the plan and the investment performance of those contributions.<br>• In addition to the monthly benefit payment payable from the defined benefit plan at retirement, a member may start receiving distributions from the balance in the defined contribution account, reflecting the contributions, investment gains or losses, and any required fees. |
| **Eligible Members**<br>Employees are in Plan 1 if their membership date is before July 1, 2010, and they were vested as of January 1, 2013, and they have not taken refund.<br><br>**Hybrid Opt-In Election**<br>VRS non-hazardous duty covered Plan 1 members were allowed to make an irrevocable decision to opt into the Hybrid Retirement Plan during a special election window held January 1 through April 30, 2014.<br><br>The Hybrid Retirement Plan's effective date for eligible Plan 1 members who opted in was July 1, 2014.<br><br>If eligible deferred members returned to work during the election window, they were also eligible to opt into the Hybrid Retirement Plan. | **Eligible Members**<br>Employees are in Plan 2 if their membership date is on or after July 1, 2010, or their membership date is before July 1, 2010, and they were not vested as of January 1, 2013.<br><br>**Hybrid Opt-In Election**<br>Eligible Plan 2 members were allowed to make an irrevocable decision to opt into the Hybrid Retirement Plan during a special election window held January 1 through April 30, 2014.<br><br>The Hybrid Retirement Plan's effective date for eligible Plan 2 members who opted in was July 1, 2014.<br><br>If eligible deferred members returned to work during the election window, they were also eligible to opt into the Hybrid Retirement Plan. | **Eligible Members**<br>Employees are in the Hybrid Retirement Plan if their membership date is on or after January 1, 2014. This includes:<br>• Political subdivision employees*<br>• Members in Plan 1 or Plan 2 who elected to opt into the plan during the election window held January 1-April 30, 2014; the plan's effective date for opt-in members was July 1, 2014<br><br>***Non-Eligible Members**<br>Some employees are not eligible to participate in the Hybrid Retirement Plan. They include:<br>• Political subdivision employees who are covered by enhanced benefits for hazardous duty employees |

NOTE 4 – Defined Benefit Pension Plan (Continued)

| | | |
|---|---|---|
| Members who were eligible for an optional retirement plan (ORP) and had prior service under Plan 1 were not eligible to elect the Hybrid Retirement Plan and remain as Plan 1 or ORP. | Members who were eligible for an optional retirement plan (ORP) and have prior service under Plan 2 were not eligible to elect the Hybrid Retirement Plan and remain as Plan 2 or ORP. | Those employees eligible for an optional retirement plan (ORP) must elect the ORP plan or the Hybrid Retirement Plan. If these members have prior service under Plan 1 or Plan 2, they are not eligible to elect the Hybrid Retirement Plan and must select Plan 1 or Plan 2 (as applicable) or ORP. |
| **Retirement Contributions**<br>Employees contribute 5% of their compensation each month to their member contribution account through a pre-tax salary reduction. Member contributions are tax-deferred until they are withdrawn as part of a retirement benefit or as a refund. The employer makes a separate actuarially determined contribution to VRS for all covered employees. VRS invests both member and employer contributions to provide funding for the future benefit payment. | **Retirement Contributions**<br>Same as Plan 1. | **Retirement Contributions**<br>A member's retirement benefit is funded through mandatory and voluntary contributions made by the member and the employer to both the defined benefit and the defined contribution components of the plan.<br>Mandatory contributions are based on a percentage of the employee's creditable compensation and are required from both the member and the employer. Additionally, members may choose to make voluntary contributions to the defined contribution component of the plan, and the employer is required to match those voluntary contributions according to specified percentages |
| **Creditable Service**<br>Creditable service includes active service. Members earn creditable service for each month they are employed in a covered position. It also may include credit for prior service the member has purchased or additional creditable service the member was granted. A member's total creditable service is one of the factors used to determine their eligibility for retirement and to calculate their retirement benefit. It also may count toward eligibility for the health insurance credit in retirement, if the employer offers the health insurance credit. | **Creditable Service**<br>Same as Plan 1. | **Creditable Service**<br>**Defined Benefit Component:**<br>Under the defined benefit component of the plan, creditable service includes active service. Members earn creditable service for each month they are employed in a covered position. It also may include credit for prior service the member has purchased or additional creditable service the member was granted. A member's total creditable service is one of the factors used to determine their eligibility for retirement and to calculate their retirement benefit. It also may count toward eligibility for the health insurance credit in retirement, if the employer offers the health insurance credit.<br><br>**Defined Contributions Component:**<br>Under the defined contribution component, creditable service is used to determine vesting for the employer contribution portion of the plan. |

NOTE 4 – Defined Benefit Pension Plan (Continued)

| | | |
|---|---|---|
| **Vesting**<br>Vesting is the minimum length of service a member needs to qualify for a future retirement benefit. Members become vested when they have at least five years (60 months) of creditable service. Vesting means members are eligible to qualify for retirement if they meet the age and service requirements for their plan. Members also must be vested to receive a full refund of their member contribution account balance if they leave employment and request a refund.<br><br>Members are always 100% vested in the contributions that they make | **Vesting**<br>Same as Plan 1. | **Vesting**<br>**Defined Benefit Component:** Defined benefit vesting is the minimum length of service a member needs to qualify for a future retirement benefit. Members are vested under the defined benefit component of the Hybrid Retirement Plan when they reach five years (60 months) of creditable service. Plan 1 or Plan 2 members with at least five years (60 months) of creditable service who opted into the Hybrid Retirement Plan remain vested in the defined benefit component.<br><br>**Defined Contributions Component:**<br>Defined contribution vesting refers to the minimum length of service a member needs to be eligible to withdraw the employer contributions from the defined contribution component of the plan.<br><br>Members are always 100% vested in the contributions that they make.<br><br>Upon retirement or leaving covered employment, a member is eligible to withdraw a percentage of employer contributions to the defined contribution component of the plan, based on service.<br>• After two years, a member is 50% vested and may withdraw 50% of employer contributions.<br>• After three years, a member is 75% vested and may withdraw 75% of employer contributions.<br>• After four or more years, a member is 100% vested and may withdraw 100% of employer contributions.<br><br>Distribution is not required by law until age 70½. |
| **Calculating the Benefit**<br>The Basic Benefit is calculated based on a formula using the member's average final compensation, a retirement multiplier and total service credit at retirement. It is one of the benefit payout options available to a member at retirement.<br><br>An early retirement reduction factor is applied to the Basic Benefit if the member retires with a reduced retirement benefit or selects a benefit payout option other than the Basic Benefit. | **Calculating the Benefit**<br>See definition under Plan 1. | **Calculating the Benefit**<br>**Defined Benefit Component:**<br>See definition under Plan 1<br><br>**Defined Contribution Component:**<br>The benefit is based on contributions made by the member and any matching contributions made by the employer, plus net investment earnings on those contributions. |

NOTE 4 – Defined Benefit Pension Plan (Continued)

| | | |
|---|---|---|
| **Average Final Compensation**<br>A member's average final compensation is the average of the 36 consecutive months of highest compensation as a covered employee. | **Average Final Compensation**<br>A member's average final compensation is the average of their 60 consecutive months of highest compensation as a covered employee. | **Average Final Compensation**<br>Same as Plan 2. It is used in the retirement formula for the defined benefit component of the plan. |
| **Service Retirement Multiplier**<br>**VRS:** The retirement multiplier is a factor used in the formula to determine a final retirement benefit. The retirement multiplier for non-hazardous duty members is 1.70%.<br><br>**Sheriffs and regional jail superintendents:** The retirement multiplier for sheriffs and regional jail superintendents is 1.85%.<br><br>**Political subdivision hazardous duty employees:** The retirement multiplier of eligible political subdivision hazardous duty employees other than sheriffs and regional jail superintendents is 1.70% or 1.85% as elected by the employer. | **Service Retirement Multiplier**<br>**VRS:** Same as Plan 1 for service earned, purchased or granted prior to January 1, 2013. For non- hazardous duty members, the retirement multiplier is 1.65% for creditable service earned, purchased or granted on or after January 1, 2013.<br><br>**Sheriffs and regional jail superintendents:** Same as Plan 1.<br><br>**Political subdivision hazardous duty employees:** Same as Plan 1. | **Service Retirement Multiplier**<br>**Defined Benefit Component:**<br>**VRS:** The retirement multiplier for the defined benefit component is 1.00%.<br><br>For members who opted into the Hybrid Retirement Plan from Plan 1 or Plan 2, the applicable multipliers for those plans will be used to calculate the retirement benefit for service credited in those plans.<br><br>**Sheriffs and regional jail superintendents:** Not applicable.<br><br>**Political subdivision hazardous duty employees:** Not applicable.<br><br>**Defined Contribution Component:**<br>Not applicable. |
| **Normal Retirement Age**<br>VRS: Age 65.<br><br>**Political subdivisions hazardous duty employees:** Age 60. | **Normal Retirement Age VRS:**<br>Normal Social Security retirement age.<br><br>**Political subdivisions hazardous duty employees:** Same as Plan 1. | **Normal Retirement Age**<br>**Defined Benefit Component:**<br>**VRS**: Same as Plan 2.<br><br>**Political subdivisions hazardous duty employees:** Not applicable.<br><br>**Defined Contribution Component:**<br>Members are eligible to receive distributions upon leaving employment, subject to restrictions. |

NOTE 4 – Defined Benefit Pension Plan (Continued)

| | | |
|---|---|---|
| **Earliest Unreduced Retirement Eligibility**<br>**VRS:** Age 65 with at least five years (60 months) of creditable service or at age 50 with at least 30 years of creditable service.<br><br>**Political subdivisions hazardous duty employees:** Age 60 with at least five years of creditable service or age 50 with at least 25 years of creditable service. | **Earliest Unreduced Retirement Eligibility**<br>**VRS:** Normal Social Security retirement age with at least five years (60 months) of creditable service or when their age and service equal 90.<br><br>**Political subdivisions hazardous duty employees:** Same as Plan 1. | **Earliest Unreduced Retirement Eligibility**<br>**Defined Benefit Component:**<br>**VRS:** Normal Social Security retirement age and have at least five years (60 months) of creditable service or when their age and service equal 90.<br><br>**Political subdivisions hazardous duty employees:** Not applicable.<br><br>**Defined Contribution Component:**<br>Members are eligible to receive distributions upon leaving employment, subject to restrictions. |
| **Earliest Reduced Retirement Eligibility**<br>**VRS:** Age 55 with at least five years (60 months) of creditable service or age 50 with at least 10 years of creditable service.<br><br>**Political subdivisions hazardous duty employees:** 50 with at least five years of creditable service. | **Earliest Reduced Retirement Eligibility**<br>**VRS:** Age 60 with at least five years (60 months) of creditable service.<br><br>**Political subdivisions hazardous duty employees:** Same as Plan 1. | **Earliest Reduced Retirement Eligibility**<br>**Defined Benefit Component: VRS:**<br>Age 60 with at least five years (60 months) of creditable service.<br><br>**Political subdivisions hazardous duty employees:** Not applicable.<br><br>**Defined Contribution Component:**<br>Members are eligible to receive distributions upon leaving employment, subject to restrictions. |
| **Cost-of-Living Adjustment (COLA) in Retirement**<br>The Cost-of-Living Adjustment (COLA) matches the first 3% increase in the Consumer Price Index for all Urban Consumers (CPI-U) and half of any additional increase (up to 4%) up to a maximum COLA of 5%. | **Cost-of-Living Adjustment (COLA) in Retirement**<br>The Cost-of-Living Adjustment (COLA) matches the first 2% increase in the CPI-U and half of any additional increase (up to 2%), for a maximum COLA of 3%. | **Cost-of-Living Adjustment (COLA) in Retirement**<br>**Defined Benefit Component:** Same as Plan 2.<br><br>**Defined Contribution Component:**<br>Not applicable. |

NOTE 4 – Defined Benefit Pension Plan (Continued)

| | | |
|---|---|---|
| **Eligibility:**<br>For members who retire with an unreduced benefit or with a reduced benefit with at least 20 years of creditable service, the COLA will go into effect on July 1 after one full calendar year from the retirement date.<br><br>For members who retire with a reduced benefit and who have less than 20 years of creditable service, the COLA will go into effect on July 1 after one calendar year following the unreduced retirement eligibility date. | **Eligibility:**<br>Same as Plan 1 | **Eligibility:**<br>Same as Plan 1 and Plan 2. |
| **Exceptions to COLA Effective Dates:**<br>The COLA is effective July 1 following one full calendar year (January 1 to December 31) under any of the following circumstances:<br>• The member is within five years of qualifying for an unreduced retirement benefit as of January 1, 2013.<br>• The member retires on disability.<br>• The member retires directly from short-term or long-term disability under the Virginia Sickness and Disability Program (VSDP).<br>• The member Is involuntarily separated from employment for causes other than job performance or misconduct and is eligible to retire under the Workforce Transition Act or the Transitional Benefits Program.<br>• The member dies in service and the member's survivor or beneficiary is eligible for a monthly death-in-service benefit. The COLA will go into effect on July 1 following one full calendar year (January 1 to December 31) from the date the monthly benefit begins. | **Exceptions to COLA Effective Dates:**<br>Same as Plan 1 | **Exceptions to COLA Effective Dates:**<br>Same as Plan 1 and Plan 2. |

NOTE 4 – Defined Benefit Pension Plan (Continued)

| | | |
|---|---|---|
| **Disability Coverage**<br>Members who are eligible to be considered for disability retirement and retire on disability, the retirement multiplier is 1.7% on all service, regardless of when it was earned, purchased or granted. | **Disability Coverage**<br>Members who are eligible to be considered for disability retirement and retire on disability, the retirement multiplier is 1.65% on all service, regardless of when it was earned, purchased or granted. | **Disability Coverage** Employees of political subdivisions (including Plan 1 and Plan 2 opt-ins) participate in the Virginia Local Disability Program (VLDP) unless their local governing body provides an employer-paid comparable program for its members.<br><br>Hybrid members (including Plan 1 and Plan 2 opt-ins) covered under VLDP are subject to a one-year waiting period before becoming eligible for non-work- related disability benefits. |
| **Purchase of Prior Service**<br>Members may be eligible to purchase service from previous public employment, active duty military service, an eligible period of leave or VRS refunded service as creditable service in their plan. Prior creditable service counts toward vesting, eligibility for retirement and the health insurance credit. Only active members are eligible to purchase prior service. Members also may be eligible to purchase periods of leave without pay. | **Purchase of Prior Service**<br>Same as Plan 1. | **Purchase of Prior Service**<br>**Defined Benefit Component:**<br>Same as Plan 1, with the following exceptions:<br>• Hybrid Retirement Plan members are ineligible for ported service.<br><br>**Defined Contribution Component:**<br>Not applicable. |

NOTE 4 – Defined Benefit Pension Plan (Continued)

**Employees Covered by Benefit Terms**

As of the June 30, 2017 actuarial valuation, the following employees were covered by the benefit terms of the pension plan:

| | | Number |
|---|---|---|
| Inactive Members or Their Beneficiaries Currently Receiving Benefits | | 4 |
| Inactive Members | | |
| Vested inactive members | 4 | |
| Non-vested inactive members | 6 | |
| Active members active elsewhere in VRS | 4 | |
| Total Inactive Members | | 14 |
| Active Members | | 7 |
| Total covered employees | | 25 |

***Contributions***

The contribution requirement for active employees is governed by § 51.1-145 of the *Code of Virginia*, as amended, but may be impacted as a result of funding options provided to political subdivisions by the Virginia General Assembly. Employees are required to contribute 5.00% of their compensation toward their retirement.

The Commission's contractually required contribution rate for the year ended June 30, 2019 was 2.90% of covered employee compensation. This rate was based on an actuarially determined rate from an actuarial valuation as of June 30, 2017.

This rate, when combined with employee contributions, was expected to finance the costs of benefits earned by employee during the year, with an additional amount to finance any unfunded accrued liability. Contribution to the pension plan from the Commission was $1,368 and $20,245 for the years ended June 30, 2019 and June 30, 2018, respectively.

***Net Pension Liability***

Th net pension liability (NPL) is calculated separately for each employer and represents that particular employer's total pension liability determined in accordance with GASB Statement No. 68, less that employer's fiduciary net position. For political subdivisions, the net pension liability was measured as of June 30, 2018. The total pension liability used to calculate the net pension liability was determined by an actuarial valuation performed as of June 30, 2017 rolled forward to the measurement date of June 30, 2018.

NOTE 4 – Defined Benefit Pension Plan (Continued)

### *Actuarial Assumptions – General Employees*

The total pension liability for General Employees in the Commission's Retirement Plan was based on an actuarial valuation as of June 30, 2017, using the Entry Age Normal actuarial cost method and the following assumptions, applied to all periods included in the measurement and rolled forward to the measurement date of June 30, 2018.

| | |
|---|---|
| Inflation | 2.5% |
| Salary increases, including Inflation | 3.5% – 5.35% |
| Investment rate of return | 7.0%, net of pension plan investment expense, including inflation* |

* Administrative expenses as a percent of the market value of assets for the last experience study were found to be approximately 0.06% of the market assets for all of the VRS plans. This would provide an assumed investment return rate for GASB purposes of slightly more than the assumed 7.0%. However, since the difference was minimal, and a more conservative 7.0% investment return assumption provided a projected plan net position that exceeded the projected benefit payments, the long- term expected rate of return on investments was assumed to be 7.0% to simplify preparation of pension liabilities.

Mortality rates:

Largest 10 - Non-Hazardous Duty: 20% of deaths are assumed to be service related

Pre-Retirement:
RP-2014 Employee Rates to age 80, Healthy Annuitant Rates at ages 81 and older projected with scale BB to 2020; males 95% of rates; females 105% of rates.

Post-Retirement:
RP-2014 Employee Rates to age 49, Healthy Annuitant Rates at ages 50 and older projected with scale BB to 2020; males set forward 3 years; females 1.0% increase compounded from ages 70 to 90.

Post-Disablement:
RP-2014 Disability Mortality Rates projected with scale BB to 2020; males set forward 2 years, 110% of rates; females 125% of rates.

All Others (Non 10 Largest) - Non-Hazardous Duty: 15% of deaths are assumed to be service related

Pre-Retirement:
RP-2014 Employee Rates to age 80, Healthy Annuitant Rates at ages 81 and older projected with scale BB to 2020; males 95% of rates; females 105% of rates.

Post-Retirement:
RP-2014 Employee Rates to age 49, Healthy Annuitant Rates at ages 50 and older projected with scale BB to 2020; males set forward 3 years; females 1.0% increase compounded from ages 70 to 90.

NOTE 4 – Defined Benefit Pension Plan (Continued)

Post-Disablement:
RP-2014 Disability Mortality Rates projected with scale BB to 2020; males set forward 2 years, 110% of rates; females 125% of rates.

The actuarial assumptions used in the June 30, 2017 valuation were based on the results of an actuarial experience study for the period from July 1, 2012 through June 30, 2016. Changes to the actuarial assumptions as a result of the experience study are as follows:

Largest 10 – Non-Hazardous Duty:

| | |
|---|---|
| Mortality Rates (Pre-retirement, post-retirement healthy and disabled | Update to a more current mortality table – RP-2014 projected to 2020 |
| Retirement Rates | Lowered rates at older ages and changed final retirement from 70 to 75 |
| Withdrawal Rates | Adjusted rates to better fit experience at each year age and service through 9 years of service |
| Disability Rates | Lowered rates |
| Salary Scale | No change |
| Line of Duty Disability | Increase rate from 14% to 20% |

All Other (Non 10 Largest) – Non-Hazardous Duty:

| | |
|---|---|
| Mortality Rates (Pre-retirement, post-retirement healthy and disabled | Update to a more current mortality table – RP-2014 projected to 2020 |
| Retirement Rates | Lowered rates at older ages and changed final retirement from 70 to 75 |
| Withdrawal Rates | Adjusted rates to better fit experience at each year age and service through 9 years of service |
| Disability Rates | Lowered rates |
| Salary Scale | No change |
| Line of Duty Disability | Increase rate from 14% to 20% |

### *Long-Term Expected Rate of Return*

The long-term expected rate of return on pension System investments was determined using a log-normal distribution analysis in which best-estimate ranges of expected future real rates of return (expected returns, net of pension System investment expense and inflation) are developed for each major asset class. These ranges are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by the target asset allocation percentage and by adding expected inflation. The target asset allocation and best estimate of arithmetic real rates of return for each major asset class are summarized in the following table:

NOTE 4 – Defined Benefit Pension Plan (Continued)

| Asset Class (Strategy) | Target Allocation | Arithmetic Long-Term Expected Rate of Return | Weighted Average Long-Term Expected Rate of Return |
|---|---|---|---|
| Public Equity | 40.00% | 4.54% | 1.82% |
| Fixed Income | 15.00% | 0.69% | 0.10% |
| Credit Strategies | 15.00% | 3.96% | 0.59% |
| Real Assets | 15.00% | 5.76% | 0.86% |
| Private Equity | 15.00% | 9.53% | 1.43% |
| Total | 100.00% | | 4.80% |
| | | Inflation | 2.50% |
| | | * Expected arithmetic nominal return | 7.30% |

* The above allocation provides a one-year return of 7.30%. However, one-year returns do not take into account the volatility present in each of the asset classes. In setting the long-term expected return for the system, stochastic projections are employed to model future returns under carious economic conditions. The results provide a range of returns over various time periods that ultimately provide a median return of 6.83%, including expected inflation of 2.50%.

### *Discount Rate*

The discount rate used to measure the total pension liability was 7.00%. The projection of cash flows used to determine the discount rate assumed that System member contributions will be made per the VRS Statutes and the employer contributions will be made in accordance with the VRS funding policy at rates equal to the difference between actuarially determined contribution rates adopted by the VRS Board of Trustees and the member rate. Consistent with the phased-in funding provided by the General Assembly for the state and teacher employer contributions; political subdivisions were also provided with an opportunity to use an alternate employer contribution rate. For the year ended June 20, 2018, the alternate rate was the employer contribution rate used in FY2012 or 90% of the actuarially determined employer contribution rate from the June 30, 2015 actuarial valuations, whichever was greater. From July 1, 2018 on, participating employers are assumed to continue to contribute 100% of the actuarially determined contribution rates. Based on those assumptions, the pension plan's fiduciary net position was projected to be available to make all projected future benefit payments of current active and inactive employees. Therefore the Long-term expected rate of return was applied to all periods of projected benefit payments to determine the total pension liability.

NOTE 4 – Defined Benefit Pension Plan (Continued)

**Change in the Net Pension Liability:**

| | Total Pension Liability (a) | Plan Fiduciary Net Position (b) | Net Pension Liability (a)-(b) |
|---|---|---|---|
| Balances at June 30, 2017 | $ 881,283 | $1,331,228 | $(449,945) |
| Changes for the year: | | | |
| Service cost | 34,100 | | 34,100 |
| Interest | 60,863 | | 60,863 |
| Change in assumption | - | | - |
| Differences between expected and actual experience | 159,504 | | 159,504 |
| Contributions – employer | | 20,150 | (20,150) |
| Contributions – employee | | 17,480 | (17,480) |
| Net investment income | | 99,250 | (99,250) |
| Benefit payments, including refunds of employee contributions | (23,630) | (23,630) | - |
| Administrative expense | | (829) | 829 |
| Other changes | - | (90) | 90 |
| Net changes | 230,837 | 112,331 | 118,506 |
| Balances at June 30, 2018 | $1,112,120 | $1,443,559 | $(331,439) |

***Sensitivity of the Net Pension Liability to Changes in the Discount Rate***

The following presents the net pension liability of the Commission using the discount rate of 7%, as well as what the Commission's net pension liability would be if it were calculated using a discount rate that is one percentage-point lower (6%) or one percentage-point higher (8%) than the current rate:

| | 1% Decrease (6.0%) | Current Discount Rate (7.0%) | 1% Increase (8.0%) |
|---|---|---|---|
| Commission's Net Pension Liability | $(173,995) | $(331,439) | $(459,426) |

***Pension Expense, and Deferred Outflows of Resources and Inflows of Resources Related to Pensions***

For the year ended June 30, 2019, the Commission recognized pension benefit of $112,111. At June 30, 2019, the Commission reported deferred outflows of resources and deferred inflows of resources related to pensions from the following sources:

| | Deferred Outflows of Resources | Deferred Inflows of Resources |
|---|---|---|
| Differences between actual and expected experience | $95,446 | $ - |
| Changes in assumptions | - | - |
| Net difference between projected and actual earnings on plan investments | - | 13,925 |
| Employer contributions subsequent to the Measurement Date | 1,368 | - |
| Total | $96,814 | $13,925 |

NOTE 4 – Defined Benefit Pension Plan (Continued)

$95,446 reported as deferred outflows of resources related to pensions resulting from Commission's contributions subsequent to the measurement date will be recognized as a reduction of the net pension liability in the year ended June 30, 2020. Other amounts reported as deferred outflows of resources and deferred inflows of resources related to pensions will be recognized in future reporting periods as follows:

| Year ending June 30, | |
|---|---|
| 2020 | 66,984 |
| 2021 | 29,268 |
| 2022 | (13,609) |
| 2023 | (1,122) |
| 2024 | - |
| Thereafter | - |

***Pension Plan Data***
Information about the VRS Political Subdivision Retirement Plan is also available in the separately issued VRS 2018 Comprehensive Annual Financial Report (CAFR). A copy of the 2018 VRS CAFR may be downloaded from the VRS website at http://www.varetire.org/Pdf/Publications/2018-annual-report.pdf, of by writing to the System's Chief Financial Officer at P.O. Box 2500, Richmond, VA 23218-2500.

NOTE 5 – Commitments and Contingencies

The Commission receives a substantial amount of its support from local and state governments. A significant reduction in the level of this support, if this were to occur, could have an adverse effect on the Commission's programs and activities.

NOTE 6 – Evaluation of Subsequent Events

The Commission has evaluated subsequent events through December 11, 2019, the date which the financial statements were available to be issued.

**Dunham, Aukamp & Rhodes, PLC**
*Certified Public Accountants*

4437 Brookfield Corporate Dr., Suite 205-D
Chantilly, VA 20151

**Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards***

To the Board of Commissioners
Rappahannock-Rapidan Regional Commission
Culpeper, Virginia

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, the financial statements of the business-type activities and the aggregate remaining fund information of the Rappahannock-Rapidan Regional Commission as of and for the year ended June 30, 2019, and the related notes to the financial statements, which collectively comprise Rappahannock-Rapidan Regional Commission's basic financial statements, and have issued our report thereon dated December 11, 2019.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered Rappahannock-Rapidan Regional Commission's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Rappahannock-Rapidan Regional Commission's internal control. Accordingly, we do not express an opinion on the effectiveness of Rappahannock-Rapidan Regional Commission's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or, significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Metro: (703) 631-8940 FAX: (703) 631-8939 Toll Free 1-877-631-8940

Compliance and Other Matters

As part of obtaining reasonable assurance about whether Rappahannock-Rapidan Regional Commission's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose

Dunham, Aukamp & Rhodes, PLC

Certified Public Accountants
Chantilly, Virginia

December 11, 2019

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION
# SCHEDULE OF REVENUES AND EXPENSES-BUDGET AND ACTUAL ( BUDGETARY BASIS)
## FOR THE YEAR ENDED JUNE 30, 2019

| | Original Budget | Final Budget | Actual Budgetary-Basis | Variance Favorable (Unfavorable) |
|---|---|---|---|---|
| Operating Revenues: | | | | |
| DEQ Chesapeake Bay watershed implementation plan III | $ 50,000 | $ 50,000 | $ 50,000 | $ - |
| Dues | 145,377 | 145,377 | 145,375 | (2) |
| Freedom grant | 250,000 | 250,000 | 247,542 | (2,458) |
| Hazard mitigation | 13,820 | 13,820 | 13,820 | - |
| Madison county planning | 2,000 | 2,000 | 1,104 | (896) |
| Orange county community development block grant | - | - | 2,000 | 2,000 |
| Rappahannock comp plan | 4,000 | 4,000 | - | (4,000) |
| Regional housing | 48,604 | 48,604 | 48,605 | 1 |
| Rgional tourism | 7,000 | 7,000 | 7,000 | - |
| Rideshare program | 118,400 | 118,400 | 118,369 | (31) |
| Rural transportation program | 58,000 | 58,000 | 58,020 | 20 |
| State regional planning grant | 75,971 | 75,971 | 75,971 | - |
| Town of Madison comp plan | 500 | 500 | - | (500) |
| Van pool grant | 8,000 | 8,000 | 4,448 | (3,552) |
| Virginia homeless solution program | 84,000 | 84,000 | 84,501 | 501 |
| Virginia Housing Development Authority VISTA grant | 15,000 | 15,000 | 15,000 | - |
| VTC marketing leverage program grant | 21,012 | 21,012 | - | (21,012) |
| USDA farmers market promotion program | 83,000 | 83,000 | 81,423 | (1,577) |
| Other Income | 750 | 750 | 4,792 | 4,042 |
| Water Supply Plan | - | - | 749 | 749 |
| Total Operating Revenues | 985,434 | 985,434 | 958,719 | (26,715) |
| Operating Expenses: | | | | |
| Advertising | 500 | 500 | - | 500 |
| America's wine country | 1,100 | 1,100 | - | 1,100 |
| Annual meeting | 4,500 | 4,500 | 4,457 | 43 |
| Audit | 5,500 | 5,500 | 3,650 | 1,850 |
| DEQ Chesapeake Bay watershed implementation plan III | 2,500 | 2,500 | 414 | 2,086 |
| Equipment | 7,000 | 7,000 | 5,916 | 1,084 |
| Freedom grant | 222,500 | 222,500 | 216,975 | 5,525 |
| Insurance health | 45,000 | 35,000 | 34,247 | 753 |
| Insurance liability | 1,400 | 1,400 | 1,295 | 105 |
| Insurance workers' compensation | 500 | 500 | 500 | - |
| Maintenance and repairs | 10,000 | 26,025 | 26,997 | (972) |
| Membership dues | 4,000 | 4,000 | 3,495 | 505 |
| Miscellaneous | 500 | 500 | 365 | 135 |

See accompanying notes.

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION
# SCHEDULE OF REVENUES AND EXPENSES-BUDGET AND ACTUAL (BUDGETARY BASIS) (Continued)
## FOR THE YEAR ENDED JUNE 30, 2019

| | Original Budget | Final Budget | Actual Budgetary-Basis | Variance Favorable (Unfavorable) |
|---|---|---|---|---|
| Operating Expenses (Continued): | | | | |
| Payroll taxes | $ 30,600 | $ 30,600 | $ 29,083 | $ 1,517 |
| Postage | 750 | 750 | 558 | 192 |
| Printing | 2,000 | 2,000 | 1,760 | 240 |
| Regional tourism | 9,693 | 9,693 | 4,717 | 4,976 |
| Retirement | 9,000 | 9,000 | 8,358 | 642 |
| Rideshare | 50,000 | 50,000 | 51,170 | (1,170) |
| Rural transportation planning | 1,000 | 1,000 | 988 | 12 |
| Salary | 400,000 | 400,000 | 395,999 | 4,001 |
| Subscriptions and publications | 750 | 750 | 400 | 350 |
| Supplies | 4,500 | 4,500 | 4,267 | 233 |
| Technology | 7,000 | 7,000 | 4,381 | 2,619 |
| Travel | 10,000 | 10,000 | 10,239 | (239) |
| Utilities | 6,200 | 6,200 | 4,940 | 1,260 |
| USDA farmers market promotion program | 61,000 | 61,000 | 65,365 | (4,365) |
| Vanpool expense | 8,500 | 8,500 | 8,552 | (52) |
| Virginia Housing Development Authority | 15,000 | 15,000 | 15,000 | - |
| VTC marketing leverage program grant | 18,000 | 18,000 | 19,831 | (1,831) |
| Virginia homeless solution program expense | 1,000 | 1,000 | 4,036 | (3,036) |
| Website update | 7,000 | 7,000 | - | 7,000 |
| Total Operating Expenses | 954,493 | 953,018 | 927,955 | 25,063 |
| Operating Gain/(Loss) | 30,941 | 32,416 | 30,764 | (1,652) |
| Nonoperating Income (Expense) | | | | |
| GASB 68 adjustment | - | - | 112,111 | 112,111 |
| Interest income | 1,500 | 1,500 | 3,487 | 1,987 |
| Investment gain | - | - | 3,927 | 3,927 |
| Interest expense | (23,916) | (23,916) | (23,916) | - |
| Total Nonoperating Income (Expense) | (22,416) | (22,416) | 95,609 | 112,111 |
| Net Gain/(Loss) | $ 8,525 | $ 10,000 | $ 126,373 | $ 110,459 |

See accompanying notes.

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION
# SCHEDULE OF REVENUES AND EXPENSES
# BUDGET AND ACTUAL - BUDGETARY BASIS
# BUDGET-TO-GAAP RECONCILIATION
## FOR THE YEAR ENDED JUNE 30, 2019

Note A - Explanation of Differences between Budgetary Inflows and Outflows and GAAP Revenue and Expenditures

| | |
|---|---|
| **Sources/inflows of resources** | |
| Actual amounts (budgetary basis) from budgetary comparison schedule | $ 958,719 |
| Collection of receivables accrued as of June 30, 2018 are revenue for budgetary purposes but not for GAAP purposes. | (95,967) |
| Receivables accrued as of June 30, 2019 are revenue for GAAP purposes but not for budgetary purposes. | 109,759 |
| Total operating revenue as reported on the statement of revenues, expenses and changes in net position. | $ 972,511 |
| **Uses/outflows of resources** | |
| Actual amounts (budgetary basis) from budgetary comparison schedule | $ 927,955 |
| Payments of accounts payable recorded as of June 30, 2018, are expenditures for budgetary purposes but not for GAAP purposes. | (34,207) |
| Purchases of equipment for the year ended June 30, 2019, are expenditures for budgetary purposes but not for GAAP purposes. | (26,036) |
| Payables accrued as of June 30, 2019 are expenses for GAAP purposes but not for budgetary purposes. | 36,493 |
| Depreciation expense is a expense for GAAP purposes but not for budgetary purposes. | 12,733 |
| Total operating expenses as reported on the statement of revenues, expenses and changes in net position. | $ 916,938 |

See accompanying notes.

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION
# SCHEDULE OF CHANGES IN THE COMMISSION'S NET PENSION LIABILITY AND RELATED RATIOS

| | 2018 | 2017 | 2016 | 2015 | 2014 |
|---|---|---|---|---|---|
| **Total Pension Liability** | | | | | |
| Service cost | $ 34,100 | $ 34,046 | $ 46,439 | $ 45,136 | $ 44,023 |
| Interest on total pension liability | 60,863 | 76,384 | 67,864 | 60,928 | 54,411 |
| Changes in assumptions | - | (29,189) | - | - | - |
| Differences between expected and actual experience | 159,504 | (279,643) | 22,652 | (589) | - |
| Benefit payments, including refunds of employee contributions | (23,630) | (23,038) | (7,427) | (5,370) | (5,293) |
| Net change in total pension liability | 230,837 | (221,440) | 129,528 | 100,105 | 93,141 |
| Total pension liability - beginning | 881,283 | 1,102,723 | 973,195 | 873,090 | 779,949 |
| Total pension liability - ending (a) | $1,112,120 | $ 881,283 | $1,102,723 | $ 973,195 | $ 873,090 |
| **Plan fiduciary net position** | | | | | |
| Contributions - employer | $ 20,150 | $ 16,670 | $ 20,601 | $ 21,713 | $ 24,294 |
| Contributions - employee | 17,480 | 14,694 | 16,585 | 17,468 | 17,147 |
| Net investment income | 99,250 | 145,211 | 22,505 | 49,158 | 140,644 |
| Benefit payments, including refunds of employee contributions | (23,630) | (23,038) | (7,427) | (5,370) | (5,293) |
| Administrative expense | (829) | (815) | (2,049) | (630) | (720) |
| Other | (90) | (130) | (5) | (11) | 7 |
| **Net change in plan fiduciary net position** | 112,331 | 152,592 | 50,210 | 82,328 | 176,079 |
| **Plan fiduciary net position - beginning** | 1,331,228 | 1,178,636 | 1,128,426 | 1,046,098 | 870,019 |
| **Plan fiduciary net position - ending (b)** | $1,443,559 | $1,331,228 | $1,178,636 | $1,128,426 | $1,046,098 |
| Commission's net pension asset - ending (a)-(b) | $ (331,439) | $ (449,945) | $ (75,913) | $ (155,231) | $ (173,008) |
| Plan fiduciary net position as a percentage of the total Pension liability | 129.80% | 151.06% | 106.88% | 115.95% | 119.82% |
| Covered - employee payroll | $ 391,349 | $ 367,005 | $ 268,691 | $ 351,496 | $ 342,940 |
| Commission's net pension liability as percentage of covered-employee payroll | -84.69% | -122.60% | -28.25% | -44.16% | -50.45% |

See accompanying notes.

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION
## SCHEDULE OF EMPLOYER CONTRIBUTIONS
### FOR THE YEARS ENDED JUNE 30, 2010 THROUGH 2019

| Date | Contractually Required Contributions (1) | Contributions in Relation to Contractually Required Contributions (2) | Contribution Deficiency (Excess) (3) | Employer's Covered Payroll (4) | Contributions as a % of Covered Payroll (5) |
|---|---|---|---|---|---|
| 2019 | $ 1,928 | $ 1,368 | $ 560 | $ 356,985 | 0.38% |
| 2018 | 11,349 | 20,245 | (8,896) | 391,349 | 5.17% |
| 2017 | 10,643 | 16,670 | (6,027) | 367,005 | 4.54% |
| 2016 | 16,766 | 20,601 | (3,835) | 268,691 | 7.67% |
| 2015 | 21,933 | 21,713 | 220 | 351,496 | 6.18% |
| 2014 | 24,383 | 24,294 | 89 | 342,940 | 7.08% |
| 2013 | 24,383 | 28,323 | (3,940) | 342,940 | 8.26% |
| 2012 | 26,840 | 29,446 | (2,606) | 322,209 | 9.14% |
| 2011 | 26,111 | 28,702 | (2,591) | 313,452 | 9.16% |
| 2010 | 15,365 | 19,279 | (3,914) | 307,307 | 6.27% |

See accompanying notes.

# RAPPAHANNOCK-RAPIDAN REGIONAL COMMISSION

## NOTES TO REQUIRED SUPPLEMENTARY INFORMATION
## For the Year Ended June 30, 2019

### NOTE 1 – Change of Benefit Terms

There have been no actuarially material changes to the System benefit provisions since the prior actuarial valuation.

### NOTE 2 – Changes of Assumptions

The following changes in actuarial assumptions were made effective June 30, 2016 based on the most recent experience study of the System for the four- year period ending June 30, 2016:

Largest 10 – Non-Hazardous Duty:

| | |
|---|---|
| Mortality Rates (Pre-retirement, post-retirement healthy, and disabled | Update to a more current mortality table – RP-2014 projected to 2020 |
| Retirement Rates | Lowered rates at older ages and changed final retirement from 70 to 75 |
| Withdrawal Rates | Adjusted rates to better fit experience at each year age and service through 9 years of service |
| Disability Rates | Lowered rates |
| Salary Scale | No change |
| Line of Duty Disability | Increase rate from 14% to 20% |

All Others (Non 10 Largest) – Non-Hazardous Duty:

| | |
|---|---|
| Mortality Rates (Pre-retirement, post-retirement healthy, and disabled | Update to a more current mortality table – RP-2014 projected to 2020 |
| Retirement Rates | Lowered rates at older ages and changed final retirement from 70 to 75 |
| Withdrawal Rates | Adjusted rates to better fit experience at each year age and service through 9 years of service |
| Disability Rates | Lowered rates |
| Salary Scale | No change |
| Line of Duty Disability | Increase rate from 14% to 15% |

RECEIVED

Address any reply to: 31 Hopkins Plaza, Baltimore, Md. 21201
US Treasury Department

District Director
Internal Revenue Service

Date: July 3, 1975

In reply refer to: Case 503397
EO:113:M.S.Bogucki
Telephone: (301) 962-4774

Rappahannock-Rapidan Planning District
Commission
702 South Main Street
Culpeper, Virginia 22701

Gentlemen:

We have considered the information submitted with application form 1023 and in your letter of June 11, 1975, for use in determining your status for Federal income tax purposes.

On the basis of the information submitted, it has been determined that you are a wholly-owned instrumentality of the counties of Fauquier, Orange, and Rappahannock and the town of Warrenton, political subdivisions of the State of Virginia. Accordingly, you are not subject to Federal income tax and are not required to file income tax returns.

Contributions made to you for exclusively public purposes are deductible by the donors in computing their taxable income in the manner and to the extent provided by section 170 of the Internal Revenue Code.

Bequests, legacies, devises or transfers to or for your use are deductible in computing the value of the taxable estate of a decedent for Federal estate tax purposes in the manner and to the extent provided by sections 2055 and 2106 of the 1954 Code. Gifts of property to or for your use are deductible in computing taxable gifts for Federal gift tax purposes in the manner and to the extent provided by section 2522 of the 1954 Code.

Since we have concluded that you are a wholly-owned instrumentality of political subdivisions of the State of Virginia, services performed in your employ are excepted under the Federal Insurance Contributions Act and the Federal Unemployment Tax Act.

Sincerely yours,

Gerald G. Portney

Gerald G. Portney
District Director

**Rappahannock-Rapidan Regional Commission**
**FY 2019 Final Revenues**

| Budget Items | Proposed Budget | Adjustments | Adjusted Budget | July | August | September | October | November | December | January | February | March | April | May | June | YTD Actual | YTD % |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Revenues** | | | | | | | | | | | | | | | | | |
| Dues: | | | | | | | | | | | | | | | | | |
| Culpeper County | $ 26,624.00 | | $ 26,624.00 | $ 26,623.91 | | | | | | | | | | | | $ 26,623.91 | 100.0% |
| Fauquier County | $ 48,430.00 | | $ 48,430.00 | $ 48,429.67 | | | | | | | | | | | | $ 48,429.67 | 100.0% |
| Madison County | $ 10,674.00 | | $ 10,674.00 | | | | | $ 10,673.80 | | | | | | | | $ 10,673.80 | 100.0% |
| Orange County | $ 24,039.00 | | $ 24,039.00 | $ 24,038.46 | | | | | | | | | | | | $ 24,038.46 | 100.0% |
| Rappahannock County | $ 6,027.00 | | $ 6,027.00 | $ 6,027.46 | | | | | | | | | | | | $ 6,027.46 | 100.0% |
| Town of Culpeper | $ 14,945.00 | | $ 14,945.00 | $ 14,944.98 | | | | | | | | | | | | $ 14,944.98 | 100.0% |
| Town of Gordonsville | $ 1,314.00 | | $ 1,314.00 | $ 1,313.89 | | | | | | | | | | | | $ 1,313.89 | 100.0% |
| Town of Madison | $ 181.00 | | $ 181.00 | $ 180.94 | | | | | | | | | | | | $ 180.94 | 100.0% |
| Town of Orange | $ 4,140.00 | | $ 4,140.00 | $ 4,140.04 | | | | | | | | | | | | $ 4,140.04 | 100.0% |
| Town of The Plains | $ 189.00 | | $ 189.00 | | | $ 189.24 | | | | | | | | | | $ 189.24 | 100.1% |
| Town of Remington | $ 524.00 | | $ 524.00 | $ 523.73 | | | | | | | | | | | | $ 523.73 | 99.9% |
| Town of Warrenton | $ 8,185.00 | | $ 8,185.00 | $ 8,184.63 | | | | | | | | | | | | $ 8,184.63 | 100.0% |
| Town of Washington | $ 105.00 | | $ 105.00 | | $ 104.58 | | | | | | | | | | | $ 104.58 | 99.6% |
| Interest Income | $ 1,500.00 | | $ 1,500.00 | $ 245.92 | $ 271.26 | $ 263.69 | $ 291.34 | $ 293.22 | $ 306.34 | $ 315.91 | $ 302.25 | $ 319.30 | $ 300.45 | $ 300.60 | $ 276.71 | $ 3,486.99 | 232.5% |
| Other Income | $ 750.00 | | $ 750.00 | $ 299.12 | $ 3.93 | $ 188.97 | | | $ 100.00 | | $ 100.00 | $ 100.00 | | | $ 2,000.00 | $ 2,792.02 | 372.3% |
| DEQ Chesapeake Bay WIP III | $ 50,000.00 | | $ 50,000.00 | | | | | | | $ 50,000.00 | | | | | | $ 50,000.00 | 100.0% |
| DRPT Mobility Management Grant | $ 150,000.00 | | $ 150,000.00 | $ 9,523.00 | $ 4,994.00 | $ 4,643.00 | $ 18,605.00 | $ 30,550.00 | $ 13,607.00 | $ 11,123.00 | $ 9,722.00 | | $ 22,882.00 | | $ 28,862.00 | $ 154,511.00 | 103.0% |
| DRPT Section 5310 Operating Grant | $ 100,000.00 | | $ 100,000.00 | $ 13,088.01 | | $ 14,414.00 | $ 5,024.00 | $ 20,347.00 | | | $ 13,664.00 | $ 7,432.00 | $ 5,745.00 | $ 6,458.00 | $ 6,859.00 | $ 93,031.01 | 93.0% |
| Hazard Mitigation | $ 13,819.78 | | $ 13,819.78 | | | | | | | | | | $ 13,819.78 | | | $ 13,819.78 | 100.0% |
| Madison County Planning | $ 2,000.00 | | $ 2,000.00 | $ 1,853.00 | | | | | | | | | | | | $ 1,853.00 | 92.7% |
| Rappahannock Comp Plan | $ 4,000.00 | | $ 4,000.00 | | | | | | | | | | | $ 4,000.00 | | $ 4,000.00 | 100.0% |
| Regional Housing | $ 48,604.00 | | $ 48,604.00 | $ 42,032.87 | $ 26.32 | $ 43.41 | $ 953.64 | $ 5,548.42 | | | | | | | | $ 48,604.66 | 100.0% |
| Regional Tourism | $ 7,000.00 | | $ 7,000.00 | $ 2,800.00 | $ 1,400.00 | | $ 2,800.00 | | | | | | | | | $ 7,000.00 | 100.0% |
| Rideshare Program | $ 118,400.00 | | $ 118,400.00 | | $ 5,890.00 | | $ 37,493.00 | | | $ 37,493.00 | | | $ 37,493.00 | | | $ 118,369.00 | 100.0% |
| Rideshare Vanpool Grant | $ 8,000.00 | | $ 8,000.00 | | | | $ 706.00 | | | $ 915.00 | | | $ 1,969.00 | | $ 858.00 | $ 4,448.00 | 55.6% |
| Rural Transportation Planning | $ 58,000.00 | | $ 58,000.00 | | $ 15,553.06 | | | $ 11,999.89 | | | $ 15,131.50 | | | $ 15,335.59 | | $ 58,020.04 | 100.0% |
| State Regional Planning Grant | $ 75,971.00 | | $ 75,971.00 | | | $ 18,992.00 | $ 18,993.00 | | | $ 18,993.00 | | | | $ 18,993.00 | | $ 75,971.00 | 100.0% |
| Town of Madison Comp Plan | $ 500.00 | | $ 500.00 | | | | | | | | | | | | | $ - | 0.0% |
| USDA FMPP Grant | $ 83,000.00 | | $ 83,000.00 | | | $ 38,026.70 | | $ 8,944.12 | | $ 6,697.70 | | | | $ 27,754.33 | | $ 81,422.85 | 98.1% |
| VHDA VISTA Grant | $ 15,000.00 | | $ 15,000.00 | | $ 4,000.00 | | $ 4,000.00 | | | $ 4,000.00 | | | | | $ 3,000.00 | $ 15,000.00 | 100.0% |
| VHSP Grant | $ 84,000.00 | | $ 84,000.00 | | | $ 8,031.51 | | | $ 12,432.39 | | $ 18,345.97 | $ 14,541.52 | | | $ 31,149.61 | $ 84,501.00 | 100.6% |
| VTC Marketing Grant | $ 21,012.50 | | $ 21,012.50 | | | | | | | | | | | | | $ - | 0.0% |
| | | | | | | | | | | | | | | | | | |
| **Total Revenue** | **$ 986,934.28** | **$ -** | **$ 986,934.28** | **$ 204,249.63** | **$ 32,243.15** | **$ 84,792.52** | **$ 88,865.98** | **$ 88,356.45** | **$ 26,445.73** | **$ 129,537.61** | **$ 57,265.72** | **$ 22,392.82** | **$ 82,209.23** | **$ 72,841.52** | **$ 73,005.32** | **$ 962,205.68** | 97.5% |

**Rappahannock-Rapidan Regional Commission**
**FY 2019 Final Expenditures**

| Budget Items | Proposed Budget | Adjustments | Adjusted Budget | July | August | September | October | November | December | January | February | March | April | May | June | YTD Actual | YTD % |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Expenditures** | | | | | | | | | | | | | | | | | |
| Advertising | $ 500.00 | | $ 500.00 | | | | | | | | | | | | | $ - | 0.0% |
| Annual Meeting/Retreat | $ 4,500.00 | | $ 4,500.00 | | $ 818.64 | $ 3,708.36 | $ (40.00) | $ (30.00) | | | | | | | | $ 4,457.00 | 99.0% |
| Audit/Legal | $ 5,500.00 | | $ 5,500.00 | | | | | | $ 3,650.00 | | | | | | | $ 3,650.00 | 66.4% |
| Equipment/Software | $ 7,000.00 | | $ 7,000.00 | | $ 139.95 | | $ 199.98 | | | | $ 2,643.92 | | $ 1,047.97 | $ 1,020.00 | $ 863.40 | $ 5,915.22 | 84.5% |
| FICA | $ 30,600.00 | | $ 30,600.00 | $ 1,994.51 | $ 2,017.78 | $ 2,133.92 | $ 2,256.51 | $ 3,396.36 | $ 2,236.13 | $ 2,221.61 | $ 2,316.07 | $ 2,355.49 | $ 2,326.26 | $ 3,546.74 | $ 2,281.65 | $ 29,083.03 | 95.0% |
| Health & Dental | $ 45,000.00 | $ (10,000.00) | $ 35,000.00 | $ 2,808.04 | $ 2,799.00 | $ 2,799.00 | $ 2,799.00 | $ 2,799.00 | $ 2,799.00 | $ 2,799.00 | $ 2,799.00 | $ 2,799.00 | $ 2,799.00 | $ 2,799.00 | $ 3,448.60 | $ 34,246.64 | 97.8% |
| Meals | $ 2,000.00 | | $ 2,000.00 | $ 197.73 | $ 351.85 | $ 91.41 | $ 86.09 | $ 51.25 | $ 278.92 | $ 223.07 | $ 58.25 | $ 278.24 | $ 206.70 | $ 97.25 | $ 229.19 | $ 2,149.95 | 107.5% |
| Membership Dues | $ 4,000.00 | | $ 4,000.00 | | | $ 3,145.00 | | | | | | $ 350.00 | | | | $ 3,495.00 | 87.4% |
| Miscellaneous | $ 500.00 | | $ 500.00 | | | | $ 40.00 | | | | | $ 14.88 | | | $ 200.00 | $ 254.88 | 51.0% |
| Mortgage | $ 23,916.00 | | $ 23,916.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 23,916.00 | 100.0% |
| Office & P.O. Liability Insurance | $ 1,400.00 | | $ 1,400.00 | $ 1,295.00 | | | | | | | | | | | | $ 1,295.00 | 92.5% |
| Office Maintenance | $ 10,000.00 | $ 16,025.38 | $ 26,025.38 | $ 16,254.30 | | $ 6,927.00 | $ 691.40 | $ 275.00 | $ 125.00 | $ 611.40 | $ 130.00 | $ 200.00 | $ 891.40 | | $ 891.40 | $ 26,996.90 | 103.7% |
| Payroll Expenses | $ 400,000.00 | | $ 400,000.00 | $ 26,832.21 | $ 27,135.97 | $ 28,654.56 | $ 30,256.41 | $ 45,156.64 | $ 29,938.74 | $ 29,800.61 | $ 31,035.46 | $ 31,550.25 | $ 31,168.59 | $ 47,122.37 | $ 31,163.19 | $ 389,815.00 | 97.5% |
| Postage | $ 750.00 | | $ 750.00 | $ 2.05 | $ 60.34 | $ 21.60 | $ 68.68 | $ 50.00 | $ 36.28 | $ 100.00 | $ 48.10 | $ 36.64 | $ 73.75 | $ 14.65 | $ 46.05 | $ 558.14 | 74.4% |
| Printing | $ 2,000.00 | | $ 2,000.00 | $ 74.20 | $ 259.11 | $ 105.19 | $ 55.90 | $ (40.00) | $ 229.93 | $ 233.12 | $ 220.73 | $ (104.00) | $ 213.06 | | $ 512.67 | $ 1,759.91 | 88.0% |
| Reserve | $ - | $ 10,000.00 | $ 10,000.00 | | | | | | | | | | | | | $ - | 0.0% |
| Strategic Planning | $ 7,500.00 | $ (7,500.00) | $ - | | | | | | | | | | | | | $ - | 0.0% |
| Subscriptions and Books | $ 750.00 | | $ 750.00 | $ 14.00 | $ 12.00 | $ 12.00 | $ 14.00 | $ 14.00 | $ 14.00 | | $ 14.00 | $ 245.00 | $ 16.00 | $ 29.08 | $ 16.00 | $ 400.08 | 53.3% |
| Supplies | $ 4,500.00 | | $ 4,500.00 | $ 398.51 | $ 229.56 | $ 413.71 | $ 187.10 | $ 490.61 | $ 160.45 | $ 367.30 | $ 299.86 | $ 546.23 | $ 288.53 | $ 342.03 | $ 543.19 | $ 4,267.08 | 94.8% |
| Technology | $ 7,000.00 | | $ 7,000.00 | | $ 341.21 | $ 352.99 | $ 356.43 | $ 712.86 | | $ 366.79 | $ 733.58 | $ 75.13 | $ 583.55 | $ 404.15 | $ 454.48 | $ 4,381.17 | 62.6% |
| Travel & Training | $ 8,000.00 | | $ 8,000.00 | $ 978.40 | $ 676.66 | $ 361.31 | $ 1,083.90 | $ 520.60 | $ 225.66 | $ 496.64 | $ 541.32 | $ 1,183.98 | $ 666.49 | $ 890.30 | $ 463.59 | $ 8,088.85 | 101.1% |
| Utilities | $ 6,200.00 | | $ 6,200.00 | $ 377.53 | $ 449.45 | $ 375.06 | $ 403.38 | $ 258.01 | $ 291.44 | $ 478.94 | $ 554.86 | $ 586.50 | $ 469.59 | $ 428.74 | $ 266.77 | $ 4,940.27 | 79.7% |
| VRS | $ 9,000.00 | | $ 9,000.00 | $ 707.61 | $ 707.61 | $ 707.61 | $ 792.20 | $ 832.20 | $ 645.88 | $ 792.20 | $ 792.20 | $ 792.20 | $ 792.20 | $ 832.20 | $ (36.16) | $ 8,357.95 | 92.9% |
| Website Update | $ 7,000.00 | | $ 7,000.00 | | | | | | | | | | | | | $ - | 0.0% |
| Workman's Comp | $ 500.00 | | $ 500.00 | $ 500.00 | | | | | | | | | | | | $ 500.00 | 100.0% |
| America's Wine Country | $ 1,100.00 | | $ 1,100.00 | | | | | | | | | | | | | $ - | 0.0% |
| DEQ Chesapeake Bay WIP III Expenses | $ 2,500.00 | | $ 2,500.00 | | | | | $ 224.54 | $ 189.81 | | | | | | | $ 414.35 | 16.6% |
| DRPT Mobility Management Expenses | $ 122,500.00 | $ (6,500.00) | $ 116,000.00 | $ 3,792.18 | $ 3,986.32 | $ 10,891.86 | $ 8,686.97 | $ 13,236.31 | $ 13,711.31 | $ 8,788.71 | $ 8,234.07 | $ 9,036.87 | $ 7,907.74 | $ 9,235.46 | $ 15,430.86 | $ 112,938.66 | 97.4% |
| DRPT Section 5310 Operating Expenses | $ 100,000.00 | $ (6,000.00) | $ 94,000.00 | | $ 16,014.50 | $ 8,254.00 | $ 7,335.00 | $ 7,018.00 | $ 268.84 | $ 14,912.70 | $ 8,257.15 | $ 6,383.65 | $ 7,175.00 | $ 7,621.50 | $ 8,252.00 | $ 91,492.34 | 97.3% |
| Path/New Freedom Expenses | | $ 12,500.00 | $ 12,500.00 | | | | $ 150.00 | $ 541.96 | $ 11,852.06 | | | | | | | $ 12,544.02 | 100.4% |
| Regional Tourism Expenses | $ 9,692.90 | | $ 9,692.90 | $ 19.87 | $ 4.99 | $ 432.65 | $ 106.81 | $ 138.96 | $ 4.99 | $ 83.19 | $ 97.97 | $ 338.39 | $ 95.47 | $ 68.64 | $ 3,324.82 | $ 4,716.75 | 48.7% |
| Rideshare Expenses | $ 50,000.00 | | $ 50,000.00 | $ 209.96 | $ 2,905.28 | $ 3,122.52 | $ 773.21 | $ 920.73 | $ 2,845.61 | $ 8,802.48 | $ 2,724.36 | $ 13,119.24 | $ 7,067.46 | $ 4,077.16 | $ 4,602.46 | $ 51,170.47 | 102.3% |
| Rideshare Vanpool Expenses | $ 8,500.00 | | $ 8,500.00 | $ 150.00 | | $ 650.00 | $ 442.00 | $ 250.70 | | $ 156.35 | $ 1,354.88 | $ 477.96 | $ 572.38 | $ 56.84 | $ 4,440.76 | $ 8,551.87 | 100.6% |
| RTP Expenses | $ 1,000.00 | | $ 1,000.00 | $ 30.52 | $ 105.00 | $ 72.49 | $ 212.55 | $ 58.86 | | $ 12.18 | $ 9.86 | $ 359.44 | $ 16.82 | $ 69.60 | $ 40.60 | $ 987.92 | 98.8% |
| USDA FMPP Expenses | $ 61,000.00 | | $ 61,000.00 | $ 225.00 | $ 8.59 | $ 18,030.78 | $ 168.00 | $ 6,088.87 | | $ 1,675.20 | $ 3,814.56 | $ 1,613.09 | $ 804.45 | $ 11,960.09 | $ 20,977.30 | $ 65,365.93 | 107.2% |
| VHDA VISTA Expenses | $ 15,000.00 | | $ 15,000.00 | $ 4,000.00 | | $ 4,000.00 | | | | $ 4,000.00 | | $ 3,000.00 | | | | $ 15,000.00 | 100.0% |
| VHSP Expenses | $ 1,000.00 | | $ 1,000.00 | $ 77.37 | $ 161.47 | $ 25.50 | $ 557.94 | $ 1,777.02 | $ 224.00 | $ 36.43 | $ 317.16 | $ 419.22 | $ 188.73 | $ 25.50 | $ 225.50 | $ 4,035.84 | 403.6% |
| VTC Marketing Grant Expenses | $ 18,000.00 | | $ 18,000.00 | | | | | | | | | $ 101.24 | $ 15,638.88 | $ 74.93 | $ 4,015.48 | $ 19,830.53 | 110.2% |
| | | | | | | | | | | | | | | | | | |
| **Total Expenditures** | **$ 978,408.90** | **$ 8,525.38** | **$ 986,934.28** | **$ 62,931.99** | **$ 61,178.28** | **$ 97,281.52** | **$ 59,676.46** | **$ 86,735.48** | **$ 71,721.05** | **$ 78,950.92** | **$ 68,990.36** | **$ 77,751.64** | **$ 83,003.02** | **$ 92,709.23** | **$ 104,646.80** | **$ 945,576.75** | 95.8% |

# MEMORANDUM

**To:** **Members of the Rappahannock-Rapidan Regional Commission**

**From:** **Patrick L. Mauney, Executive Director**

**Date:** **December 4, 2019**

**Subject:** **FY 2020 Year-to-Date Revenues & Expenditures**

FY 2020 Revenue and Expenditure reports through November 30th are enclosed for your review. These are unaudited reports for the first five months (42%) of the fiscal year.

Revenues are 56% of budget with no issues noted. Line items and adjustments were added for funds received from PATH Foundation for the FAMS Call Center staffing assistance discussed in October and to reflect revenues anticipated through the end of FY 2020 from Virginia Housing Development Authority (VHDA) for the Regional Housing Study.

Expenditures are in line with expectations at 40% of budget through November. The primary operating expense items for salaries and benefits are all at budgeted amounts, with no anticipated adjustments required at this time.

**REQUESTED ACTION**: Approval of the amended budget to reflect adjustments noted above.

# Rappahannock-Rapidan Regional Commission
## FY 2019 Revenue Snapshot - November 30, 2019

| Budget Items | Proposed Budget | Adjustments | Adjusted Budget | July | August | September | October | November | YTD Actual | YTD % |
|---|---|---|---|---|---|---|---|---|---|---|
| **Revenues** | | | | | | | | | | |
| Dues: | | | | | | | | | | |
| Culpeper County | $ 26,624.00 | | $ 26,624.00 | $ 26,623.92 | | | | | $ 26,623.92 | 100.0% |
| Fauquier County | $ 48,430.00 | | $ 48,430.00 | $ 48,429.67 | | | | | $ 48,429.67 | 100.0% |
| Madison County | $ 10,674.00 | | $ 10,674.00 | | | | $ 10,673.80 | | $ 10,673.80 | 100.0% |
| Orange County | $ 24,039.00 | | $ 24,039.00 | $ 24,038.46 | | | | | $ 24,038.46 | 100.0% |
| Rappahannock County | $ 6,027.00 | | $ 6,027.00 | $ 6,027.46 | | | | | $ 6,027.46 | 100.0% |
| Town of Culpeper | $ 14,945.00 | | $ 14,945.00 | | $ 14,944.98 | | | | $ 14,944.98 | 100.0% |
| Town of Gordonsville | $ 1,314.00 | | $ 1,314.00 | $ 1,313.89 | | | | | $ 1,313.89 | 100.0% |
| Town of Madison | $ 181.00 | | $ 181.00 | $ 180.94 | | | | | $ 180.94 | 100.0% |
| Town of Orange | $ 4,140.00 | | $ 4,140.00 | $ 4,140.04 | | | | | $ 4,140.04 | 100.0% |
| Town of The Plains | $ 189.00 | | $ 189.00 | | | $ 189.24 | | | $ 189.24 | 100.1% |
| Town of Remington | $ 524.00 | | $ 524.00 | $ 523.73 | | | | | $ 523.73 | 99.9% |
| Town of Warrenton | $ 8,185.00 | | $ 8,185.00 | $ 8,184.63 | | | | | $ 8,184.63 | 100.0% |
| Town of Washington | $ 105.00 | | $ 105.00 | | | | $ 104.58 | | $ 104.58 | 99.6% |
| Interest Income | $ 3,500.00 | | $ 3,500.00 | $ 286.34 | $ 310.89 | $ 283.06 | $ 266.97 | $ 223.65 | $ 1,370.91 | 39.2% |
| Other Income | $ 750.00 | | $ 750.00 | $ 200.00 | $ 1,300.08 | | | | $ 1,500.08 | 200.0% |
| DEQ Chesapeake Bay PDC Capacity | $ 47,500.00 | | $ 47,500.00 | | | | $ 21,500.00 | | $ 21,500.00 | 45.3% |
| DRPT Mobility Management Grant | $ 130,000.00 | | $ 130,000.00 | $ 11,394.00 | | $ 10,657.00 | $ 24,721.20 | $ 12,186.00 | $ 58,958.20 | 45.4% |
| DRPT Section 5310 Operating Grant | $ 100,000.00 | | $ 100,000.00 | $ 13,766.00 | | $ 6,948.00 | $ 15,013.00 | $ 5,760.00 | $ 41,487.00 | 41.5% |
| PATH Mobility Management Grant | $ - | $ 26,860.00 | $ 26,860.00 | | | | $ 26,860.00 | | $ 26,860.00 | 100.0% |
| PATH FHN Outreach | $ 5,000.00 | | $ 5,000.00 | $ 5,000.00 | | | | | $ 5,000.00 | 100.0% |
| Regional Housing | $ 48,604.00 | | $ 48,604.00 | $ 39,644.83 | $ 3,368.00 | $ 43.41 | $ 5,548.42 | | $ 48,604.66 | 100.0% |
| Regional Tourism | $ 7,000.00 | | $ 7,000.00 | $ 5,600.00 | | $ 1,400.00 | | | $ 7,000.00 | 100.0% |
| Rideshare Program | $ 129,920.00 | | $ 129,920.00 | | $ 12,312.00 | | $ 9,028.00 | $ 18,106.00 | $ 39,446.00 | 30.4% |
| Rideshare Vanpool Grant | $ 8,000.00 | | $ 8,000.00 | $ 3,552.00 | | | | | $ 3,552.00 | 44.4% |
| Rural Transportation Planning | $ 58,000.00 | | $ 58,000.00 | | | $ 15,533.02 | | | $ 15,533.02 | 26.8% |
| State Regional Planning Grant | $ 75,971.00 | | $ 75,971.00 | | | | | $ 37,985.00 | $ 37,985.00 | 50.0% |
| USDA FMPP Grant | $ 80,574.00 | | $ 80,574.00 | | $ 39,962.69 | | $ 34,934.39 | | $ 74,897.08 | 93.0% |
| VHDA Regional Housing Study | $ - | $ 25,000.00 | $ 25,000.00 | | | | | | $ - | 0.0% |
| VHSP Grant | $ 84,500.00 | | $ 84,500.00 | | | | $ 14,191.37 | $ 15,827.47 | $ 30,018.84 | 35.5% |
| VTC Marketing Grant | $ 21,012.50 | | $ 21,012.50 | | | | | | $ - | 0.0% |
| | | | | | | | | | | |
| **Total Revenue** | **$ 945,708.50** | **$ 51,860.00** | **$ 997,568.50** | **$ 198,905.91** | **$ 72,198.64** | **$ 35,053.73** | **$ 162,841.73** | **$ 90,088.12** | **$ 559,088.13** | 56.0% |

# Rappahannock-Rapidan Regional Commission
## FY 2019 Expenditure Snapshot - November 30, 2019

| Budget Items | Proposed Budget | Adjustments | Adjusted Budget | July | August | September | October | November | YTD Actual | YTD % |
|---|---|---|---|---|---|---|---|---|---|---|
| **Expenditures** | | | | | | | | | | |
| Advertising | $ 500.00 | | $ 500.00 | | | | | | $ - | 0.0% |
| Annual Meeting/Workshops/Meetings | $ 5,500.00 | | $ 5,500.00 | | | $ 4,832.29 | $ (705.00) | $ (70.00) | $ 4,057.29 | 73.8% |
| Audit/Legal | $ 5,000.00 | | $ 5,000.00 | | | | | | $ - | 0.0% |
| Equipment/Software | $ 7,000.00 | | $ 7,000.00 | $ 27.96 | | | $ 249.99 | | $ 277.95 | 4.0% |
| FICA | $ 31,500.00 | | $ 31,500.00 | $ 2,331.38 | $ 2,338.50 | $ 2,355.83 | $ 2,353.76 | $ 3,519.46 | $ 12,898.93 | 40.9% |
| Health & Dental | $ 41,300.00 | | $ 41,300.00 | $ 3,448.60 | $ 3,448.60 | $ 3,448.60 | $ 3,448.60 | $ 4,339.32 | $ 18,133.72 | 43.9% |
| Meals | $ 2,200.00 | | $ 2,200.00 | $ 337.47 | $ 95.66 | $ 57.88 | $ 89.50 | $ 113.15 | $ 693.66 | 31.5% |
| Membership Dues | $ 4,000.00 | | $ 4,000.00 | | $ 3,800.00 | | | | $ 3,800.00 | 95.0% |
| Miscellaneous | $ 500.00 | | $ 500.00 | $ 9.56 | | | | | $ 9.56 | 1.9% |
| Mortgage | $ 23,916.00 | | $ 23,916.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 1,993.00 | $ 9,965.00 | 41.7% |
| Office & P.O. Liability Insurance | $ 1,300.00 | | $ 1,300.00 | $ 1,327.00 | | | | | $ 1,327.00 | 102.1% |
| Office Maintenance | $ 10,000.00 | | $ 10,000.00 | $ 225.00 | $ 200.00 | $ 200.00 | $ 491.40 | $ 275.00 | $ 1,391.40 | 13.9% |
| Payroll Expenses | $ 410,000.00 | | $ 410,000.00 | $ 31,752.22 | $ 31,845.70 | $ 32,071.78 | $ 32,045.26 | $ 47,728.18 | $ 175,443.14 | 42.8% |
| Postage | $ 750.00 | | $ 750.00 | $ 70.25 | $ 20.50 | $ 15.80 | $ 22.00 | | $ 128.55 | 17.1% |
| Printing | $ 2,000.00 | | $ 2,000.00 | | $ 330.84 | $ 119.02 | $ 178.48 | | $ 628.34 | 31.4% |
| Reserve | $ 5,385.00 | | $ 5,385.00 | | | | | | $ - | 0.0% |
| Subscriptions and Books | $ 500.00 | | $ 500.00 | $ 16.00 | $ 16.00 | $ 16.00 | $ 134.56 | $ 16.00 | $ 198.56 | 39.7% |
| Supplies | $ 4,500.00 | | $ 4,500.00 | $ 102.64 | $ 268.63 | $ 174.46 | $ 241.06 | $ 212.94 | $ 999.73 | 22.2% |
| Technology | $ 8,000.00 | | $ 8,000.00 | $ 414.33 | $ 444.33 | $ 444.33 | $ 445.42 | $ 611.22 | $ 2,359.63 | 29.5% |
| Travel & Training | $ 9,000.00 | | $ 9,000.00 | $ 1,929.97 | $ 257.50 | $ 380.12 | $ 617.18 | $ 451.82 | $ 3,636.59 | 40.4% |
| Utilities | $ 6,000.00 | | $ 6,000.00 | $ 327.90 | $ 386.75 | $ 353.72 | $ 326.38 | $ 207.71 | $ 1,602.46 | 26.7% |
| VRS | $ 9,500.00 | | $ 9,500.00 | $ 803.51 | $ 803.51 | $ 803.51 | $ 803.51 | $ 843.51 | $ 4,057.55 | 42.7% |
| Website Update | $ 7,000.00 | | $ 7,000.00 | $ 6,510.00 | | | | | $ 6,510.00 | 93.0% |
| Workman's Comp | $ 500.00 | | $ 500.00 | $ 500.00 | | | | | $ 500.00 | 100.0% |
| America's Wine Country | $ 1,100.00 | | $ 1,100.00 | | | | | | $ - | 0.0% |
| DEQ Chesapeake Bay PDC Capacity Expen | $ 1,000.00 | | $ 1,000.00 | | | | | $ 106.56 | $ 106.56 | 10.7% |
| DRPT Mobility Management Expenses | $ 100,000.00 | $ 26,860.00 | $ 126,860.00 | $ 9,624.63 | $ 8,622.23 | $ 7,824.50 | $ 15,297.52 | $ 14,218.77 | $ 55,587.65 | 43.8% |
| DRPT Section 5310 Operating Expenses | $ 100,000.00 | | $ 100,000.00 | $ 7,043.00 | $ 7,718.50 | $ 7,746.50 | $ 8,932.50 | | $ 31,440.50 | 31.4% |
| PATH FHN Outreach Expenses | $ 5,000.00 | | $ 5,000.00 | $ 3,400.43 | | | | | $ 3,400.43 | 68.0% |
| Regional Tourism Expenses | $ 8,500.00 | | $ 8,500.00 | $ 4.99 | $ 322.87 | $ 13.90 | $ 255.39 | $ 114.42 | $ 711.57 | 8.4% |
| Rideshare Expenses | $ 59,500.00 | | $ 59,500.00 | $ 417.09 | $ 4,126.20 | $ 4,798.37 | $ 1,240.18 | $ 5,082.23 | $ 15,664.07 | 26.3% |
| Rideshare Vanpool Expenses | $ 8,500.00 | | $ 8,500.00 | | $ 14.50 | $ 47.00 | | $ 16.82 | $ 78.32 | 0.9% |
| RTP Expenses | $ 1,000.00 | | $ 1,000.00 | | $ 41.76 | $ 31.32 | | | $ 73.08 | 7.3% |
| USDA FMPP Expenses | $ 61,000.00 | | $ 61,000.00 | $ 1,026.74 | $ 44.24 | $ 19,723.24 | | $ 17,435.63 | $ 38,229.85 | 62.7% |
| VHDA Regional Housing Study Expenses | $ - | $ 25,000.00 | $ 25,000.00 | | | | | | $ - | 0.0% |
| VHSP Expenses | $ 3,000.00 | | $ 3,000.00 | $ 26.83 | $ 207.17 | $ 230.83 | $ 26.83 | $ 130.32 | $ 621.98 | 20.7% |
| VTC Marketing Grant Expenses | $ 1,257.50 | | $ 1,257.50 | $ 108.92 | $ 218.33 | $ 490.34 | | | $ 817.59 | 65.0% |
| | | | | | | | | | | |
| **Total Expenditures** | **$ 945,708.50** | **$ 51,860.00** | **$ 997,568.50** | **$ 73,779.42** | **$ 67,565.32** | **$ 88,172.34** | **$ 68,487.52** | **$ 97,346.06** | **$ 395,350.66** | 39.6% |
| | | | | | | | | | | |
| Unprogrammed Revenues: | | | $ - | | | | | | | |

**Rappahannock-Rapidan Regional Commission**
**Budget Draft FY 2021 (for Madison County Funding Request Only)**

| Budget Items | Draft FY 2021 Budget |
|---|---|
| **Revenues** | |
| Dues: | |
| Culpeper County | $ 27,589.00 |
| Fauquier County | $ 49,677.00 |
| Madison County | $ 10,833.00 |
| Orange County | $ 24,892.00 |
| Rappahannock County | $ 5,915.00 |
| Town of Culpeper | $ 15,454.00 |
| Town of Gordonsville | $ 1,332.00 |
| Town of Madison | $ 202.00 |
| Town of Orange | $ 4,191.00 |
| Town of The Plains | $ 194.00 |
| Town of Remington | $ 541.00 |
| Town of Warrenton | $ 8,248.00 |
| Town of Washington | $ 104.00 |
| Interest Income | $ 3,500.00 |
| Other Income | $ 800.00 |
| DEQ Chesapeake Bay PDC Capacity | $ 52,000.00 |
| DRPT Mobility Management Grant | $ 128,000.00 |
| DRPT Section 5310 Operating Grant | $ 30,000.00 |
| Regional Housing | $ 48,604.00 |
| Regional Tourism | $ 7,000.00 |
| Rideshare Program | $ 134,920.00 |
| Rideshare Vanpool Grant | $ - |
| Rural Transportation Planning | $ 58,000.00 |
| State Regional Planning Grant | $ 75,970.00 |
| VHDA Housing Study | $ 75,000.00 |
| VHSP Grant | $ 84,500.00 |
| | |
| **Total Revenue** | **$ 847,466.00** |
| | |
| **Expenditures** | |
| Advertising | $ 500.00 |
| Annual Meeting/Workshops/Meetings | $ 5,000.00 |
| Audit/Legal | $ 5,000.00 |
| Equipment/Software | $ 7,000.00 |
| FICA | $ 35,000.00 |
| Health & Dental | $ 69,000.00 |
| Meals | $ 2,500.00 |
| Membership Dues | $ 4,500.00 |
| Miscellaneous | $ 500.00 |
| Mortgage | $ 23,916.00 |
| Office & P.O. Liability Insurance | $ 1,300.00 |
| Office Maintenance | $ 10,000.00 |
| Payroll Expenses | $ 430,000.00 |
| Postage | $ 750.00 |
| Printing | $ 3,000.00 |
| Reserve | $ - |
| Subscriptions and Books | $ 500.00 |
| Supplies | $ 4,500.00 |
| Technology | $ 8,000.00 |
| Travel & Training | $ 9,000.00 |
| Utilities | $ 6,200.00 |
| VRS | $ 15,700.00 |
| Workman's Comp | $ 500.00 |
| America's Wine Country | $ 1,100.00 |
| DEQ Chesapeake Bay PDC Capacity Exper | $ 1,000.00 |
| DRPT Mobility Management Expenses | $ 30,000.00 |
| DRPT Section 5310 Operating Expenses | $ 30,000.00 |
| Regional Tourism Expenses | $ 7,000.00 |
| Rideshare Expenses | $ 72,000.00 |
| RTP Expenses | $ 1,000.00 |
| VHDA Housing Study Expenses | $ 60,000.00 |
| VHSP Expenses | $ 3,000.00 |
| | |
| **Total Expenditures** | **$ 847,466.00** |

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE: January 13, 2020**

| **IDENTIFICATION** | |
|---|---|
| *Organization/Agency Name*: | Virginia Career Works-Piedmont Region (formerly Piedmont Workforce Network) |
| *Street Name:* | 1001 Research Park Blvd, Suite 301, Charlottesville VA 22911 |
| *Mailing Address:* | 1001 Research Park Blvd, Suite 301, Charlottesville VA 22911 |
| *Agency Contact:* | Helen Cauthen, President |
| *Telephone Number:* | 434-979-5610 ext 100 |
| *E-mail Address – Agency Contact* | hcauthen@centralvirginia.org |
| *Agency's Web Address:* | www.vcwpiedmont.com |
| *Federal Tax ID#:* | 54-1788499 |
| *Audit:* | **X** Yes ☐ No |

| **PURPOSE/NARRATIVE** |
|---|
| *Missions and Goals:*<br>Formerly the Piedmont Workforce Network, the region's workforce development organization has been renamed the Virginia Career Works – Piedmont Region (VCW-Piedmont) at the state's request. Serving all of the localities in Planning Districts 9 and 10, the mission of VCW-Piedmont is to be a proactive partner with employers and economic development leaders by providing a qualified workforce that meets current and future job demand. |
| *Experience and Accomplishments:* |

Virginia Career Works – Piedmont Region serves as the umbrella to bring together community partners, such as the Virginia Employment Commission, Department of Aging & Rehabilitation Services, and many others, to help streamline and reduce duplication of workforce development efforts. The organization oversees a comprehensive "one-stop" center, named the Virginia Career Works-Charlottesville Center, as well as two affiliate centers, the Culpeper Center and the Orange Center.

In FY 2019, the Culpeper Center welcomed 2,246 residents from the region (mainly from PD-9), including 147 residents from Madison County. The Culpeper visits resulted in 8 job placements for Madison residents. Additionally, five Madison residents enrolled in WIOA Youth, Adult, or Dislocated Worker programs. Through VCW-Piedmont's efforts, those Madison residents, who became participants in the WIOA program, received direct services by working with well-trained case managers. Participants received staff-assisted job searches, and in some cases, were eligible for financial support for occupational skills training to help them become more marketable.

*Benefits of Funding:*

VCW-Piedmont Centers serve any job seeker at no charge. Extensive services, including training and education assistance, are available to Adults, Dislocated Workers, and Youth who qualify as WIOA participants. Typically, participants are low income, have barriers to employment, or have been laid off due to a business closing or reduction in force.

Fifteen cents per capita is requested from each locality to conduct activities that are not considered allowable expenditures under federal guidelines. For FY 2020, VCW-Piedmont received another 7.82% decrease in federal funding, resulting in our region receiving the 2nd lowest amount of federal workforce funding in the Commonwealth. Since 2015, funding has been reduced from $1.248 million to $827,429 – a decrease of 50.94%. If federal funds continue to decrease, the organization may have a limited ability to operate the VCW-Piedmont Centers in our region and may not be able to provide funding for occupational skills training and employment search assistance to job seekers. Also, decreasing funding makes it more difficult to serve as a resource to provide a qualified workforce with the skills and training necessary to grow and sustain local businesses. Thus, locality funds are very important for FY 2021.

*Intention of Use:*

GO Virginia Region 9 covers the same geographic footprint as VCW-Piedmont. VCW-Piedmont programs provide job seeking assistance and training to the unemployed, the underemployed, youth with barriers to employment, individuals with disabilities, Veterans and businesses. By using the Target Markets Report and the recently released update to the GO Virginia Growth and Diversification Plan, VCW-Piedmont continues to work to ensure that the programs for job seekers meet the needs of the business community now and for the long-term. VCW-Piedmont also serves as the regional convener bringing community partners together in order to work together smoothly and reduce duplication of workforce development efforts. Initiatives to strengthen the workforce are intended to increase the talent base and skills available to the region's employers.

The locality contributions are divided into three separate funds and the VCW-Piedmont Council oversees the allocations. The three funds include a matching grant fund to apply for other federal,

state, and local grants, such as GO Virginia, which requires a local match, a special projects fund to tackle regional workforce challenges, and an emergency fund to continue to provide services if federal funds are decreased. The VCW-Piedmont Council, which is comprised of local elected officials from each locality, including the Madison County designee (currently Supervisor Amber Foster), will designate how locality funding is spent to ensure the monies are used appropriately

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>X *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 1,991 |

Signature: Helen Cauthen Title: President

Printed Name: Helen Cauthen Date: 1/2/2020

VIRGINIA CAREER WORKS
PIEDMONT REGION

1001 Research Park Blvd, Suite 301, Charlottesville, VA 22911
434.979.5610
www.vwcpiedmont.com

## COMPARATIVE FINANCIAL ANALYSIS

**Fiscal Year: July 1, 2019 to June 30, 2020**

| | Actual FY2019 | Current Year FY2020 | Projected Amount FY2021 |
|---|---|---|---|
| **Revenues** | | | |
| Albemarle County | 15,857 | 16,155 | 16,295 |
| City of Charlottesville | 7,361 | 7,370 | 7,392 |
| Culpeper County | 7,408 | 7,541 | 7,692 |
| Orange County | 5,066 | 5,178 | 5,337 |
| Fluvanna County | 3,920 | 3,970 | 4,003 |
| Madison County | 500 | 500 | 500 |
| Rappahannock County | 1,096 | 1,093 | 1,082 |
| Federal Funding - Including grants | 975,775 | 812,011 | 738,192 |
| Miscellaneous Income | 116,010 | 116,788 | 136,915 |
| **Total** | **$1,132,993** | **$970,606** | **$917,408** |
| **Funding Uses/Expenses** | | | |
| Personnel (Salary/Fringe) | 605,006 | 469,612 | 434,826 |
| Operating | 507,800 | 497,571 | 473,603 |
| **Total** | **$1,112,806** | **$967,183** | **$908,429** |

VIRGINIA CAREER WORKS
PIEDMONT REGION

1001 Research Park Blvd, Suite 301, Charlottesville, VA 22911
434.979.5610
www.vwcpiedmont.com

## Total Beneficiaries by Locality

The numbers below reflect the number of visitors to the Virginia Career Works Centers which are overseen by the Piedmont Workforce Development Board.

| Locality | FY2019 Actual | FY2020 Budgeted | FY2021 Projected |
|---|---|---|---|
| Albemarle | 3,673 | 3,800 | 3,800 |
| Charlottesville | 3,851 | 4,000 | 4,000 |
| Culpeper County | 1,591 | 1,600 | 1,600 |
| Fauquier County | 597 | 600 | 600 |
| Fluvanna County | 494 | 500 | 500 |
| Greene County | 471 | 500 | 500 |
| Louisa County | 482 | 500 | 500 |
| Madison County | 147 | 200 | 200 |
| Nelson County | 172 | 200 | 200 |
| Orange County | 832 | 850 | 850 |
| Rappahannock County | 57 | 50 | 50 |
| Other | 201 | 200 | 200 |
| Undetermined | 469 | 500 | 500 |
| **Totals** | **13,037** | **13,500** | **13,500** |

*Virginia Career Works - Piedmont Region*
*Statement of Income and Expense*
*July through October 2019*

| | Adult - PD10 | | | Adult - PD9 | | |
|---|---|---|---|---|---|---|
| | Jul - Oct 19 | Budget | % of Budget | Jul - Oct 19 | Budget | % of Budget |
| **Ordinary Income/Expense** | | | | | | |
| **Income** | | | | | | |
| **41000 · Local Government Revenues** | 0.00 | | | 0.00 | | |
| **43000 · Federal Revenues** | | | | | | |
| **43110 · WIOA Adult** | 45,191.30 | 167,024.22 | 27.06% | 20,235.93 | 111,349.49 | 18.17% |
| **43120 · WIOA Dislocated Worker** | 0.00 | | | 0.00 | | |
| **43130 · WIOA Youth** | 0.00 | | | 0.00 | | |
| **43140 · WIOA Administration** | 0.00 | | | 0.00 | | |
| **Total 43000 · Federal Revenues** | 45,191.30 | 167,024.22 | 27.06% | 20,235.93 | 111,349.49 | 18.17% |
| **45000 · Reimbursements & Fees** | | | | | | |
| **45120 · Rent reimbursement** | 0.00 | | | 0.00 | | |
| **45130 · Comm & data reimbursement** | 0.00 | | | 0.00 | | |
| **Total 45000 · Reimbursements & Fees** | 0.00 | | | 0.00 | | |
| **Total Income** | 45,191.30 | 167,024.22 | 27.06% | 20,235.93 | 111,349.49 | 18.17% |
| **Gross Profit** | 45,191.30 | 167,024.22 | 27.06% | 20,235.93 | 111,349.49 | 18.17% |
| **Expense** | | | | | | |
| **50000 · Operating Expenses** | | | | | | |
| **51000 · Personnel expenses** | 22,297.68 | 65,935.31 | 33.82% | 13,909.56 | 50,518.40 | 27.53% |
| **53000 · Non-personnel operating expense** | | | | | | |
| **52100 · Contractual Services** | 4,478.35 | 11,666.55 | 38.39% | 0.00 | | |
| **53100 · Office supplies and services** | 59.78 | 430.00 | 13.9% | 44.38 | 1,730.15 | 2.57% |
| **53200 · Facility and equipment** | 4,625.12 | 7,663.80 | 60.35% | 160.14 | 2,000.00 | 8.01% |
| **53220 · Equipment** | 0.75 | 400.00 | 0.19% | 0.86 | 1,240.24 | 0.07% |
| **53300 · Travel** | 53.69 | 1,200.00 | 4.47% | 205.38 | 1,000.00 | 20.54% |
| **53400 · Insurance** | 0.00 | | | 0.00 | | |
| **53500 · Business exp & service charges** | 0.00 | 130.00 | 0.0% | 0.00 | 21.71 | 0.0% |
| **53600 · Staff support and development** | 0.00 | 50.00 | 0.0% | 0.00 | 883.64 | 0.0% |
| **53800 · Outreach and marketing** | 0.00 | | | 0.00 | 340.40 | 0.0% |
| **Total 53000 · Non-personnel operating expense** | 9,217.69 | 21,540.35 | 42.79% | 410.76 | 7,216.14 | 5.69% |
| **Total 50000 · Operating Expenses** | 31,515.37 | 87,475.66 | 36.03% | 14,320.32 | 57,734.54 | 24.8% |
| **54200 · Participant services** | | | | | | |
| **54240 · Adult & DLW Training (40% req)** | 13,571.43 | 78,048.56 | 17.39% | 5,815.61 | 53,414.95 | 10.89% |
| **54255 · Other supportive services** | 104.50 | 1,500.00 | 6.97% | 100.00 | 200.00 | 50.0% |
| **54260 · Youth elements** | 0.00 | | | 0.00 | | |
| **Total 54200 · Participant services** | 13,675.93 | 79,548.56 | 17.19% | 5,915.61 | 53,614.95 | 11.03% |
| **Total Expense** | 45,191.30 | 167,024.22 | 27.06% | 20,235.93 | 111,349.49 | 18.17% |
| **Net Ordinary Income** | 0.00 | 0.00 | 0.0% | 0.00 | 0.00 | 0.0% |
| **Net Income** | **0.00** | **0.00** | **0.0%** | **0.00** | **0.00** | **0.0%** |

**33% of the year**
**4 months reporting**

***Virginia Career Works - Piedmont Region***
***Statement of Income and Expense***
***July through October 2019***

| | Dislocated Worker - PD10 | | | Dislocated Worker - PD9 | | |
|---|---|---|---|---|---|---|
| | Jul - Oct 19 | Budget | % of Budget | Jul - Oct 19 | Budget | % of Budget |
| **Ordinary Income/Expense** | | | | | | |
| **Income** | | | | | | |
| **41000 · Local Government Revenues** | 0.00 | | | 0.00 | | |
| **43000 · Federal Revenues** | | | | | | |
| **43110 · WIOA Adult** | 0.00 | | | 0.00 | | |
| **43120 · WIOA Dislocated Worker** | 14,538.64 | 125,075.85 | 11.62% | 11,071.39 | 86,093.83 | 12.86% |
| **43130 · WIOA Youth** | 0.00 | | | 0.00 | | |
| **43140 · WIOA Administration** | 0.00 | | | 0.00 | | |
| **Total 43000 · Federal Revenues** | 14,538.64 | 125,075.85 | 11.62% | 11,071.39 | 86,093.83 | 12.86% |
| **45000 · Reimbursements & Fees** | | | | | | |
| **45120 · Rent reimbursement** | 0.00 | | | 0.00 | | |
| **45130 · Comm & data reimbursement** | 0.00 | | | 0.00 | | |
| **Total 45000 · Reimbursements & Fees** | 0.00 | | | 0.00 | | |
| **Total Income** | 14,538.64 | 125,075.85 | 11.62% | 11,071.39 | 86,093.83 | 12.86% |
| **Gross Profit** | 14,538.64 | 125,075.85 | 11.62% | 11,071.39 | 86,093.83 | 12.86% |
| **Expense** | | | | | | |
| **50000 · Operating Expenses** | | | | | | |
| **51000 · Personnel expenses** | 8,218.45 | 43,200.29 | 19.02% | 9,753.09 | 47,375.68 | 20.59% |
| **53000 · Non-personnel operating expense** | | | | | | |
| **52100 · Contractual Services** | 2,985.56 | 11,666.55 | 25.59% | 0.00 | | |
| **53100 · Office supplies and services** | 79.39 | 550.00 | 14.44% | 13.89 | 611.76 | 2.27% |
| **53200 · Facility and equipment** | 1,651.43 | 3,800.00 | 43.46% | 118.90 | 2,464.30 | 4.83% |
| **53220 · Equipment** | 0.59 | 425.00 | 0.14% | 0.77 | 42.39 | 1.82% |
| **53300 · Travel** | 26.14 | 600.00 | 4.36% | 139.74 | 750.00 | 18.63% |
| **53400 · Insurance** | 0.00 | | | 0.00 | | |
| **53500 · Business exp & service charges** | 0.00 | | | 0.00 | | |
| **53600 · Staff support and development** | 0.00 | | | 0.00 | 598.45 | 0.0% |
| **53800 · Outreach and marketing** | 0.00 | 0.00 | 0.0% | 0.00 | 52.36 | 0.0% |
| **Total 53000 · Non-personnel operating expense** | 4,743.11 | 17,041.55 | 27.83% | 273.30 | 4,519.26 | 6.05% |
| **Total 50000 · Operating Expenses** | 12,961.56 | 60,241.84 | 21.52% | 10,026.39 | 51,894.94 | 19.32% |
| **54200 · Participant services** | | | | | | |
| **54240 · Adult & DLW Training (40% req)** | 1,482.08 | 61,834.01 | 2.4% | 1,045.00 | 34,007.17 | 3.07% |
| **54255 · Other supportive services** | 95.00 | 3,000.00 | 3.17% | 0.00 | 191.72 | 0.0% |
| **54260 · Youth elements** | 0.00 | | | 0.00 | | |
| **Total 54200 · Participant services** | 1,577.08 | 64,834.01 | 2.43% | 1,045.00 | 34,198.89 | 3.06% |
| **Total Expense** | 14,538.64 | 125,075.85 | 11.62% | 11,071.39 | 86,093.83 | 12.86% |
| **Net Ordinary Income** | 0.00 | 0.00 | 0.0% | 0.00 | 0.00 | 0.0% |
| **Net Income** | **0.00** | **0.00** | **0.0%** | **0.00** | **0.00** | **0.0%** |

**33% of the year**
**4 months reporting**

*Virginia Career Works - Piedmont Region*
*Statement of Income and Expense*
*July through October 2019*

| | Youth - PD10 | | | Youth - PD9 | | |
|---|---|---|---|---|---|---|
| | Jul - Oct 19 | Budget | % of Budget | Jul - Oct 19 | Budget | % of Budget |
| **Ordinary Income/Expense** | | | | | | |
| **Income** | | | | | | |
| **41000 · Local Government Revenues** | 0.00 | | | 0.00 | | |
| **43000 · Federal Revenues** | | | | | | |
| **43110 · WIOA Adult** | 0.00 | | | 0.00 | | |
| **43120 · WIOA Dislocated Worker** | 0.00 | | | 0.00 | | |
| **43130 · WIOA Youth** | 32,223.69 | 120,405.28 | 26.76% | 16,460.01 | 64,216.14 | 25.63% |
| **43140 · WIOA Administration** | 0.00 | | | 0.00 | | |
| **Total 43000 · Federal Revenues** | 32,223.69 | 120,405.28 | 26.76% | 16,460.01 | 64,216.14 | 25.63% |
| **45000 · Reimbursements & Fees** | | | | | | |
| **45120 · Rent reimbursement** | 0.00 | | | 0.00 | | |
| **45130 · Comm & data reimbursement** | 0.00 | | | 0.00 | | |
| **Total 45000 · Reimbursements & Fees** | 0.00 | | | 0.00 | | |
| **Total Income** | 32,223.69 | 120,405.28 | 26.76% | 16,460.01 | 64,216.14 | 25.63% |
| **Gross Profit** | 32,223.69 | 120,405.28 | 26.76% | 16,460.01 | 64,216.14 | 25.63% |
| **Expense** | | | | | | |
| **50000 · Operating Expenses** | | | | | | |
| **51000 · Personnel expenses** | 20,598.63 | 57,691.14 | 35.71% | 15,236.87 | 46,972.05 | 32.44% |
| **53000 · Non-personnel operating expense** | | | | | | |
| **52100 · Contractual Services** | 1,865.97 | 11,666.55 | 15.99% | 0.00 | | |
| **53100 · Office supplies and services** | 46.15 | 575.00 | 8.03% | 59.84 | 520.00 | 11.51% |
| **53200 · Facility and equipment** | 3,930.42 | 4,556.69 | 86.26% | 187.92 | 1,054.09 | 17.83% |
| **53220 · Equipment** | 1.24 | 750.00 | 0.17% | 1.02 | 20.00 | 5.1% |
| **53300 · Travel** | 64.78 | 1,200.00 | 5.4% | 559.04 | 450.00 | 124.23% |
| **53400 · Insurance** | 0.00 | | | 0.00 | | |
| **53500 · Business exp & service charges** | 0.00 | | | 0.00 | | |
| **53600 · Staff support and development** | 0.00 | | | 0.00 | | |
| **53800 · Outreach and marketing** | 0.00 | | | 0.00 | | |
| **Total 53000 · Non-personnel operating expense** | 5,908.56 | 18,748.24 | 31.52% | 807.82 | 2,044.09 | 39.52% |
| **Total 50000 · Operating Expenses** | 26,507.19 | 76,439.38 | 34.68% | 16,044.69 | 49,016.14 | 32.73% |
| **54200 · Participant services** | | | | | | |
| **54240 · Adult & DLW Training (40% req)** | 0.00 | | | 0.00 | | |
| **54255 · Other supportive services** | 190.00 | 1,500.00 | 12.67% | 0.00 | 200.00 | 0.0% |
| **54260 · Youth elements** | 5,526.50 | 42,465.90 | 13.01% | 415.32 | 15,000.00 | 2.77% |
| **Total 54200 · Participant services** | 5,716.50 | 43,965.90 | 13.0% | 415.32 | 15,200.00 | 2.73% |
| **Total Expense** | 32,223.69 | 120,405.28 | 26.76% | 16,460.01 | 64,216.14 | 25.63% |
| **Net Ordinary Income** | 0.00 | 0.00 | 0.0% | 0.00 | 0.00 | 0.0% |
| **Net Income** | **0.00** | **0.00** | **0.0%** | **0.00** | **0.00** | **0.0%** |

**33% of the year**
**4 months reporting**

*Virginia Career Works - Piedmont Region*
*Statement of Income and Expense*
*July through October 2019*

| | One Stop Operator | | | PWDB Administration | | |
|---|---|---|---|---|---|---|
| | Jul - Oct 19 | Budget | % of Budget | Jul - Oct 19 | Budget | % of Budget |
| **Ordinary Income/Expense** | | | | | | |
| **Income** | | | | | | |
| **41000 · Local Government Revenues** | 0.00 | | | 30,789.24 | 63,031.57 | 48.85% |
| **43000 · Federal Revenues** | | | | | | |
| **43110 · WIOA Adult** | 0.00 | 11,667.00 | 0.0% | 132.63 | 6,817.64 | 1.95% |
| **43120 · WIOA Dislocated Worker** | 0.00 | 11,666.00 | 0.0% | 132.63 | 6,831.54 | 1.94% |
| **43130 · WIOA Youth** | 0.00 | 11,667.00 | 0.0% | 341.01 | 6,832.63 | 4.99% |
| **43140 · WIOA Administration** | 0.00 | 3,500.00 | 0.0% | 27,049.60 | 78,864.38 | 34.3% |
| **Total 43000 · Federal Revenues** | 0.00 | 38,500.00 | 0.0% | 27,655.87 | 99,346.19 | 27.84% |
| **45000 · Reimbursements & Fees** | | | | | | |
| **45120 · Rent reimbursement** | 0.00 | | | 0.00 | | |
| **45130 · Comm & data reimbursement** | 0.00 | | | 0.00 | | |
| **Total 45000 · Reimbursements & Fees** | 0.00 | | | 0.00 | | |
| **Total Income** | 0.00 | 38,500.00 | 0.0% | 58,445.11 | 162,377.76 | 35.99% |
| **Gross Profit** | 0.00 | 38,500.00 | 0.0% | 58,445.11 | 162,377.76 | 35.99% |
| **Expense** | | | | | | |
| **50000 · Operating Expenses** | | | | | | |
| **51000 · Personnel expenses** | 0.00 | 38,500.00 | 0.0% | 48,021.25 | 124,419.85 | 38.6% |
| **53000 · Non-personnel operating expense** | | | | | | |
| **52100 · Contractual Services** | 0.00 | | | 1,122.02 | 10,982.97 | 10.22% |
| **53100 · Office supplies and services** | 0.00 | | | 45.20 | 1,429.69 | 3.16% |
| **53200 · Facility and equipment** | 0.00 | | | 2,953.07 | 6,575.91 | 44.91% |
| **53220 · Equipment** | 0.00 | | | 2,157.91 | 5,238.57 | 41.19% |
| **53300 · Travel** | 0.00 | | | 24.83 | 3,097.66 | 0.8% |
| **53400 · Insurance** | 0.00 | | | 3,068.00 | 3,199.21 | 95.9% |
| **53500 · Business exp & service charges** | 0.00 | | | 0.00 | 79.88 | 0.0% |
| **53600 · Staff support and development** | 0.00 | | | 0.00 | 5,554.02 | 0.0% |
| **53800 · Outreach and marketing** | 0.00 | | | 1,052.83 | 1,800.00 | 58.49% |
| **Total 53000 · Non-personnel operating expense** | 0.00 | | | 10,423.86 | 37,957.91 | 27.46% |
| **Total 50000 · Operating Expenses** | 0.00 | 38,500.00 | 0.0% | 58,445.11 | 162,377.76 | 35.99% |
| **54200 · Participant services** | | | | | | |
| **54240 · Adult & DLW Training (40% req)** | 0.00 | | | 0.00 | | |
| **54255 · Other supportive services** | 0.00 | | | 0.00 | | |
| **54260 · Youth elements** | 0.00 | | | 0.00 | | |
| **Total 54200 · Participant services** | 0.00 | | | 0.00 | | |
| **Total Expense** | 0.00 | 38,500.00 | 0.0% | 58,445.11 | 162,377.76 | 35.99% |
| **Net Ordinary Income** | 0.00 | 0.00 | 0.0% | 0.00 | 0.00 | 0.0% |
| **Net Income** | **0.00** | **0.00** | **0.0%** | **0.00** | **0.00** | **0.0%** |

**33% of the year**
**4 months reporting**

***Virginia Career Works - Piedmont Region***
***Statement of Income and Expense***
***July through October 2019***

| | Orange Satellite | | | Facilities Pass-Through | | |
|---|---|---|---|---|---|---|
| | Jul - Oct 19 | Budget | % of Budget | Jul - Oct 19 | Budget | % of Budget |
| **Ordinary Income/Expense** | | | | | | |
| **Income** | | | | | | |
| **41000 · Local Government Revenues** | 340.01 | 21,640.00 | 1.57% | 0.00 | | |
| **43000 · Federal Revenues** | | | | | | |
| **43110 · WIOA Adult** | 0.00 | | | 0.00 | | |
| **43120 · WIOA Dislocated Worker** | 0.00 | | | 0.00 | | |
| **43130 · WIOA Youth** | 0.00 | | | 0.00 | | |
| **43140 · WIOA Administration** | 0.00 | | | 0.00 | | |
| **Total 43000 · Federal Revenues** | 0.00 | | | 0.00 | | |
| **45000 · Reimbursements & Fees** | | | | | | |
| **45120 · Rent reimbursement** | 0.00 | | | 30,552.14 | 91,680.00 | 33.33% |
| **45130 · Comm & data reimbursement** | 0.00 | | | 1,497.87 | 3,600.00 | 41.61% |
| **Total 45000 · Reimbursements & Fees** | 0.00 | | | 32,050.01 | 95,280.00 | 33.64% |
| **Total Income** | 340.01 | 21,640.00 | 1.57% | 32,050.01 | 95,280.00 | 33.64% |
| **Gross Profit** | 340.01 | 21,640.00 | 1.57% | 32,050.01 | 95,280.00 | 33.64% |
| **Expense** | | | | | | |
| **50000 · Operating Expenses** | | | | | | |
| **51000 · Personnel expenses** | 0.00 | 20,740.00 | 0.0% | 0.00 | | |
| **53000 · Non-personnel operating expense** | | | | | | |
| **52100 · Contractual Services** | 0.00 | | | 0.00 | | |
| **53100 · Office supplies and services** | 0.00 | | | 0.00 | | |
| **53200 · Facility and equipment** | 305.01 | 900.00 | 33.89% | 32,050.03 | 95,280.00 | 33.64% |
| **53220 · Equipment** | 0.00 | | | 0.00 | | |
| **53300 · Travel** | 0.00 | | | 0.00 | | |
| **53400 · Insurance** | 0.00 | | | 0.00 | | |
| **53500 · Business exp & service charges** | 0.00 | | | 0.00 | | |
| **53600 · Staff support and development** | 35.00 | | | 0.00 | | |
| **53800 · Outreach and marketing** | 0.00 | | | 0.00 | | |
| **Total 53000 · Non-personnel operating expense** | 340.01 | 900.00 | 37.78% | 32,050.03 | 95,280.00 | 33.64% |
| **Total 50000 · Operating Expenses** | 340.01 | 21,640.00 | 1.57% | 32,050.03 | 95,280.00 | 33.64% |
| **54200 · Participant services** | | | | | | |
| **54240 · Adult & DLW Training (40% req)** | 0.00 | | | 0.00 | | |
| **54255 · Other supportive services** | 0.00 | | | 0.00 | | |
| **54260 · Youth elements** | 0.00 | | | 0.00 | | |
| **Total 54200 · Participant services** | 0.00 | | | 0.00 | | |
| **Total Expense** | 340.01 | 21,640.00 | 1.57% | 32,050.03 | 95,280.00 | 33.64% |
| **Net Ordinary Income** | 0.00 | 0.00 | 0.0% | -0.02 | 0.00 | 100.0% |
| **Net Income** | **0.00** | **0.00** | **0.0%** | **-0.02** | **0.00** | **100.0%** |

**33% of the year**
**4 months reporting**

*Virginia Career Works - Piedmont Region*
*Statement of Income and Expense*
*July through October 2019*

| | TOTAL | | |
|---|---|---|---|
| | Jul - Oct 19 | Budget | % of Budget |
| **Ordinary Income/Expense** | | | |
| **Income** | | | |
| **41000 · Local Government Revenues** | 31,129.25 | 84,671.57 | 36.77% |
| **43000 · Federal Revenues** | | | |
| **43110 · WIOA Adult** | 65,559.86 | 296,858.35 | 22.09% |
| **43120 · WIOA Dislocated Worker** | 25,742.66 | 229,667.22 | 11.21% |
| **43130 · WIOA Youth** | 49,024.71 | 203,121.05 | 24.14% |
| **43140 · WIOA Administration** | 27,049.60 | 82,364.38 | 32.84% |
| **Total 43000 · Federal Revenues** | 167,376.83 | 812,011.00 | 20.61% |
| **45000 · Reimbursements & Fees** | | | |
| **45120 · Rent reimbursement** | 30,552.14 | 91,680.00 | 33.33% |
| **45130 · Comm & data reimbursement** | 1,497.87 | 3,600.00 | 41.61% |
| **Total 45000 · Reimbursements & Fees** | 32,050.01 | 95,280.00 | 33.64% |
| **Total Income** | 230,556.09 | 991,962.57 | 23.24% |
| **Gross Profit** | 230,556.09 | 991,962.57 | 23.24% |
| **Expense** | | | |
| **50000 · Operating Expenses** | | | |
| **51000 · Personnel expenses** | 138,035.53 | 495,352.72 | 27.87% |
| **53000 · Non-personnel operating expense** | | | |
| **52100 · Contractual Services** | 10,451.90 | 45,982.62 | 22.73% |
| **53100 · Office supplies and services** | 348.63 | 5,846.60 | 5.96% |
| **53200 · Facility and equipment** | 45,982.04 | 124,294.79 | 36.99% |
| **53220 · Equipment** | 2,163.14 | 8,116.20 | 26.65% |
| **53300 · Travel** | 1,073.60 | 8,297.66 | 12.94% |
| **53400 · Insurance** | 3,068.00 | 3,199.21 | 95.9% |
| **53500 · Business exp & service charges** | 0.00 | 231.59 | 0.0% |
| **53600 · Staff support and development** | 35.00 | 7,086.11 | 0.49% |
| **53800 · Outreach and marketing** | 1,052.83 | 2,192.76 | 48.01% |
| **Total 53000 · Non-personnel operating expense** | 64,175.14 | 205,247.54 | 31.27% |
| **Total 50000 · Operating Expenses** | 202,210.67 | 700,600.26 | 28.86% |
| **54200 · Participant services** | | | |
| **54240 · Adult & DLW Training (40% req)** | 21,914.12 | 227,304.69 | 9.64% |
| **54255 · Other supportive services** | 489.50 | 6,591.72 | 7.43% |
| **54260 · Youth elements** | 5,941.82 | 57,465.90 | 10.34% |
| **Total 54200 · Participant services** | 28,345.44 | 291,362.31 | 9.73% |
| **Total Expense** | 230,556.11 | 991,962.57 | 23.24% |
| **Net Ordinary Income** | -0.02 | 0.00 | 100.0% |
| **Net Income** | **-0.02** | **0.00** | **100.0%** |

**33% of the year**
**4 months reporting**

## *Virginia Career Works - Piedmont Region*
## *Statement of Financial Position*
## *As of October 31, 2019*

| | Oct 31, 19 |
|---|---|
| **ASSETS** | |
| **Current Assets** | |
| **Checking/Savings** | |
| **10002 · PWN-VNB** | 103,908.81 |
| **10009 · Federal Funds** | 178,852.24 |
| **Total Checking/Savings** | 282,761.05 |
| **Accounts Receivable** | 97,863.44 |
| **Other Current Assets** | 13,200.47 |
| **Total Current Assets** | 393,824.96 |
| **TOTAL ASSETS** | **393,824.96** |
| **LIABILITIES & EQUITY** | |
| **Liabilities** | |
| **Current Liabilities** | |
| **Accounts Payable** | 200,485.71 |
| **Other Current Liabilities** | |
| **25050 · Accrued Expenses** | 5,562.43 |
| **28000 · Unearned Revenue - PD10** | 68,214.82 |
| **28100 · Unearned Rev - PD9** | 115,040.51 |
| **28200 · Unearned Revenue - Other** | 4,517.13 |
| **Total Other Current Liabilities** | 193,334.89 |
| **Total Current Liabilities** | 393,820.60 |
| **Total Liabilities** | 393,820.60 |
| **Equity** | |
| **32000 · Unrestricted Net Assets** | 4.38 |
| **Net Income** | -0.02 |
| **Total Equity** | 4.36 |
| **TOTAL LIABILITIES & EQUITY** | **393,824.96** |

INTERNAL REVENUE SERVICE
DISTRICT DIRECTOR
31 HOPKINS PLAZA
BALTIMORE, MD 21201

DEPARTMENT OF THE TREASURY

**IRS EXEMPTION LETTER**

Date: APR 08 1996

THOMAS JEFFERSON REGIONAL ECONOMIC
DEVELOPMENT PARTNERSHIP INC
P.O. BOX 1525
CHARLOTTESVILLE, VA 22902

Employer Identification Number:
54-1788499
Case Number:
526096027
Contact Person:
EP/EO CUSTOMER SERVICE UNIT
Contact Telephone Number:
(410) 962-6058
Internal Revenue Code
Section 501(c)(6)
Accounting Period Ending:
June 30
Form 990 Required:
Yes
Addendum Applies:
Yes

APR 12 1996

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(a) of the Internal Revenue Code as an organization described in the section indicated above.

Unless specifically excepted, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) for each employee to whom you pay $100 or more during a calendar year. And, unless excepted, you are also liable for tax under the Federal Unemployment Tax Act for each employee to whom you pay $50 or more during a calendar quarter if, during the current or preceding calendar year, you had one or more employees at any time in each of 20 calendar weeks or you paid wages of $1,500 or more in any calendar quarter. If you have any questions about excise, employment, or other Federal taxes, please address them to this office.

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

In the heading of this letter we have indicated whether you must file Form 990, Return of Organization Exempt From Income Tax. If Yes is indicated, you are required to file Form 990 only if your gross receipts each year are normally more than $25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally $25,000 or less, and sign the return.

If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of $10 a day is charged when a return is filed late, unless there is reasonable cause for the delay. However, the maximum penalty charged cannot exceed $5,000 or 5 per-

cent of your gross receipts for the year, whichever is less. This penalty may also be charged if a return is not complete, so please be sure your return is complete before you file it.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

If we have indicated in the heading of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

Because this letter could help resolve any questions about your exempt status, you should keep it in your permanent records.

We have sent a copy of this letter to your representative as indicated in your power of attorney.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,

Paul M. Harrington

District Director

Enclosure:
Addendum

THOMAS JEFFERSON REGIONAL ECONOMIC

You are required to make available for public inspection a copy of your exemption application, and supporting documents, and this exemption letter. If you are required to file an annual information return, you are also required to make a copy of the return available for public inspection for three years after the return is due. Failure to make these documents available for public inspection may subject you to a penalty of $10 per day for each day there is a failure to comply (up to a maximum of $5,000 in the case of an annual return). See Internal Revenue Service Notice 88-120, 1988-2 C.B. 454, for additional information.

Contributions to your organization are not deductible by donors under section 170(c)(2) of the Code.

Under section 6113, any fund-raising solicitation (including a solicitation for membership dues payment) you make must include an express statement (in a conspicuous and easily recognizable format) that contributions and gifts are not deductible as charitable contributions for federal income tax purposes. This express statement does not apply, however, if your annual gross receipts are normally $100,000 or less, or if your solicitations are made to no more than ten persons during a calendar year. The law provides penalties for failure to comply with this requirement, unless the failure is due to reasonable cause. See Internal Revenue Service Notice 88-120, 1988-2 C.B. 454, for additional information.

**COMMONWEALTH OF VIRGINIA**
**STATE CORPORATION COMMISSION**

AT RICHMOND, MARCH 14, 2013

The State Corporation Commission has found the accompanying articles submitted on behalf of

Central Virginia Partnership for Economic Development (formerly Jefferson Partnership for Economic Development, Inc., Thomas)

to comply with the requirements of law, and confirms payment of all required fees. Therefore, it is ORDERED that this

CERTIFICATE OF AMENDMENT

be issued and admitted to record with the articles of amendment in the Office of the Clerk of the Commission, effective March 14, 2013.

The corporation is granted the authority conferred on it by law in accordance with the articles, subject to the conditions and restrictions imposed by law.

STATE CORPORATION COMMISSION

By

James C. Dimitri
Commissioner

13-03-13-1202
AMENACPT
CIS0368

SCC888N
(07/07)

COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

# ARTICLES OF AMENDMENT

## CHANGING THE NAME OF A VIRGINIA NONSTOCK CORPORATION

**By Unanimous Consent of the Members or by the Directors Without Member Action**

The undersigned, on behalf of the corporation set forth below, pursuant to § 13.1-888 of the Code of Virginia, executes these articles and states as follows:

1. The current name of the corporation is Thomas Jefferson Partnership for Economic Development, Inc.

2. The name of the corporation is changed to Central Virginia Partnership for Economic Development

3. The foregoing amendment was adopted on December 14, 2012 (date) **(mark appropriate box):**

☐ By the unanimous consent of the members with voting rights.

**OR**

☒ By a vote of at least two-thirds of the directors in office. Member action on the amendment was not required because **(mark appropriate box):**

☒ There are no members;
**or**
☐ There are no members with voting rights.

Executed in the name of the corporation by:

Ronald J. Cottrell
(signature)

3/7/13
(date)

Ronald J. Cottrell
(printed name)

Chairman of the Board
(corporate title)

0456273
(corporation's SCC ID no.)

(telephone number (optional))

***(The execution must be by the chairman or any vice-chairman of the board of directors, the president, or any other of its officers authorized to act on behalf of the corporation.)***

**PRIVACY ADVISORY:** Information such as social security number, date of birth, maiden name, or financial institution account numbers is NOT required to be included in business entity documents filed with the Office of the Clerk of the Commission. Any information provided on these documents is subject to public viewing.

**SEE INSTRUCTIONS ON THE REVERSE**

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE: January 13, 2020**

| **IDENTIFICATION** | |
|---|---|
| *Organization/Agency Name*: | Skyline CAP, Inc. |
| *Street Name:* | 532 S. Main St |
| *Mailing Address:* | PO Box 588 |
| *Agency Contact:* | Simon Fiscus, Interim Executive Director |
| *Telephone Number:* | 540-948-3916 ext. 150 |
| *E-mail Address – Agency Contact* | hsdirector@skylinecap.org |
| *Agency's Web Address:* | www.skylinecap.org |
| *Federal Tax ID#:* | 541570712 |
| *Audit:* | [X] Yes [ ] No |

| **PURPOSE/NARRATIVE** |
|---|
| *Missions and Goals:*<br><br>Skyline CAP, Inc. (Skyline) is a non-profit community action agency (CAA) responsible for providing resources that combat poverty. Our vision is that all people within our service area will have access to education, housing, economic opportunities and services necessary to become self-sufficient. Our mission is to strengthen our communities by improving the lives of those in need through actions promoting self-sufficiency. We seek to eliminate the impact of poverty by focusing on education, housing stability and economic opportunities. |

*Experience and Accomplishments:*

Skyline Community Action Partnership has been Madison County's Community Action Agency (CAA) since 1991 and has maintained strong financial and service-oriented operations during that time and generally under distressed budgetary constraints. Community Action organizations are approved by the local government and designated by the Governor under the Federal and State CSBG Act and, as such, guarantees each community that certain standards and compliance guidelines are met and maintained. Heavily monitored for compliance, Skyline has excelled as a CAA for 29 years in Madison County with the support of local government, other community organizations and volunteers. We continue to successfully provide core services including a Head Start pre-school program for 3 and 4-year-old children, Project Discovery, Healthy Families, Emergency Home Repair Program, Housing Choice Voucher rental assistance, housing/rental counseling, foreclosure prevention, and financial skills education.

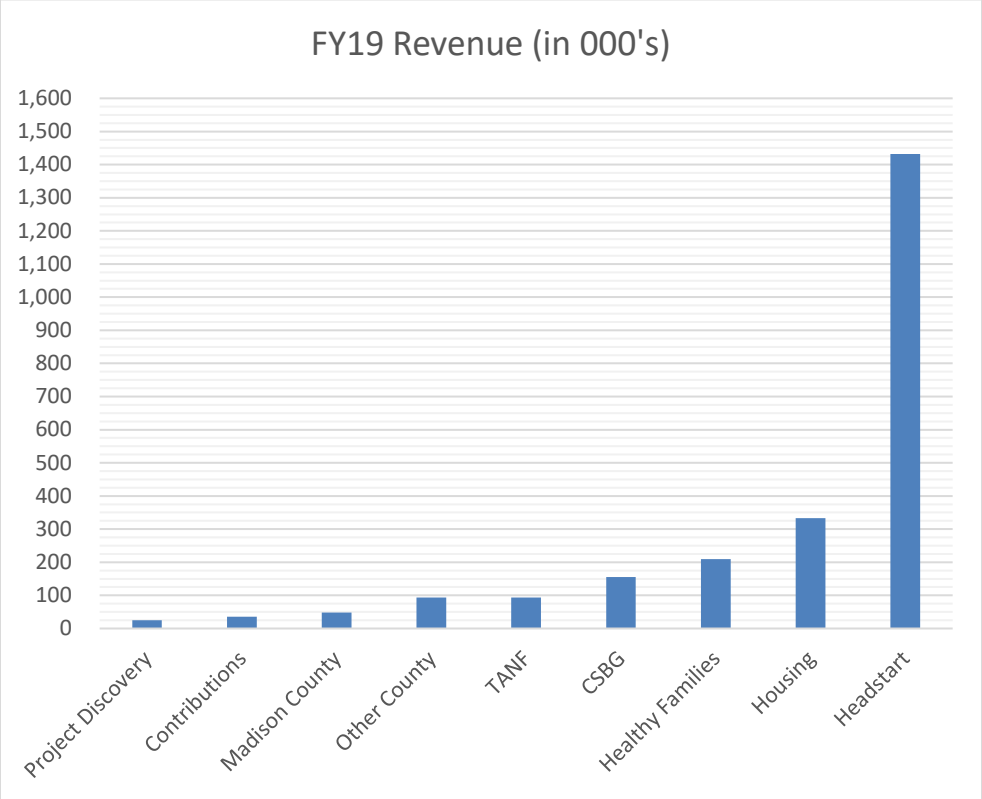
Skyline is managed by a team of professionals who bring decades of both for-profit and non-profit business experience to the agency. Skyline is governed by a tripartite Board of Directors that includes representation from low-income, public and private sectors of the communities we serve. Our board members possess a wide range of experience both personally and professionally that helps support Skyline's mission and agency operations.

**Accomplishments in *Madison County* this past year include:**

Skyline works primarily with families in poverty and their diverse needs are represented in the services we consistently provide.

- Maintained four (4) 2-bedroom rental units located on Duplex Lane in Madison County, providing low income families with safe and affordable housing with rent that is below HUD's fair market rent for this area.
- Housing vouchers issued for rental assistance to 30 families with $192,682 in rental payments to Madison County landlords. (Average of 280 vouchers issued across all counties.)
- Employed two (2) teachers, two (2) teacher assistants, two (2) classroom aides and one (1) family advocate for Skyline's Head Start preschool program in Madison. The teachers, assistants and aide worked with 38 very low and low-income students last year to prepare them for public school education. The family advocate builds relationships with the parents and supported them in achieving their goals, such as research-based parenting classes, nutrition classes, housing stability, continued education and financial security. Skyline has made repairs to both Head Start classrooms located behind the Madison County Primary School to ensure the health and safety of our clients and personnel. We continue to build positive relationships with the staff and Superintendent for Madison County Public Schools.

- Skyline CAP launched the Healthy Families program in FY 2018 in Madison, Orange, Fauquier, and Rappahannock counties. In our first year in Madison County, we worked with eight (8) families supporting the following goals: (1) achieving positive pregnancy outcomes and maternal and child health outcomes, (2) promoting optimal child development, and (3) having parents demonstrate positive parent-child interaction and positive parenting knowledge and behavior.
- Skyline's Project Discovery program worked with 124 Madison County Public School students, connecting them with resources to help them stay in and graduate high school while also exploring options for life after high school.
- Thirty-five (35) families received mortgage and rental housing counseling.
- Skyline's Emergency Home Repair program completed five (5) projects totaling more than $9,000 for Madison County homeowners in need of basic health and safety repairs. Projects included installation of ramps, roof repairs/replacement, and general home repairs. Fifteen (15) applicants are currently on our waiting list, two (2) of which are in Madison County. Priority is given to income-eligible seniors and persons with disabilities who are unable to afford repairs on a limited budget.
- During the last year (and continuing), Skyline conducted workshops related to rental and fair housing, financial literacy and pre-purchase with 24 participants in total.
- The chart below represents Skyline's FY19 revenues from all sources across the agency:



*Benefits of Funding:*

Funding from Skyline's local government partners is critical to the services we provide and is a strong endorsement to the community of the importance of our programs. This includes educational programs such as Head Start, Project Discovery and Healthy Families as well as housing programs, including administration of the HUD Housing Choice Voucher Program, an Emergency Home Repair Program and providing housing/rental counseling and workshops. These programs address the issues of poverty in our area and support family stability as a foundation for economic security. The overall benefit is positive individual, family and community level change. As part of Madison County's safety net to its neediest residents, Skyline strives to offer services that are not provided elsewhere in the county and works with other providers and community partners to accomplish our goals. We offer experienced and credentialed staff who work with clients seeking our no-cost services to set goals and follow through. Services are accessible, confidential and customized to individual needs.

The services we provide are determined and regularly evaluated using a Community Needs Assessment conducted on our service area. The process involves engaging local community partners and citizens as well as citizens who are living in poverty to identify solutions that provide stability and support economic security. This includes surveys, focus groups and key informant interviews and accessing other assessments when available. This feedback combined with quantitative data is used to both determine and evaluate the services we provide.

*Intention of Use:*

Budget Narrative Detail: The request of $54,622 will help defray some of the costs associated with the following:

- **$17,100 Salary and Fringe:** The County's Housing Counselor, offering housing and foreclosure prevention counseling to individuals and families in jeopardy of losing their homes. Services include default counseling, financial skills group workshops and home repair intake for needy residents. HUD reports show that families who receive housing counseling in one form or another become more self-reliant and better equipped to move out of poverty and maintain housing. We also seek funding from HUD, VHDA and other funders to help maintain our certifications and adherence to national best practice standards. Skyline's total annual cost of this program in calendar 2019 was $129,859.
- **$4,000 Emergency Home Repair:** Home repair for seniors, seniors with disabilities, veterans, and low-income families such as well repair, roof repair, wheelchair ramps and other health and safety fixes is a constant need in our community. Funds from the county will help with repairs as it is leveraged with other resources (labor and funding) from Rapidan Better Housing Corporation in Madison (RBHC), Southeast Rural Community Action Program (SERCAP), Albemarle Housing Improvement Program (AHIP) and private grants. Skyline's total annual cost varies with funding but has averaged $25,500 over the past three (3) years, 35% of which was for Madison residents. The FY20 budget for emergency home repair is $34,495 across the counties of Madison, Greene, and Orange.

- **$5,900 Operating Costs:** Funds will help defray some of the operating cost associated with the Madison office. Services available to Madison County residents are provided in the Madison county office where they live. Skyline's annual operating cost associated with the Madison office is $64K.
- **$27,622 to support Head Start Teacher salaries:** The Head Start program receives a federal grant for $1,432,528 annually to serve 179 preschool slots. The portion of the grant allotted to serve up to 40 (currently 36) at-risk students in Madison County is $288,106, with the base salary of each of the two bachelor degreed Head Start teachers' salaries being $32,351. The public-school system is Skyline's competition for teachers. Madison County's base teacher pay is $43,000. Our funding request is broken down as follows:

| | |
|---|---|
| Starting pay of a Madison County Public School teacher | 43,000 |
| Current base salary funded by Head Start | (32,351) |
| Salary gap | 10,649 |
| Fringe at 29.69% - based on Skyline's FY20 budget | 3,162 |
| Total Salary & Fringe gap | 13,811 |
| Number of classrooms | 2 |
| Funding request | 27,622 |

Through this request, we are requesting help from the county to alleviate this pay discrepancy to help stabilize and support preschool services to the at-risk children (100% of federal poverty level and below with at least 10% (historically 20%) having a disability) within Madison County. Madison County's funding reflects a 9.59% match that will also be used to provide a portion of the federally mandated 25% non-federal match.

## CLIENTS SERVED – FY ENDING 6/30/2019

| FNPI EDUCATON AND COGNITIVE DEVELOPMENT | | |
|---|---|---|
| **PROGRAM** | **SERVICE** | **CLIENTS** |
| Head Start | Head Start Preschool | 202 |
| Project Discovery | College readiness/support | 164 |
| Healthy Families | Intensive home visits focusing on enhancing child welfare, health and development | 21 |
| FNPI HOUSING | | |
| Housing | Financial Management Programs (budgeting, credit management, credit repair, credit counseling) | 129 |
| Housing Choice Voucher Program | Rental Assistance | 283 |
| Housing Counseling | Rental Counseling | 301 |
| Emergency Home Repair Program | Health and safety improvements (structural, appliance, plumbing, etc.) | 17 |

## CLIENTS SERVED YEAR-TO-DATE – FY ENDING 6/30/2020

| FNPI EDUCATON AND COGNITIVE DEVELOPMENT | | |
|---|---|---|
| **PROGRAM** | **SERVICE** | **CLIENTS** |
| Head Start | Head Start Preschool | 190 |
| Project Discovery | College readiness/support | 30 |
| Healthy Families | Intensive home visits focusing on enhancing child welfare, health and development | 19 |
| FNPI HOUSING | | |
| Housing | Financial Management Programs (budgeting, credit management, credit repair, credit counseling) | 0 |
| Housing Choice Voucher Program | Rental Assistance | 260 |
| Housing Counseling | Rental Counseling | 103 |
| Emergency Home Repair Program | Health and safety improvements (structural, appliance, plumbing, etc.) | 10 |

**CLIENTS PROJECTED – FY ENDING 6/30/ 2021**

| FNPI EDUCATON AND COGNITIVE DEVELOPMENT | | |
|---|---|---|
| **PROGRAM** | **SERVICE** | **CLIENTS** |
| Head Start | Head Start Preschool | 179 |
| Project Discovery | College readiness/support | 100 |
| Healthy Families | Intensive home visits focusing on enhancing child welfare, health and development | 30 |
| **FNPI HOUSING** | | |
| Housing | Financial Management Programs (budgeting, credit management, credit repair, credit counseling) | 65 |
| Housing Choice Voucher Program | Rental Assistance | 272 |
| Housing Counseling | Rental Counseling | 200 |
| Emergency Home Repair Program | Health and safety improvements (structural, appliance, plumbing, etc.) | 25 |

**TOTAL CLIENTS SERVED BY COUNTY***

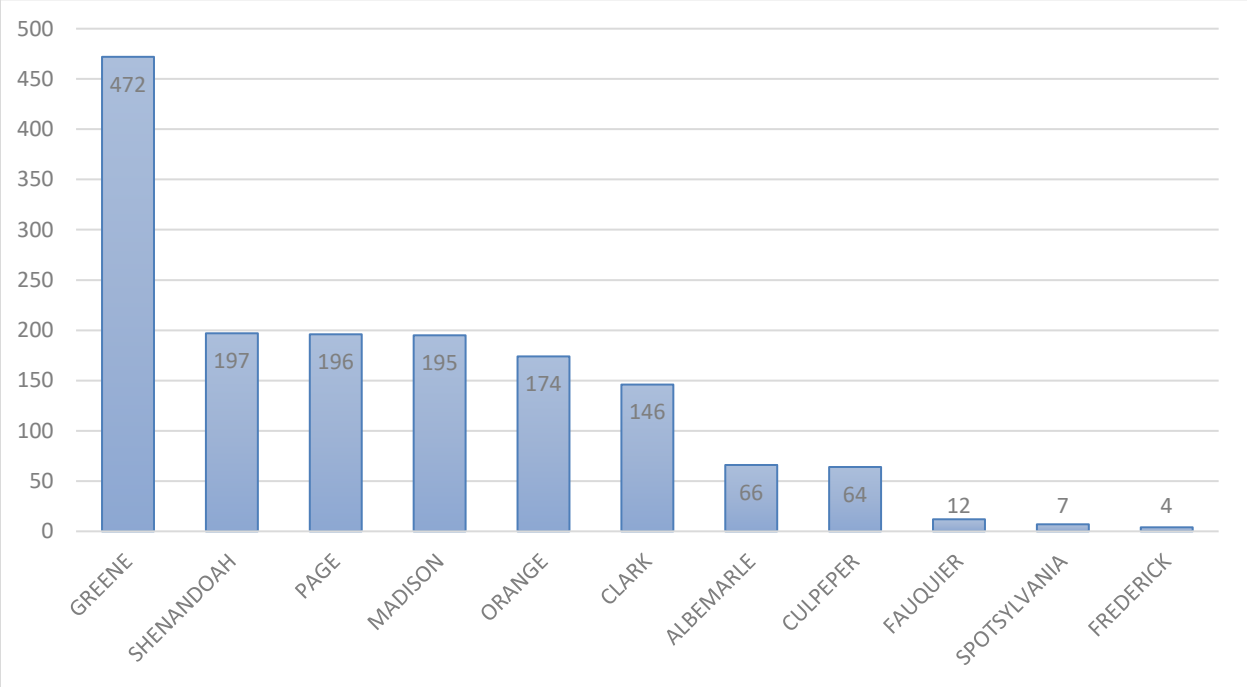



**Chart represents all agency clients served by all programs; funds received from Madison County are used for Madison County residents only.*

| FUNDING | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>☒ *Human Services*<br>☒ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 54,622.00 |

Signature: Simon C. Fiscus Title: Interim Executive Director

Printed Name: Simon Fiscus Date: 01/13/2020

# SKYLINE COMMUNITY ACTION PARTNERSHIP, INC.

## FINANCIAL REPORT

## YEAR ENDED JUNE 30, 2018

ROBINSON, FARMER, COX ASSOCIATES

*A PROFESSIONAL LIMITED LIABILITY COMPANY CERTIFIED PUBLIC ACCOUNTANTS*

CHARLOTTESVILLE ▫ RICHMOND ▫ FREDERICKSBURG ▫ STAUNTON ▫ BLACKSBURG ▫ LOUISA

RFC

**SKYLINE COMMUNITY ACTION PARTNERSHIP, INC.**

**FINANCIAL REPORT**

**YEAR ENDED JUNE 30, 2018**

**Table of Contents**


| | Page |
|---|---|
| Independent Auditors' Report | 1-2 |
| *Financial Statements:* | |
| Statement of Financial Position | 3 |
| Statement of Activities | 4 |
| Statement of Functional Expenses | 5 |
| Statement of Cash Flows | 6 |
| Notes to Financial Statements | 7-10 |
| *Compliance:* | |
| Independent Auditors' Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards* | 11-12 |
| Independent Auditors' Report on Compliance For Each Major Program and on Internal Control over Compliance Required by Uniform Guidance | 13-14 |
| Schedule of Expenditures of Federal Awards | 15 |
| Notes to Schedule of Expenditures of Federal Awards | 16 |
| Schedule of Findings and Questioned Costs | 17 |
| Summary Schedule of Prior Audit Findings | 18 |

## Independent Auditors' Report

**To the Board Members**
**Skyline Community Action Partnership, Inc.**
**Madison, Virginia**

### Report on the Financial Statements

We have audited the accompanying financial statements of Skyline Community Action Partnership, Inc. (a nonprofit organization), which comprise the statement of financial position as of June 30, 2018, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

*Management's Responsibility for the Financial Statements*

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

*Auditors' Responsibility*

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

*Opinion*

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Skyline Community Action Partnership, Inc. as of June 30, 2018, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

*Other Matters*

*Other Information*

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

**Other Reporting Required by** *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated March 27, 2019, on our consideration of Skyline Community Action Partnership, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Skyline Community Action Partnership Inc.'s internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Skyline Community Action Partnership, Inc.'s internal control over financial reporting and compliance.

Robinson, Farmer, Cox Associates

Charlottesville, Virginia
March 27, 2019

# - Financial Statements -

**SKYLINE COMMUNITY ACTION PARTNERSHIP, INC.**

**Statement of Financial Position**
**At June 30, 2018**

| | | |
|---|---|---|
| **ASSETS** | | |
| Current Assets: | | |
| Cash and cash equivalents | $ | 762,163 |
| Grants receivable | | 90,345 |
| Prepaid expenses | | 13,756 |
| Total current assets | $ | 866,264 |
| Property and Equipment: | | |
| Land | $ | 304,981 |
| Office equipment | | 126,220 |
| Modular buildings | | 237,772 |
| Other buildings | | 627,933 |
| Classroom improvements | | 5,334 |
| Playground equipment | | 103,771 |
| Health equipment | | 18,266 |
| Subtotal | $ | 1,424,277 |
| Accumulated depreciation | | (608,390) |
| Net property and equipment | $ | 815,887 |
| Total assets | $ | 1,682,151 |
| **LIABILITIES AND NET ASSETS** | | |
| Current Liabilities: | | |
| Accounts payable | $ | 4,523 |
| Accrued expenses | | 47,448 |
| Total current liabilities | $ | 51,971 |
| Long-term Liabilities: | | |
| Compensated absences | $ | 32,577 |
| Total long-term liabilities | $ | 32,577 |
| Total liabilities | $ | 84,548 |
| Net Assets: | | |
| Unrestricted | $ | 1,236,137 |
| Temporarily restricted | | 361,466 |
| Total net assets | $ | 1,597,603 |
| Total liabilities and net assets | $ | 1,682,151 |

The accompanying notes to financial statements are an integral part of this statement.

**SKYLINE COMMUNITY ACTION PARTNERSHIP, INC.**

**Statement of Activities**
**Year Ended June 30, 2018**

| | Unrestricted | Temporarily Restricted | Total |
|---|---|---|---|
| Revenues, Gains, and Other Support | | | |
| Grants from government agencies: | | | |
| Federal Head Start funds | $ - | $ 1,400,816 | $ 1,400,816 |
| Emergency Home Repair | - | 10,000 | 10,000 |
| Federal CSBG funds | - | 99,511 | 99,511 |
| Federal Housing Counseling | - | 74,076 | 74,076 |
| USDA | - | 131,788 | 131,788 |
| Project Discovery | - | 3,282 | 3,282 |
| Greene County | - | 42,367 | 42,367 |
| Madison County | - | 47,585 | 47,585 |
| Page County | - | 23,000 | 23,000 |
| Orange County | - | 2,000 | 2,000 |
| TANF | - | 63,750 | 63,750 |
| Interest | 1,220 | - | 1,220 |
| Program income | 1,380 | 4,070 | 5,450 |
| Section 8 fees | 132,804 | - | 132,804 |
| Rental income | - | 116,769 | 116,769 |
| Other income | 14,793 | 11,598 | 26,391 |
| Total | $ 150,197 | $ 2,030,612 | $ 2,180,809 |
| Net assets released from restrictions: | | | |
| Restrictions satisfied by payments | $ 1,998,287 | $ (1,998,287) | $ - |
| Total revenues, gains, and other support | $ 2,148,484 | $ 32,325 | $ 2,180,809 |
| Expenses: | | | |
| Program Services | $ 1,758,666 | $ - | $ 1,758,666 |
| Supporting Services: | | | |
| Management and general | 342,952 | - | 342,952 |
| Fundraising | 5 | - | 5 |
| Total expenses | $ 2,101,623 | $ - | $ 2,101,623 |
| Changes in net assets | $ 46,861 | $ 32,325 | $ 79,186 |
| Net assets, beginning of year | 1,189,276 | 329,141 | 1,518,417 |
| Net assets, end of year | $ 1,236,137 | $ 361,466 | $ 1,597,603 |

The accompanying notes to financial statements are an integral part of this statement.

**SKYLINE COMMUNITY ACTION PARTNERSHIP, INC.**

**Statement of Functional Expenses**
**Year Ended June 30, 2018**

| | Program Services | Supporting Services: Management and General | Supporting Services: Fundraising | Total |
|---|---|---|---|---|
| Salaries | $ 982,862 | $ 170,026 | $ 3 | $ 1,152,891 |
| Payroll taxes | 100,662 | 15,019 | - | 115,681 |
| Retirement contribution | 14,135 | 4,746 | - | 18,881 |
| Other employee benefits | 121,995 | 35,224 | 1 | 157,220 |
| Total salaries and related expenses | $ 1,219,654 | $ 225,015 | $ 4 | $ 1,444,673 |
| Professional fees | $ 4,171 | $ 40,557 | $ - | $ 44,728 |
| Client services | 7,165 | 29 | - | 7,194 |
| Insurance | 827 | 19,556 | - | 20,383 |
| Supplies | 201,611 | 8,521 | - | 210,132 |
| Communication | 20,112 | 2,335 | - | 22,447 |
| Postage and shipping | 1,239 | 1,011 | - | 2,250 |
| Equipment rental and maintenance | 17,021 | 17,823 | 1 | 34,845 |
| Dues and publications | 857 | 3,898 | - | 4,755 |
| Travel | 21,691 | 388 | - | 22,079 |
| Conferences and training | 38,423 | 2,471 | - | 40,894 |
| Occupancy | 166,941 | 18,042 | - | 184,983 |
| Emergency assistance | 15,520 | - | - | 15,520 |
| Other | 3,195 | 3,306 | - | 6,501 |
| Total expenses before depreciation | $ 1,718,427 | $ 342,952 | $ 5 | $ 2,061,384 |
| Depreciation | 40,239 | - | - | 40,239 |
| Total expenses | $ 1,758,666 | $ 342,952 | $ 5 | $ 2,101,623 |

The accompanying notes to financial statements are an integral part of this statement.

**SKYLINE COMMUNITY ACTION PARTNERSHIP, INC.**

## Statement of Cash Flows
## Year Ended June 30, 2018

| | | |
|---|---|---|
| Cash flows from operating activities: | | |
| Change in net assets | $ | 79,186 |
| Adjustments to reconcile change in net assets to net cash provided by (used for) operating activities: | | |
| Depreciation | | 40,239 |
| (Increase) decrease in grants receivable | | (29,350) |
| (Increase) decrease in prepaid expenses | | (1,166) |
| (Increase) decrease in other receivables | | 1,357 |
| Increase (decrease) in accounts payable | | (6,368) |
| Increase (decrease) in accrued expenses | | 1,146 |
| Increase (decrease) in compensated absences | | (1,083) |
| Net cash provided by (used for) operating activities | $ | 83,961 |
| Cash flows from investing activities: | | |
| Purchase of property and equipment | $ | (13,896) |
| Net cash provided by (used for) investing activities | $ | (13,896) |
| Increase (decrease) in cash and cash equivalents | $ | 70,065 |
| Cash and cash equivalents, beginning of year | | 692,098 |
| Cash and cash equivalents, end of year | $ | 762,163 |
| Supplemental Disclosure: | | |
| Interest paid | $ | 68 |

The accompanying notes to financial statements are an integral part of this statement.

## NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

A. Description and Purpose of Agency

Skyline Community Action Partnership, Inc. ("the Organization") is the designated community action agency for the counties of Greene, Madison, and Orange, providing a range of programs and services, including Head Start, designed to ameliorate poverty and increase self-sufficiency of low income residents. In addition, the Organization operates a Head Start program in the counties of Rappahannock, Page, Warren and Shenandoah. The Organization has been determined to be a voluntary health and welfare organization and is therefore covered by the AICPA Industry Audit Guide, *Audits of Voluntary Health and Welfare Organizations*.

B. Financial Statement Presentations / Basis of Accounting

The Organization is funded by federal, state, and local funds. Its accounting policies are governed by applicable provisions of these grants and applicable pronouncements and publications of the grantors. The Organization utilizes the accrual basis of accounting where expenses are recognized in the accounting period in which the related liability is incurred and revenues from the various grantors are recognized as income when earned.

The Organization is required to report information regarding its financial position and activities according to three classes of net assets based on the existence or absence of donor-imposed restrictions:

Unrestricted net assets: Net assets that are not subject to donor-imposed stipulations. At June 30, 2018, the Organization had $1,236,137 of unrestricted net assets.

Temporarily restricted net assets: Net assets subject to donor-imposed stipulations that may or will be met, either by actions of the Organization and/or the passage of time. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. At June 30, 2018, the Organization had $361,466 of temporarily restricted net assets.

Permanently restricted net assets: Net assets subject to donor-imposed or other legal restrictions requiring that all principal be maintained permanently by the Organization. Generally, the donors of these assets permit the Organization to use all or part of the income earned for either general or donor-specific purposes. At June 30, 2018, the Organization had no permanently restricted net assets.

C. Property and Equipment

Office equipment and vehicles with a cost of $2,500 or greater are recorded at cost and depreciation is calculated on the straight-line basis over the estimated useful life of 5 years. Modular buildings and office space improvements are depreciated over a ten year life and a seven year life respectively. Depreciation expense for the year ended June 30, 2018 was $40,239.

D. Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

## NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES: (continued)

E. Concentrations of Credit Risk

The Organization maintains cash balances at four financial institutions. Accounts at these institutions are insured by the Federal Deposit Insurance Corporation up to $250,000. At June 30, 2018 the Organization had a $149,757 uninsured cash balance.

F. Income Taxes

Skyline Community Action Partnership, Inc. is exempt from federal income taxes under Section 501(c) (3) of the Internal Revenue Code.

G. Cash and Cash Equivalents

For purposes of the statement of cash flows, the Organization considers all cash on hand, cash in banks and money market funds to be cash and cash equivalents.

## NOTE 2 - TEMPORARILY RESTRICTED NET ASSETS:

Temporarily restricted net assets are derived from the following sources:

| Program | | Temporarily Restricted |
|---|---|---|
| Head Start | $ | 36,995 |
| Madison County | | 16,138 |
| Greene County | | 18,436 |
| Orange County | | 3,237 |
| Page County | | 3,144 |
| HOME | | 17,448 |
| Home - Program Income | | 170,601 |
| Grant - Dental Care | | 3,842 |
| Project Discovery | | 11,370 |
| Dominion VA Energy Share | | 5,743 |
| Blue Bell Foundation | | 8,450 |
| VHDA Reach | | 247 |
| Charlottesville Area Community Foundation | | 5,079 |
| American Woodwork Foundation, Inc. | | 1,000 |
| Skyline Apartments | | 59,736 |
| Total | $ | 361,466 |

## NOTE 3 - OPERATING LEASE COMMITMENTS:

The Organization leases office space and other facilities from various lessors. The lease terms are generally for one year with provisions for additional one year renewals. Rent expense for the year ended June 30, 2018 was $44,532.

## NOTE 4 - COMPENSATED ABSENCES:

The Organization's employees earn leave based on length of service. No benefits or pay is received for unused sick leave upon termination by employees. The Organization accrued a total amount of $32,577 annual leave at June 30, 2018.

## NOTE 5 - PROPERTY AND EQUIPMENT:

Property and equipment, at cost, and accumulated depreciation at June 30, 2018 are as follows:

| | | |
|---|---|---|
| Land | $ | 304,981 |
| Office equipment | | 126,220 |
| Modular buildings | | 237,772 |
| Other buildings | | 627,933 |
| Classroom improvements | | 5,334 |
| Playground equipment | | 103,771 |
| Health equipment | | 18,266 |
| Total | $ | 1,424,277 |
| Less accumulated depreciation | | (608,390) |
| Net total | $ | 815,887 |

## NOTE 6 - CONCENTRATION RISK OF RECEIVABLE:

The Organization receives its revenue primarily from federal and state agencies. Therefore, it has a relatively low level of concentration risk of uncollected receivables.

## NOTE 7 - RETIREMENT PLAN:

The Organization has a defined contribution retirement plan under Section 403(b) of the Internal Revenue Code. Employees who work twenty or more hours per week are eligible to participate beginning the first of the month following completion of their 90 day introductory period. Participants can make tax deferred voluntary contributions to the plan subject to limits of the law. The employer must make contributions to the plan allocated to each active participant based on a fixed percentage of the participant's contribution per payroll period to the plan. Total employer contributions amounted to $18,881 for the year ended June 30, 2018. Total covered payroll for the retirement plan was $519,034 and the total payroll for the Organization was $1,152,891 for the year ended June 30, 2018.

## NOTE 8 - CONTINGENT LIABILITIES:

Federal programs in which the Organization participates were audited in accordance with the provisions of the *Uniform Guidance*. Pursuant to the provisions of this circular all major programs and certain other programs were tested for compliance with applicable grant requirements. While no matters of noncompliance were disclosed by audit, the federal government may subject grant programs to additional compliance tests which may result in disallowed expenditures. In the opinion of management, any future disallowances of current grant program expenditures, if any, would be immaterial.

## NOTE 9 – DATE OF MANAGEMENTS REVIEW:

Management has evaluated events and transactions for potential recognition or disclosure through March 27, 2019, the date on which the financial statements were available to be issued. There were no subsequent events to be disclosed.

**- Compliance -**

## Independent Auditors' Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*

**To the Board Members**
**Skyline Community Action Partnership, Inc.**
**Madison, Virginia**

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Skyline Community Action Partnership, Inc. (a nonprofit organization), which comprise the statement of financial position as of June 30, 2018, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated March 27, 2019.

### Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered Skyline Community Action Partnership, Inc.'s internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Skyline Community Action Partnership, Inc.'s internal control. Accordingly, we do not express an opinion on the effectiveness of Skyline Community Action Partnership, Inc.'s internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

### Compliance and Other Matters

As part of obtaining reasonable assurance about whether Skyline Community Action Partnership, Inc.'s financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

**Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Robinson, Farmer, Cox Associates

Charlottesville, Virginia
March 27, 2019

## Independent Auditors' Report on Compliance For Each Major Program and on Internal Control over Compliance Required by the Uniform Guidance

**To the Board Members**
**Skyline Community Action Partnership, Inc.**
**Madison, Virginia**

### Report on Compliance for Each Major Federal Program

We have audited Skyline Community Action Partnership, Inc.'s (a nonprofit organization) compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of Skyline Community Action Partnership, Inc.'s major federal programs for the year ended June 30, 2018. Skyline Community Action Partnership, Inc.'s major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

*Management's Responsibility*

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

*Auditors' Responsibility*

Our responsibility is to express an opinion on compliance for each of Skyline Community Action Partnership, Inc.'s major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards,* issued by the Comptroller General of the United States; and the audit requirements of *Title 2 U.S. Code of Federal Regulations* Part 200*, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance).* Those standards and the *Uniform Guidance* require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about Skyline Community Action Partnership, Inc.'s compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of Skyline Community Action Partnership, Inc.'s compliance.

*Opinion on Each Major Federal Program*

In our opinion, Skyline Community Action Partnership, Inc. complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2018.

**Report on Internal Control over Compliance**

Management of Skyline Community Action Partnership, Inc. is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered Skyline Community Action Partnership, Inc.'s internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of Skyline Community Action Partnership, Inc.'s internal control over compliance.

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Robinson, Farmer, Cox Associates

Charlottesville, Virginia
March 27, 2019

**SKYLINE COMMUNITY ACTION PARTNERSHIP, INC.**

**Schedule of Expenditures of Federal Awards**
**Year Ended June 30, 2018**

| Federal Grantor / Pass-through Grantor / Program or Cluster Title | Federal CFDA Number | Pass-through Entity Identifying Number | Federal Expenditures |
|---|---|---|---|
| Department of Agriculture: | | | |
| Direct Payments: | | | |
| Child and Adult Care Food Program | 10.558 | Not Applicable | $ 131,788 |
| Department of Health and Human Services: | | | |
| Direct Payments: | | | |
| Head Start | 93.600 | Not Applicable | $ 1,400,816 |
| Pass-through Payments: | | | |
| Virginia Department of Social Services: | | | |
| Community Services Block Grant | 93.569 | CVS-09-066-25 | 99,511 |
| Temporary Assistance for Needy Families | 93.558 | CVS-09-066-25 | 63,750 |
| Total Department of Health and Human Services | | | $ 1,564,077 |
| Department of Housing and Urban Development: | | | |
| Direct Payments: | | | |
| Housing Counseling Assistance Program | 14.169 | Not Applicable | $ 74,076 |
| Pass-through Payments: | | | |
| Thomas Jefferson Planning District Commission: | | | |
| HOME Investment Partnerships Program | 14.239 | Not Available | 197 |
| Total Department of Housing and Urban Development | | | $ 74,273 |
| Total Expenditures of Federal Awards | | | $ 1,770,138 |

See accompanying notes to schedule of expenditures of federal awards.

## Notes to Schedule of Expenditures of Federal Awards
## Year Ended June 30, 2018

Note 1 - Basis of Presentation

The accompanying schedule of expenditures of federal awards (the Schedule) includes the federal award activity of Skyline Community Action Partnership, Inc. under programs of the federal government for the year ended June 30, 2018. The information in this Schedule is presented in accordance with the requirements of the Uniform Guidance. Because the Schedule presents only a selected portion of the operations of Skyline Community Action Partnership, Inc., it is not intended to and does not present the financial position, changes in net assets, or cash flows of Skyline Community Action Partnership, Inc.

Note 2 - Summary of Significant Accounting Policies

(1) Expenditures on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

(2) Pass-through entity identifying numbers are presented where available.

Note 3 - De Minimis Cost Rate

The Organization did not elect to use the 10-percent de minimis indirect cost rate allowed under the Uniform Guidance.

**SKYLINE COMMUNITY ACTION PARTNERSHIP, INC.**

**Schedule of Findings and Questioned Costs**
**Year Ended June 30, 2018**

## Section I - Summary of Auditors' Results

*Financial Statements*

| | |
|---|---|
| Type of auditors' report issued: | Unmodified |
| Internal control over financial reporting: | |
| Material weakness(es) identified? | No |
| Significant deficiency(ies) identified? | None reported |
| Noncompliance material to financial statements noted? | No |

*Federal Awards*

| | |
|---|---|
| Internal control over major programs: | |
| Material weakness(es) identified? | No |
| Significant deficiency(ies) identified? | None reported |
| Type of auditors' report issued on compliance for major programs: | Unmodified |
| Any audit findings disclosed that are required to be reported in accordance with 2 CFR Section 200.516 (a)? | No |

Identification of major programs:

| CFDA # | Name of Federal Program or Cluster |
|---|---|
| 93.600 | Head Start |

| | |
|---|---|
| Dollar threshold used to distinguish between Type A and Type B programs | $750,000 |
| Auditee qualified as low-risk auditee? | Yes |

## Section II - Financial Statement Findings

None

## Section III - Federal Award Findings and Questioned Costs

None

**SKYLINE COMMUNITY ACTION PARTNERSHIP, INC.**

## Summary Schedule of Prior Audit Findings
## Year Ended June 30, 2018

There were no findings in the prior year.

IRS Department of the Treasury
Internal Revenue Service
P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248459781
Apr. 18, 2011 LTR 4168C E0
54-1570712 000000 00
00018470
BODC: TE

Rcvd
4/26/11
IC/2

SKYLINE CAP INC
PO BOX 588
MADISON VA 22727-0588

056877

Employer Identification Number: 54-1570712
Person to Contact: MS. WINKLER
Toll Free Telephone Number: 1-877-829-5500

Dear TAXPAYER:

This is in response to your Apr. 08, 2011, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in MAY 1991.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

0248459781
Apr. 18, 2011 LTR 4168C E0
54-1570712 000000 00
00018471

SKYLINE CAP INC
PO BOX 588
MADISON VA 22727-0588

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

S. A. Martin, Operations Manager
Accounts Management Operations

# Date of Fiscal Year End

June 30

# Skyline CAP, Inc.
# Proposed Revenues and Expenses for FY21

| | | |
|---|---|---|
| **Revenue** | | |
| Madison County | $ | 54,622 |
| Head Start | $ | 288,106 |
| TANF (Head Start) | $ | 20,000 |
| Madison DSS for Project Discovery | $ | 3,282 |
| Project Discovery of Virginia | $ | 11,000 |
| Healthy Families | $ | 52,500 |
| VHDA | $ | 23,724 |
| Community Services Block Grant | $ | 28,755 |
| **Total Revenue** | **$** | **481,989** |
| **Expenses** | | |
| **Salary / Benefits** | | |
| Housing / Foreclosure Prevention Counselor | | |
| Salary | $ | 36,587 |
| Fringe Benefits | $ | 10,860 |
| Head Start | | |
| Salary | $ | 178,460 |
| Fringe Benefits | $ | 52,980 |
| Other Direct Costs | $ | 55,070 |
| Healthy Families | | |
| Salary | $ | 20,240 |
| Fringe Benefits | $ | 5,880 |
| Other Direct Costs | $ | 26,380 |
| **Direct Client Services** | | |
| Emergency Home Repair - Seniors and disabled | $ | 17,250 |
| Project Discovery of Virginia | $ | 14,282 |
| **Other** | | |
| Office operations to include utilities, maintenance, and association membership | $ | 64,000 |
| **Total Expenses** | **$** | **481,989** |

# Skyline CAP, Inc.
# YTD Budgeted Revenues and Expenses for FY20

| | | |
|---|---|---|
| **Revenue** | | |
| Madison County | $ | 23,793 |
| Head Start | $ | 103,027 |
| Healthy Families | $ | 29,589 |
| Project Discovery of Virginia | $ | - |
| VHDA | $ | 11,127 |
| Community Services Block Grant | $ | 77,466 |
| **Total Revenue** | **$** | **245,001** |
| **Expenses** | | |
| **Salary / Benefits** | | |
| Housing / Foreclosure Prevention Counselor | | |
| Salary | $ | 17,160 |
| Fringe Benefits | $ | 5,095 |
| Head Start | | |
| Salary | $ | 87,085 |
| Fringe Benefits | $ | 25,856 |
| Other Direct Cost | $ | 28,425 |
| **Direct Client Services** | | |
| Emergency Home Repair - Seniors and disabled | $ | 4,140 |
| Healthy Families | $ | 29,589 |
| Project Discovery | $ | 6,188 |
| **Other** | | |
| Office operations to include utilities, maintenance, and association membership | $ | 41,465 |
| **Total Expenses** | **$** | **245,001** |

# Skyline CAP, Inc.
# Actual Revenues and expenses for FY19

| | | |
|---|---|---|
| **Revenue** | | |
| Madison County | $ | 47,585 |
| Head Start | $ | 262,014 |
| Madison DSS for Project Discovery | $ | 3,282 |
| Project Discovery of Virginia | $ | 22,000 |
| Community Services Block Grant (CSBG) | $ | 16,533 |
| **Total Revenue** | **$** | **351,414** |
| **Expenses** | | |
| **Salary / Benefits** | | |
| Housing / Foreclosure Prevention Counselor | | |
| Salary | $ | 22,920 |
| Fringe Benefits | $ | 6,656 |
| Head Start | | |
| Salary | $ | 174,189 |
| Fringe Benefits | $ | 50,580 |
| Other Direct Costs | $ | 56,830 |
| **Direct Client Services** | | |
| Emergency Home Repair - Seniors and disabled | $ | 9,244 |
| Mortgage Default assistance | $ | 588 |
| Project Discovery | $ | 22,890 |
| **Other** | | |
| Office operations to include utilities, maintenance, and association membership | $ | 7,517 |
| **Total Expenses** | **$** | **351,414** |

| | | |
|---|---|---|
| **Funding from other localities:** | | |
| Orange County | $ | 2,000.00 |
| Page County | $ | 23,000.00 |
| Greene County | $ | 42,367.00 |
| | $ | 67,367.00 |

Be River Friendly
It's Your Backyard
The Rappahannock River Basin Commission

**MEMO**

To: Mary Jane Costello, Director of Finance, Madison County
From: Eldon James, Commission Staff
Date: December 30, 2019
Re: FY 2021 Funding Request

Attached please find the Rappahannock River Basin Commission's Funding Request and Supplemental Information that Madison County requires from outside agencies.

As a founding member of the Rappahannock River Basin Commission, Madison County has contributed to the shared funding support of the Commission since its inception in FY 1999. The County's $1,000 annual contribution has remained constant since that time – 22 budget cycles with NO requested increase.

The Commission continues to be a forum for the discussion of water resources issues important to Madison County. The Commission brings together 14 of the basin's counties, the city of Fredericksburg, members of the General Assembly and key regional, state and federal agencies to engage in policy and implementation discussions that are not offered elsewhere.

Over the last 24 years (including the 2-year Study Commission that predated the current Commission) the RRBC has provided critical input to the members (local and state) on water supply planning and water quality. Some of the accomplishments include:

- The multi-year, three-phase Healthy Watershed Forest project, carried out in partnership with the Virginia Department of Forestry, has successfully convinced the Bay Program to modify the Bay model to recognize and give credit for conservation of existing forest land. Phase II documented a variety of local policies that can be used to incentivize private forest conservation. The current Phase III is piloting local policy assessment, producing a "how-to" report and developing a model for incentivizing long-term private sector funding mechanisms.
- Eight River Basin Summits each leading to recommendations for state policy changes and initiatives including:
    - Establishment of agricultural education programs for real estate agents and developers;
    - Citizen water quality testing programs in key tributaries;
    - Nutrient management training for golf course managers;
- Regularly advocate for adequate and consistent funding for non-point source programs;
- The first public body to recommend guiding principles for regional water supply planning;

- Advocate for flexibility in Virginia's Ches-Bay Watershed Implementation Plan to encourage innovation and resource allocation decisions based on environmental efficiency (the most pounds of nutrient and sediment removed per dollar spent);
- Submitted real-world recommendations to the DEQ Nutrient Credit Trading Program Expansion Study;
- Advocated for critical changes to stormwater management legislation in the 2014 General Assembly;
- Advocate with the Department of Health for appropriate AOSS regulations.

As we go forward into FY 2021 the Commission will actively advocate for sensible and cost-effective approaches to the Ches-Bay clean up program. The principles of environmental efficiency in resource allocation decisions, public policies that promote innovation and creativity and encouragement of private market transactions that achieve the public goals of reduced nutrient and sediment pollution of the Rappahannock and its tributaries.

Thank you for your continued support. We hope that you will find the attached information helpful and are prepared to provide additional information if you have the need.

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE:** January 13, 2020

| IDENTIFICATION | |
|---|---|
| *Organization/Agency Name:* | Rappahannock River Basin Commission |
| *Street Name:* | 406 Princess Anne Street<br>Fredericksburg, VA 22401 |
| *Mailing Address:* | Same |
| *Agency Contact:* | Eldon James |
| *Telephone Number:* | 540-907-2008 |
| *E-mail Address – Agency Contact* | Ejames7@me.com |
| *Agency's Web Address:* | www.RappRiverBasin.org |
| *Federal Tax ID#:* | 54-0715969 |
| *Audit:* | **X** Yes ☐ No |

**PURPOSE/NARRATIVE**

*Missions and Goals:*

The Mission and Purpose of the Commission is spelled out in Section 62.1-69.27 of the Code of Virginia:

"The Commission's purposes and mission shall be to provide guidance for the stewardship and enhancement of the water quality and natural resources of the Rappahannock River Basin. The Commission shall be a forum in which local governments and citizens can discuss issues affecting the Basin's water quality and quantity and other natural resources. Through promoting communication, coordination and education, and by suggesting appropriate solutions to identified problems, the Commission shall promote activities by local, state and

| |
|---|
| federal governments, and by individuals, that foster resource stewardship for the environmental and economic health of the Basin." |
| *Experience and Accomplishments:*<br>The RRBC operates under the authority provided in the Code of Virginia § 62.1-69.25 through § 62.1- 69.33:2<br>The RRBC and its staff maintain an annual work program that supports the Goals and Objectives of the Commission. The Board meets quarterly and reviews the activities undertaken by the staff and the Technical Committee during the previous period to carry out the work program. A written work plan report is prepared by the staff and distributed to Commission members in advance of the meeting. |
| *Benefits of Funding:*<br>**Clientele and Service Area** – The activities of the RRBC have the potential to impact all people within the river basin. According to GWRC the estimated population of the river basin in 2000 was 255,558 persons. That increased to 317,305 by 2010 and 336,825 by 2015. |
| *Intention of Use:*<br><br>Support for the ongoing activities of the Commission and its Technical Committee. |

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>☐ *Human Services*<br>☐ *Education*<br>*X Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 1,000.00 |

Signature: _____ Title: Coordoinator

Printed Name: Eldon James Date: December 30, 2019

**Rappahannock River Basin Commission**
**FY 2021 Budget Request to Madison County, Virginia**

| | |
|---|---|
| Organization: | Rappahannock River Basin Commission |

| | |
|---|---|
| Primary Contact: | Eldon James |
| Telephone: | 540-907-2008 |
| Address: | 406 Princess Anne Street<br>Fredericksburg, VA 22401 |
| Email Address: | Ejames7@me.com |

**Financial History**

| Fiscal Year | Total Budget | County Funding |
|---|---|---|
| 2014 | 35,100 | 1,000.00 |
| 2015 | 35,500 | 1,000.00 |
| 2016 | 43,500 | 1,000.00 |
| 2017 | 35,500 | 1,000.00 |
| 2018 | 50,000 | 1,000.00 |
| 2019 | 166,100 | 1,000.00 |
| 2020 | 100,000 | 1,000.00 |

**Non-County sources of funding:**
Annually we receive non-county funding from: the Commonwealth of Virginia (direct appropriation), Virginia VDOF (MOU) and each of the 14 other member localities.

**FY 2021 Request**

| | |
|---|---|
| Madison County Funding: | 1,000.00 |
| Total Budget: | 40,000.00 |
| Other Funding Sources (specify): | |
| • Commonwealth of Va. | 15,000.00 |
| • Virginia DOF | 10,000.00 |
| • Other member localities | 14,000.00 |

As a founding member of the Rappahannock River Basin Commission, Madison County has contributed to the shared funding support of the Commission since its inception in FY 1999. The County's $1,000 annual contribution has remained constant since that time, this will be the 22nd budget cycle with NO requested increase.

**Rappahannock River Basin Commission**
**FY 2021 Budget Request to Madison County, Virginia**

**RRBC mission:**

The Rappahannock River Basin Commission was created jointly by the General Assembly of Virginia and the Counties and the City of the basin. Madison County passed a resolution in 1998 to express its support for and participation in the Commission. The Mission and Purpose of the Commission is spelled out in Section 62.1-69.27 of the Code of Virginia:

"The Commission's purposes and mission shall be to provide guidance for the stewardship and enhancement of the water quality and natural resources of the Rappahannock River Basin. The Commission shall be a forum in which local governments and citizens can discuss issues affecting the Basin's water quality and quantity and other natural resources. Through promoting communication, coordination and education, and by suggesting appropriate solutions to identified problems, the Commission shall promote activities by local, state and federal governments, and by individuals, that foster resource stewardship for the environmental and economic health of the Basin."

The RRBC operates under the authority provided in the Code of Virginia § 62.1-69.25 through § 62.1- 69.33:2

The RRBC and its staff maintain an annual work program that supports the Goals and Objectives of the Commission. The Board meets quarterly and reviews the activities undertaken by the staff and the Technical Committee during the previous period to carry out the work program. A written work plan report is prepared by the staff and distributed to Commission members in advance of the meeting.

**Clientele and Service Area** – The activities of the RRBC have the potential to impact all people within the river basin. According to GWRC the estimated population of the river basin in 2000 was 255,558 persons. That increased to 317,305 by 2010 and 336,825 by 2015.

**Sub-Basin Geography: All or Portions of -**
**Upper:** Counties of Albemarle, Culpeper, Fauquier, Greene, Madison, Orange & Rappahannock
**Middle:** Counties of Caroline, King George, Spotsylvania, and Stafford & City of Fredericksburg
**Lower:** Counties of Essex, Lancaster, Middlesex, Richmond and Westmoreland
Underlined localities are participating members of the Commission
**Estimates provided to the Commission by GWRC in March 2011:**
**2010 Population for Basin:**
**Est. Watershed Population = 317,305**
**Upper: 119,193 (37.6 %)**
**Middle: 160,315 (50.5 %)**
**Lower: 37,797 (11.9%)**

**Rappahannock River Basin Commission**
**FY 2021 Budget Request to Madison County, Virginia**

**Estimates provided to the RRBC in October 2016:**
**2015 Ext. Watershed Population for the Basin –**
**Upper: 124,335 (36.9%)**
**Middle: 174,059 (50.5%)**
**Lower: 37,318 (11.4%)**

**Proposed Annual Budget (FY 2021)**

Annual Line Item Budget

| | | CASH | In Kind |
|---|---|---|---|
| I. | Staff (professional & technical) (meetings - $13,400 ; communications & committees - $10,800; Outreach - $4,000) | 28,200 | |
| II. | Printing, Postage, Office & Meeting Supplies, Conference Calls | 1,000 | |
| III. | Healthy Watershed Forest Phase 3 (Contractor & Staff) | 10,000 | |
| IV. | Travel (members & staff) & Per Diem (General Assembly members) | 800 | |
| V. | Office and meeting space, furniture & equipment (including telecommunications) (in kind space from PDC) | | 2,000 |
| VI. | Outside support (from localities, PDCs, SWCDs, etc. in kind services for technical support) | | 14,100 |
| | Sub Totals | $ 40,000 | $ 16,100 |
| | Total | $ 56,100 | |

Funding Sources:

| | |
|---|---|
| In Kind, PDC's, SWCD's | 16,100 |
| Local Cash | 15,000 |
| VDOF Grants | 10,000 |
| Commonwealth of Virginia | 15,000 |
| Total | $ 56,100 |

**Rappahannock River Basin Commission**
**FY 2021 Budget Request to Madison County, Virginia**

As required by State Code, the **audit** is conducted by the Auditor of Public Accounts – the most recent APA letter has been provided as a separate attachment to this application

The RRBC is an agency of the Commonwealth and the local governments of the basin and therefore a **501(c)(3) letter and IRS990 are not applicable**.

**Federal Tax ID#:** PD16/George Washington Regional Commission serves as fiscal agents (54-0715969)

**Rappahannock River Basin Commission (2019)**

**General Assembly Members:**

**Senate of Virginia**

Emmett W. Hanger, Jr.
Post Office Box 2
Mt. Solon, Virginia 22843

Ryan McDougle
Post Office Box 187
Mechanicsville, VA 23111

Mark D. Obenshain
Post Office Box 555
Harrisonburg, Virginia 22803

Bryce E. Reeves
10151 South Point Parkway
Fredericksburg, Virginia 22407

Richard H. Stuart
P.O. Box 1146
Montross, VA 22520

Jill Holtzman Vogel
117 East Picadilly St, Suite 100-B
Winchester, Virginia 22601

**House of Delegates**

Robert B. Bell
2 Boar's Head Place, Suite 1100
Charlottesville, Virginia 22903

Mark L. Cole
Post Office Box 6046
Fredericksburg, Virginia 22403

M. Keith Hodges (Chair)
P. O. Box 928
Urbanna, Virginia 23175

Robert M. "Bob" Thomas
Post Office Box 9142
Fredericksburg, Virginia 22403

Elizabeth R. Guzman
P. O. box 181
Woodbridge, Virginia 22193

Robert D. Orrock, Sr.
Post Office Box 458
Thornburg, Virginia 22564

Margaret Bevans Ransone
P. O. Box 358
Kinsale, Virginia 22488

Nicolas J. Fretas
P. O. Box 693
Culpeper, Virginia 22701

Michael J. Webert
P. O. Box 631
Marshall, Virginia 20116

**Rappahannock River Basin Commission**
**FY 2021 Budget Request to Madison County, Virginia**

**Local Government Representatives**

| Member | Alternate (Localities may choose to appoint an alternate) |
|---|---|
| Jeff Black<br>Caroline County Board of Supervisors<br>208 Woodside Lane<br>Ruther Glen, Virginia 22546 | None |
| Brad C. Rosenberger<br>Culpeper County Board of Supervisors<br>302 N. Main St.<br>Culpeper, Virginia 22701 | Sue Hansohn<br>Culpeper County Board of Supervisors<br>302 N. Main St.<br>Culpeper, Virginia 22701 |
| Margaret H. Davis<br>Essex County Board of Supervisors<br>Post Office Box 129<br>Center Cross, Virginia 22437 | None |
| Chris Butler<br>Fauquier County Board of Supervisors<br>10 Hotel Street<br>Warrenton, Virginia 20186 | None |
| William C. Withers, Jr.<br>Fredericksburg City Council<br>1103 Kenmore Ave.<br>Fredericksburg, Virginia 22401 | None |
| Richard Granger<br>King George County Board of Supervisors<br>10459 Courthouse Drive, Suite 200<br>King George, Virginia 22485 | None |
| Jason Bellows<br>Lancaster County Board of Supervisors<br>8311 Mary Ball Road<br>Lancaster, VA 22503 | None |
| Jonathon Weakley<br>Madison County Board of Supervisors<br>760 Tryme Road<br>Reva, Virginia 22735 | Kevin McGhee<br>Madison County Board of Supervisors<br>P. O. Box 25<br>Oak Park, Virginia 22730 |

Pete Mansfield
Middlesex County Board of Supervisors
P. O. Box 40
Locust Hill, Virginia 23092

None

James K. (Jim) White (Vice-Chair)
Orange County Board of Supervisors
22373 Berry Run road
Orange, Virginia 22960

None

I. Christopher Parrish
Rappahannock County Board of Supervisors
c/o General Delivery
P. O. Box 1
Viewtown, Virginia 22746

John Lesinski
Rappahannock County Board of Supervisors
210 Grand View Road
Washington, Virginia 22747

Bobby Pemberton
Richmond County Board of Supervisors
P. O. Box 97
Sharps, Virginia 22548

Richard Thomas
Richmond County Board of Supervisors
678 Sharps Road
Warsaw, Virginia 22572

Kevin Marshall
Spotsylvania County Board of Supervisors
Post Office Box 99
Spotsylvania, Virginia 22553

Greg Benton
Spotsylvania County Board of Supervisors
Post Office Box 99
Spotsylvania, Virginia 22553

Tom Coen
Stafford County Board of Supervisors
P. O. Box 339
Stafford, Virginia 22555

Cindy Shelton
Stafford County Board of Supervisors
P. O. Box 339
Stafford, Virginia 22555

W. W. Hynson
Westmoreland County Board of Supervisors
3895 James Monroe Highway
Colonial Beach, Virginia 22443

Dorthy Dickerson Tate
Westmoreland County Board of Supervisors
10400 Kings Highway
Montross, Virginia 22520

**Soil & Water Conservation District Representatives**

| Member | Alternate |
|---|---|
| Thomas O' Halloran<br>Culpeper SWCD<br>P. O. Box 503<br>Rixeyville, Virginia 22737 | Joseph H. Stepp, III<br>Hanover-Caroline SWCD<br>2565 Buckner Road<br>Rappahannock Academy, Virginia 22538 |

COMMONWEALTH of VIRGINIA

*Auditor of Public Accounts*

Martha S. Mavredes, CPA
Auditor of Public Accounts

P.O. Box 1295
Richmond, Virginia 23218

March 15, 2019

Eldon James
Coordinator
Rappahannock River Basin Commission
406 Princess Anne Street
Fredericksburg, VA 22401

Dear Mr. James:

We have reviewed the Rappahannock River Basin Commission's (RRBC) financial information and the George Washington Regional Commission's (GWRC) audit report relating to fiscal year 2018. We have determined that the audit performed by Dunham, Aukamp & Rhodes, PLC for fiscal year 2018 satisfies our statutory requirement to audit the Rappahannock River Basin Commission under Section 62.1-69.33 of the Code of Virginia.

If anyone inquires about your audit status, please have them contact us.

Sincerely,

Martha S. Mavredes
Auditor of Public Accounts

AVC/clj

COMMONWEALTH of VIRGINIA

Auditor of Public Accounts

Martha S. Mavredes, CPA
Auditor of Public Accounts

P.O. Box 1295
Richmond, Virginia 23218

March 15, 2019

Eldon James
Coordinator
Rappahannock River Basin Commission
406 Princess Anne Street
Fredericksburg, VA 22401

Dear Mr. James:

We have reviewed the Rappahannock River Basin Commission's (RRBC) financial information and the George Washington Regional Commission's (GWRC) audit report relating to fiscal year 2018. We have determined that the audit performed by Dunham, Aukamp & Rhodes, PLC for fiscal year 2018 satisfies our statutory requirement to audit the Rappahannock River Basin Commission under Section 62.1-69.33 of the Code of Virginia.

If anyone inquires about your audit status, please have them contact us.

Sincerely,

Martha S. Mavredes
Auditor of Public Accounts

AVC/clj

# Culpeper Soil & Water Conservation District

*Serving Culpeper, Greene, Madison, Orange, & Rappahannock*

*351 Lakeside Drive*
*Culpeper, Va. 22701*
*(540) 825-8591 Culp*
*(540) 645-6624 fax*
*(540) 672-1638 Orange*
*(540) 672-2455 fax*
*(540) 948-7531 Madison*


January 9, 2020

MEMO

To: Mary Jane Costello, Madison County Finance Director

From: Greg Wichelns, District Manager CSWCD

Enclosed please find the Culpeper Soil and Water Conservation District's Budget Support Request for Fiscal Year 2020-2021. This year's request of Madison County is $43,357.

This year's request includes Madison County's share of a $7,500 increase applied to the total 5- county request. This is to support a full IT system update that will be required to remain up to date on operating system and base server requirements. One-half of the total cost is being requested from local government. This request is comprised of $30,970 general support funding according to the multi-county funding formula agreed upon and $12,387 in direct services to Orange County.

If you have any questions regarding this Budget Request, please contact me.

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE: January 13, 2020**

| IDENTIFICATION | |
|---|---|
| *Organization/Agency Name*: | **Culpeper Soil and Water Conservation District** |
| *Street Name:* | 351 Lakeside Drive<br>Culpeper, Virginia 22701 |
| *Mailing Address:* | Same as above |
| *Agency Contact:* | Greg Wichelns, District Manager |
| *Telephone Number:* | 540-825-8591 |
| *E-mail Address – Agency Contact* | gregw@culpeperswcd.org |
| *Agency's Web Address:* | www.culpeperswcd.org |
| *Federal Tax ID#:* | 54-0857782 |
| *Audit:* | **X** Yes ☐ No |

**PURPOSE/NARRATIVE**

*Missions and Goals:*

To promote the stewardship of soil and water and the conservation of our natural resources by educating and providing technical assistance to manage, protect, and enhance the land and water for the benefit and enjoyment of the citizens of Culpeper, Greene, Madison, Orange and Rappahannock Counties.

1) continue historic services as in recent years; ag bmp programming, TMDL grant project implementation (4), water quality septic project implementation, erosion/sediment control and stormwater services, education programming/workshops, flood control dam inspections and maintenance, other county services. 2) continue restoration/stream bank stabilization programming mostly utilizing grant source funding. 3) continue implementation efforts on

Robinson River TMDL project –new grant has been obtained (2 years). 4) continue TMDL implementation in the Rapidan River drainage. Another new grant has been obtained (2 years). 5) continue to expand educational support to K-12 including teacher accreditation. A 3 year new grant continues and includes Madison all 3 years and continuing. 6) participate in BAY TMDL planning and implementation efforts as mandated. 7. Continue to pursue recently accelerated ag BMP implementations.

*Experience and Accomplishments:*

The Conservation District has been in existence since 1939, providing citizens and local government of Madison and surrounding counties with technical guidance and planning services for land use and land management decisions. The District workload can be categorized as agricultural, urban/residential, direct county government services, educational, regional and state planning efforts (TMDL, River Basin, etc...) and dam maintenance and operation. We also actively pursue project grants to support specific accomplishments and supplement state and local operations funding. In 2019 the District directly administered $647,901 in direct ag conservation incentive programs, $81,044 in residential septic programs, $16,391 in ag tax credits and provided all technical planning to support these and those still underway but yet to be paid. We also assisted with delivery of USDA incentive programs on 700 acres in Madison. Eight dams located in Beautiful Run watershed were inspected and maintenance operations completed, much to the benefit of ag producers in the watershed. The District continues to work with the commonwealth agencies towards expansion of local water TMDL implementations. We have received two additional implementation grants in recent months both of significance to Madison County. Grazing management implementation is at an all-time high.

*Benefits of Funding:*

- conservation planning assistance and incentive payments/programs available to Madison county farmers
- conservation planning assistance for erosion/sediment control, drainage an stormwater for county government
- grant services and residential cost-share provided
- technical and educational workshops
- District functions as a good liaison between the state and county on many environmental topics
- neutral partner for grant projects
- direct technical assistance to residents on a wide variety of topics
- flood control
- assistance with BAY TMDL issues and responses
- direct technical assistance to County
- Culpeper SWCD recognized as a leader amongst SWCD's and this reflects well for our localities

*Intention of Use:*
Madison County funds will be utilized to support five of twelve staff positions with District; District Manager, Administrative Secretary, Education Specialist, Conservation Specialist and four farm Conservation Specialists. The funds will also support overhead expenses such as rent, equipment needs, office, IT, staff travel expenses (within District) and educational outreach. The ratio of Madison County to other sources for the support of these uses is approximately 1:20.

| **FUNDING** | |
|---|---|
| *Category of Funding* | X *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>☐ *Human Services*<br>X *Education*<br>X *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 43,357 |

Signature: Gregory Wichelns Title: District Manager

Printed Name: Gregory Wichelns Date: 1-9-2020

**CULPEPER SOIL & WATER CONSERVATION DISTRICT**
**TOTAL BASE FUNDING REQUEST FROM ALL COUNTIES 2020-2021**

**12/15/2019**

Total base funding requested from all counties for FY 2020-2021 $147,404.00

Population based funding (1/2 total =$73,702)
Personnel "time spent" based funding (1/2 total =$73,702)

POPULATION BASED FUNDING PER COUNTY
(Data from County Administration)

| County | Population | Percent of Total | Request |
|---|---|---|---|
| Culpeper | 50,272 | 40.2 | $29,628.00 |
| Madison | 13,122 | 10.5 | $ 7,739.00 |
| Rappahannock | 7,321 | 5.8 | $ 4,275.00 |
| Greene | 19,612 | 15.7 | $11,571.00 |
| Orange | 34,873 | 27.8 | $20,489.00 |
| | 125,200 | 100% | $73,702.00 |

PERSONNEL TIME BASED FUNDING PER COUNTY

Calculations based on time spent per county December 2018 through November 2019.
Total work hours all employees for time period = 17,472

| County | Hours spent | Percent of Total | Projected Request |
|---|---|---|---|
| Culpeper | 4,354 | 24.9 | $18,367.00 |
| Madison | 5,507 | 31.6 | $23,231.00 |
| Rappahannock | 1,995 | 11.4 | $ 8,417.00 |
| Greene | 2,152 | 12.3 | $ 9,080.00 |
| Orange | 3,464 | 19.8 | $14,607.00 |
| | 17,472 | 100% | $73,702.00 |

| TOTAL REQUEST / PER COUNTY | 2010-2011 | 2011-2012 | 2012-2013 | 2013-2014*** | 2014-2015*** | 2015-2016**** | 2016-2017 | 2017-2018***** | 2018-2019 | 2019-2020 |
|---|---|---|---|---|---|---|---|---|---|---|
| Culpeper | 59,078 | 57,489 | 47,546 | 55,099 | 61,495 | 57,005 | 66,111 | 77,451 | 73,458 | 69,257 |
| Madison | 29,284 | 36,429 | 33,944 | 34,397 | 38,791 | 40,035 | 34,587 | 34,587 | 29,321 | 29,321 |
| Rappahannock | 13,915 | 11,961 | 17,170 | 21,406 | 21,301 | 19,675 | 20,183 | 20,183 | 14,662 | 21,111 |
| Greene | 10,274 | 14,034 | 13,620 | 15,989 | 16,624 | 18,421 | 18,454 | 33,034 | 18,920 | 17,878 |
| Orange | 58,499 | 56,138 | 60,380 | 56,987 | 45,577 | 61,666 | 57,590 | 71,090 | 60,292 | 66,540 |
| | $171,051 ($117,412 base) | $176,051***** ($117,412 base) | $172,660 ($117,412 base) | $183,788 ($126,898 base) | $183,788 ($126,898 base) | $196,802 ($133,243 base) | $196,925 ($133,243 base) | $236,345 ($133,243 base) | $196,653 ($139,904 base) | $204,107 ($139,904 base) |

***Included increase in base support – rent requirements.
****Included 5% increase in base support.
*****Included one-time increase for workload "bubble" w/vehicles
(Culpeper, Orange, and Greene only)

Erosion and Sediment Control Site Plan and Stormwater Management Review
and associated services and activities

December 1, 2018 – November 30, 2019

Calculations based on percentage of total number of plans reviewed. Total employee cost with benefits and taxes is $66,685.

| | | | | | |
|---|---|---|---|---|---|
| Culpeper | 21 plan points | 24.1% | of plans | 67,351 X .24138 | = $16,257 |
| Orange | 36 plan points | 42.3% | of plans | 67,351 X .41379 | = $27,869 |
| Madison | 16 plan points | 18.4% | of plans | 67,351 X .18391 | = $12,387 |
| Rappahannock | 14 plan points | 16.7% | of plans | 67,351 X .16092 | = $10,838 |
| | | | | | $67,351 |

CULPEPER SOIL AND WATER CONSERVATION DISTRICT

# Madison County
# Return On Conservation $$

## 2018—2019

### $$ Invested by Madison:

## $29,321

**Acres Entered into Federal Conservation Programs FY18:**



**698.6 ac**

**$$ Returned in State BMP Ag Cost Share:**



**$647,901**

**$$ Returned in State BMP Tax Credits:**



**$16,391**

**$$ Returned in Federal BMP Septic Cost Share:**



**$57,381**

**$$ Returned for staff salary support from grants**:**



**$37,981**

**Landowner Investment in Cost Share Programs:**



**$129,580**

**$$ Returned in Kind*:**



**$6,396**

**Madison's Estimated Return:**



## $895,630

## Invest in the Future!

* Time spent for technical assistance to landowners outside of program delivery, estimated at $30 per hour

** District total: $189,908

## November 2019 Balance on Budgeted Accounts

| Local Cont.. Membr Ctys. | Amount Funded FY 19-20 | Actual Rec. to Date | Balance Due | Amount Actual 18-19 |
|---|---|---|---|---|
| ***Culpeper*** | 69,257 | 34,108 | 35,150 | 77,451 |
| ***Orange*** | 66,540 | 18,298 | 48,242 | 60,292 |
| ***Madison*** | 29,321 | | 29,321 | 29,321 |
| ***Greene*** | 17,878 | 9,200 | 8,679 | 22,449 |
| ***Rappahannock*** | 21,111 | 17,886 | 3,225 | 7,331 |
| **Total Local Funds** | 204,107 | 79,491 | 124,616 | 196,844 |
| ***State Operations*** | 178,025 | 89,012 | 89,013 | 178,025 |
| ***VNRCF T/A*** | 262,865 | 351,820 | -88,955 | 218,072 |
| **GRANTS T/A** | 102,397 | 63,859 | 38,538 | 207,929 |
| ***District Savings*** | 132,883 | | 132,883 | 0 |
| ***WaterShed Maint (State)*** | 33,000 | 177,878 | -144,878 | 193,417 |
| **Total Other Funds** | 709,170 | 682,568 | 26,602 | 797,443 |
| ***Total Funds Avail*** | *913,277* | *762,059* | *151,218* | *994,287* |

| Budgeted Item | Amount Budgeted 19-20 | Amt. Spent to Date | Balance to Date | Amount Actual 18-19 |
|---|---|---|---|---|
| Greg Wichelns ***District Manager*** | 99,123 | 42,129 | 56,994 | 103,023 |
| Joann Neal ***Administrative Sec.*** | 65,645 | 25,712 | 39,933 | 65,240 |
| Richard Jacobs ***Con. Spec.III Urban*** | 90,529 | 36,039 | 54,490 | 85,284 |
| Stephanie DeNicola ***Communication Spec.*** | 61,717 | 24,640 | 37,077 | 57,424 |
| D. Massie ***Conservation Spec.III*** | 87,950 | 37,295 | 50,655 | 82,675 |
| W. Spencer Yager ***Conservation Spec.III*** | 84,945 | 36,262 | 48,683 | 79,877 |
| Amanda McCullen **Conservation Spec. II** | 61,943 | 26,579 | 35,364 | 58,568 |
| H. Calloway **Conservation Spec. II** | 68,323 | 29,224 | 39,099 | 65,335 |
| James Henshaw ***District Rep.*** | 19,212 | 7,006 | 12,206 | 16,431 |
| John Jeffries **Technical Trainer** | 15,265 | 6,154 | 9,111 | 10,591 |
| Kendall Dellinger **Conservation Specialist** | 38,975 | 14,909 | 24,066 | 30,975 |
| Admin. Assist. PT | 21,000 | 0 | 21,000 | 0 |
| Admin. Assist. PT | | | | |
| Building Rent | 50,000 | 11,058 | 38,942 | 27,736 |
| Copier rent & supplies | 3,300 | 1,155 | 2,145 | 3,018 |
| Office Supples | 6,500 | 2,767 | 3,733 | 6,696 |

## November 2019 Balance on Budgeted Accounts

| Budgeted Item | Amount Budgeted 19-20 | Amt. Spent to Date | Balance to Date | Amount Actual 18-19 |
|---|---|---|---|---|
| Insurance/Fire/Theft | 350 | 350 | 0 | 350 |
| Insurance/Vehicle | 4,000 | 1,840 | 2,160 | 3,787 |
| IT | 25,000 | 7,540 | 17,460 | 15,161 |
| Postage | 2,500 | 530 | 1,970 | 3,694 |
| District Dues | 4,300 | 4,067 | 233 | 4,107 |
| Director Travel/lunch *9,000* | 12,000 | 3,743 | 8,257 | 11,223 |
| Staff travel/vehicle maintenance | 17,000 | 7,137 | 9,863 | 11,084 |
| Employee Develop-ment | 3,000 | 185 | 2,815 | 1,184 |
| Awards Program | 4,000 | 3,246 | 754 | 2,960 |
| Equipment | 2,500 | 125 | 2,375 | 2,083 |
| Accounting/Payroll Ser. | 1,500 | 0 | 1,500 | 750 |
| Miscellaneous | 1,000 | 41 | 959 | 481 |
| Sponsorships | 1,500 | 690 | 810 | 1,500 |
| District Scholarship | 4,000 | 0 | 4,000 | 5,000 |
| Educational Materials | 1,000 | 743 | 257 | 692 |
| Envirothon | 1,000 | 26 | 974 | 618 |
| Marketing/PR | 3,500 | 2,318 | 1,182 | 3,455 |
| Newsletter | 16,000 | 3,666 | 12,334 | 15,198 |
| YCC/ForestryCamp | 1,700 | 1,200 | 500 | 400 |
| Dams | 33,000 | 158,571 | -125,571 | 260,270 |
| **Totals** | **913,277** | **496,945** | **416,332** | **1,036,870** |

Proposed Budget Amendment 12-17-19

# Culpeper SWCD 2020 Operating Budget 7-2-19

| REVENUES | | | | | | | FY20 |
|---|---|---|---|---|---|---|---|
| *Local Government* | | | | | | | 204,107 |
| *State Operations* | | | | | | | 178,025 |
| *VNRCF T/A* | | | | | | 281,848 | ~~262,865~~ |
| *Grants TA* | | | | | | | 102,397 |
| *District Savings* | | | | | | | 132,883 |
| *Dams* | | | | | | | 33,000 |
| *Total Funds Available* | | | | | | 932,260 | ~~913,277~~ |
| **EXPENDITURES** | | | | | | | |
| | | | | | | | |
| **Personnel** Total Employee Costs | | | | | | | |
| Wichelns | | | | | | | 99,123 |
| Neal | | | | | | | 65,645 |
| Jacobs | | | | | | | 90,529 |
| DeNicola | | | | | | | 61,717 |
| Massie | | | | | | | 87,950 |
| Yager | | | | | | | 84,945 |
| McCullen | | | | | | | 61,943 |
| Calloway | | | | | | | 68,323 |
| Henshaw | | | | | | | 19,212 |
| Jeffries | | | | | | | 15,265 |
| Dellinger | | | | | | 57,958 | ~~38,975~~ |
| Admin. Assist. PT | | | | | | | 21,000 |
| ***Sub-Total*** | | | | | | 733,610 | ~~714,627~~ |
| | | | | | | | |
| **Operations** | | | | | | | |
| Building Rent | | | | | | | 50,000 |
| Copier rent | | | | | | | 3,300 |
| Office Supplies | | | | | | | 6,500 |
| Insurance/Fire/Theft | | | | | | | 350 |
| Insurance/Vehicle | | | | | | | 4,000 |
| IT | | | | | | | 25,000 |
| Postage | | | | | | | 2,500 |
| District Dues | | | | | | | 4,300 |
| Director Travel/lunch | | | | | | | 12,000 |
| Staff travel/vehicle Maint | | | | | | | 17,000 |
| Employee Develop. | | | | | | | 3,000 |
| Awards Program | | | | | | | 4,000 |
| Equipment | | | | | | | 2,500 |
| Accounting/Payroll Ser. | | | | | | | 1,500 |
| Miscellaneous | | | | | | | 1,000 |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Sponsorships | | | | | | | 1,500 |
| District Scholarship | | | | | | | 4,000 |
| Educational Materials | | | | | | | 1,000 |
| Envirothon | | | | | | 500 | ~~1,000~~ |
| Marketing/PR | | | | | | 4,000 | ~~3,500~~ |
| Newsletter | | | | | | | 16,000 |
| YCC/ForestryCamp | | | | | | | 1,700 |
| Dams | | | | | | | 33,000 |
| **Sub-Total** | | | | | | 198,650 | ~~198,650~~ |
| **Total Budgeted** | **0** | **0** | **0** | **0** | | 932,260 | ~~913,277~~ |
| **Total Available** | | | | | | 932,260 | ~~913,277~~ |
| **Balance** | | | | | | | **0** |

_____ Date _____

Signature

# Culpeper Soil & Water Conservation District

*Serving Culpeper, Greene, Madison, Orange, & Rappahannock*

*351 Lakeside Drive*
*Culpeper, Va. 22701*
*(540) 825-8591 Culp*
*(540) 825-8637 fax*
*(540) 672-1638 Orange*
*(540) 672-2455 fax*
*(540) 948-7531 Madison*


December 31, 2019

To Whom It May Concern:

The Culpeper Soil and Water Conservation District has Tax-Exempt Status.

The Conservation District's treatment as a tax-exempt entity derives from its status as a political subdivision of the Commonwealth of Virginia.

# CULPEPER SOIL AND WATER CONSERVATION DISTRICT

## STATEMENT OF CASH RECEIPTS AND DISBURSEMENTS WITH SUPPLEMENTARY SCHEDULE

YEAR ENDED JUNE 30, 2018
(With Independent Auditors' Report Thereon)

CULPEPER SOIL AND WATER CONSERVATION DISTRICT

Table of Contents


| | Page |
|---|---|
| Independent Auditors' Report | 1-2 |
| **Financial Statement:** | |
| Statement of Cash Receipts and Disbursements | 3 |
| Notes to Financial Statements | 4-5 |
| **Supplementary Information:** | |
| Schedule of Cash Disbursements | 6 |

# ROBINSON, FARMER, COX ASSOCIATES

CERTIFIED PUBLIC ACCOUNTANTS — A PROFESSIONAL LIMITED LIABILITY COMPANY

## Independent Auditors' Report

Division of Soil and Water Conservation
Department of Conservation and Recreation
Commonwealth of Virginia
Richmond, Virginia

We have audited the accompanying statements of cash receipts and disbursements of the Culpeper Soil and Water Conservation District for the year ended June 30, 2018, and the related notes to the financial statement.

### *Management's Responsibility for the Financial Statements*

Management is responsible for the preparation and fair presentation of this financial statement in accordance with the cash basis of accounting described in Note 1; this includes determining that the cash basis of accounting is an acceptable basis for the preparation of the financial statement in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of the financial statement that is free from material misstatement, whether due to error or fraud.

### *Auditors' Responsibility*

Our responsibility is to express an opinion on this financial statement based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statement is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statement. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statement, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statement in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statement.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### *Opinion*

In our opinion, the financial statement referred to above presents fairly, in all material respects, the cash receipts and disbursements of the Culpeper Soil and Water Conservation District for the year ended June 30, 2018 in accordance with the cash basis of accounting as described in Note 1.

*Basis of Accounting*

We draw attention to Note 1 of the financial statement, which describes the basis of accounting. The financial statement is prepared on the cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to that matter.

*Other Matters*

*Other Information*

Our audit was conducted for the purpose of forming an opinion on the financial statement as a whole. The schedule of cash disbursements on page 6 is presented for purposes of additional analysis and is not a required part of the financial statement. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statement. Such information has been subjected to the auditing procedures applied in the audit of the financial statement and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statement or to the financial statement itself, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of cash disbursements is fairly stated in all material respects in relation to the financial statement as a whole.

Robinson, Farmer, Cox Associates

Charlottesville, Virginia
February 4, 2019

- Financial Statement -

CULPEPER SOIL AND WATER CONSERVATION DISTRICT

Statement of Cash Receipts and Disbursements
Year Ended June 30, 2018

| | Balance July 1, 2017 | Transfers | Receipts | Disburse-ments | Balance June 30, 2018 |
|---|---|---|---|---|---|
| Local sources: | | | | | |
| Local governments | $ 95,867 | $ 413,288 | $ 199,733 | $ 671,913 | $ 36,975 |
| SWCD Filter Fabric Sales | 4,899 | - | 2,778 | 1,193 | 6,484 |
| Other | 1,523 | 234 | 2,520 | 2,935 | 1,342 |
| Certificate of deposit and savings | 519,604 | 208,424 | 79,441 | - | 807,469 |
| Total local sources | $ 621,893 | $ 621,946 | $ 284,472 | $ 676,041 | $ 852,270 |
| State sources: | | | | | |
| DCR - Cost Share | $ 2,623,953 | $ (443,467) | $ 2,687,562 | $ 2,702,922 | $ 2,165,126 |
| Operating funds - State | - | (178,025) | 178,025 | - | - |
| WS Maintenance Funds | 23,116 | - | 140,203 | 91,570 | 71,749 |
| DEQ funds | (30,792) | (150) | 208,424 | 205,010 | (27,528) |
| Other | 5,763 | - | - | 1,088 | 4,675 |
| Total state sources | $ 2,622,040 | $ (621,642) | $ 3,214,214 | $ 3,000,590 | $ 2,214,022 |
| Federal sources: | | | | | |
| DEQ funds | $ (17,463) | $ (304) | $ 408,983 | $ 466,818 | $ (75,602) |
| Total all sources | $ 3,226,470 | $ - | $ 3,907,669 | $ 4,143,449 | $ 2,990,690 |

The accompanying notes are an integral part of this financial statement.

CULPEPER SOIL AND WATER CONSERVATION DISTRICT

Notes to Financial Statement
Year Ended June 30, 2018

## Note 1–Summary of Significant Accounting Policies:

A. Organization

The Culpeper Soil and Water Conservation District (the District) is a separate legal entity responsible under state law for conservation work within its boundaries. The District's purposes are to focus attention on land, water and related resource problems; to develop programs for solving the problems; and to enlist and coordinate assistance from all public and private sources for carrying out program objectives.

The Division of Soil and Water Conservation, primarily through the Commonwealth of Virginia Department of Conservation and Recreation, provides financial, administrative and technical assistance to each of Virginia's 47 soil and water conservation districts. The districts are funded primarily through local government appropriations, fundraising projects and state, federal and private grants.

B. Basis of Accounting

As prescribed by the Commonwealth of Virginia Department of Conservation and Recreation, the statements of cash receipts and disbursements of the District have been prepared on the cash basis of accounting, whereby receipts are recognized when cash is received rather than when revenue is earned, and disbursements are recognized when cash is paid rather than when the obligation is incurred. Consequently, the statements of cash receipts and disbursements are not intended to present the results of operations in conformity with generally accepted accounting principles.

## Note 2–Deposits:

Deposits with banks are covered by the Federal Deposit Insurance Corporation (FDIC) and collateralized in accordance with the Virginia Security for Public Deposits Act (the "Act") Section 2.2-4400 et. seq. of the Code of Virginia. Under the Act, banks and savings institutions holding public deposits in excess of the amount insured by the FDIC must pledge collateral to the Commonwealth of Virginia Treasury Board. Financial Institutions may choose between two collateralization methodologies and depending upon that choice, will pledge collateral that ranges in the amounts from 50% to 130% of excess deposits. Accordingly, all deposits are considered fully collateralized.

## Note 3–Contingencies:

The District receives grant funds from various programs, principally from the U.S. Government and the Commonwealth of Virginia, for conservation. Expenditures from certain of these funds are subject to audit by the grantor, and the District is contingently liable to refund amounts received in excess of allowable expenditures. In the opinion of the District's management, future expenditures disallowed by grantors, if any, would be immaterial.

## Note 4–Pension Plan:

The District participates in the Virginia Retirement System (VRS), an agent multiple employer defined benefit pension plan. The VRS basic benefit is a lifetime monthly benefit based on a retirement multiplier as a percentage of the member's average final compensation multiplied by the member's total service credit. The multiplier is based on a member's beginning plan participation date and whether the member is considered a non-hazardous duty or hazardous duty member. The plan also has provisions for cost-of-living adjustments which are also based upon the member's beginning plan participation date. Additional information about the plan may be obtained from the Virginia Retirement System, and a copy of the VRS most recent comprehensive annual financial report may be obtained from the VRS website at http://www.varetire.org/Pdf/publications/2017-Annual-report.pdf. The District's employer contributions to the plan, were $22,980 in FY 2018.

- Supplementary Information -

CULPEPER SOIL AND WATER CONSERVATION DISTRICT

Schedule of Cash Disbursements
Year Ended June 30, 2018

| | 2018 |
|---|---|
| Personnel costs | $ 678,803 |
| District operations | 153,560 |
| Cost share/CREP | 3,219,516 |
| Other | 91,570 |
| Total | $ 4,143,449 |

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE: January 13, 2020**

| IDENTIFICATION | |
|---|---|
| *Organization/Agency Name*: | Northern Virginia 4-H Educational and Conference Center |
| *Street Name:* | 600 4H Center Drive, Front Royal, VA 22630 |
| *Mailing Address:* | 600 4H Center Drive, Front Royal, VA 22630 |
| *Agency Contact:* | Jeremy Stanford, Center Director |
| *Telephone Number:* | (540)635-7171 |
| *E-mail Address – Agency Contact* | jstanford@vt.edu |
| *Agency's Web Address:* | www.nova4h.com |
| *Federal Tax ID#:* | 54-1035176 |
| *Audit:* | ☒Yes ☐No |

**PURPOSE/NARRATIVE**

*Missions and Goals:*

The Northern Virginia 4-H Educational and Conference Center's mission is to facilitate proven experiential learning programs for youth, families, and adults that educate, inspire and connect.

The Center's vision is to improve all aspects of the world in which we live, work and play through recreation, education, leadership, and life skill development. Our vision is put into action through the support of diverse communities, impactful stewardship and the creation of meaningful relationships with those around us, making the 4-H Center a truly sustainable organization. Our Core values are to Educate, Inspire and Connect.

NORTHERN VIRGINIA
4-H EDUCATIONAL AND CONFERENCE CENTER
600 4-H Center Drive – Front Royal, VA 22630
Phone: (540) 635-7171 – Fax: (540) 635-6876 www.nova4h.com

December 18, 2019

Ms. Mary Jane Costello
Madison County Director of Finance
302 Thrift Road
P.O. Box 705
Madison, VA 22727

Dear Ms. Costello:

We are most appreciative of the support the Northern Virginia 4-H Educational and Conference Center has received from Madison County in the past and very respectively request continued funding in the amount of $750 for FY21 which is the same amount appropriated for the 4-H Center for FY20.

The 4-H Center is in existence because of caring people like the citizens of Madison County and support from the Madison Board of Supervisors. Thank you.

Per your request, enclosed you will find the following documents:

- Completed Application Form
- IRS Form 990
- IRS letter of exemption
- Camping Statistical Information (clients served)
- Statement of Intended Use of Funds
- 2019 Activity/Accomplishments
- 4-H Center 2020 Goals
- Operating Budget - 2019
- Local Government Requests for Counties Served
- Mission Statement

Thank you for processing our request.

With much appreciation,

Jeremy Stanford
Center Director

**The Northern Virginia 4-H Educational Conference Center is a 501 (c) 3 tax-exempt organization and your contribution is tax deductible to the fullest extent of the law. For your records, our tax identification # is: 54-1035176.**
**No goods or services were provided in exchange for your contribution.**
*Virginia Cooperative Extension programs and employment are open to all, regardless of age, color, disability, gender, gender identity, gender expression, national origin, political affiliation, race, religion, sexual orientation, genetic information, veteran status, or any other basis protected by law. An equal opportunity/affirmative action employer. Issued in furtherance of Cooperative Extension work, Virginia Polytechnic Institute and State University, Virginia State University, and the U.S. Department of Agriculture cooperating. Edwin J. Jones, Director, Virginia Cooperative Extension, Virginia Tech, Blacksburg; M. Ray McKinnie, Administrator, 1890 Extension Program, Virginia State University, Petersburg.*

# Northern Virginia 4-H Educational and Conference Center

## FY 2021 BUDGET INTENDED USE STATEMENT

The Northern Virginia 4-H Educational and Conference Center is the camping site for Madison County 4-H'ers ages 9-17 (4-H Junior Camp) and ages 5-8 (Cloverbud Camp).

Contributions are being requested to continue subsidizing the 4-H camping fees to allow more Madison County boys and girls to attend 4-H Camp. Funds are also needed for critical maintenance of facilities and replacement of camp equipment and furnishings.

- Maintain the Conference Center – Replace worn and dusty carpeting in Conference Center Auditorium and Library. Estimated cost $30,000

- Foodservice Equipment/Refrigeration – Replace aging kitchen equipment, cooler, and freezer for improved efficiency and food safety. Estimated cost $75,000

- Purchase an all-terrain vehicle – Four-wheel drive utility vehicle for providing medical support and transportation of non-mobile or injured program participants in remote areas on-site. Estimated cost $25,000

- Purchase a Medical Staff Golf Cart – Reliable 4 or 6 seat electric golf cart for use by Camp Medical Staff to respond to medical needs throughout the main lodging/program areas. Estimated cost $15,000

- Purchase a Security Gate – Keypad-entry after-hours gate to provide additional security against uninvited camp visitors. Estimated cost $75,000

- Expanded Wi-Fi network – Expanding Wi-Fi access from one building to all lodging and meeting facilities for improved communication ability in the event of an emergency. Estimated cost $75,000-$100,000

The Northern Virginia 4-H Educational and Conference Center is open to all citizens of Madison County and has served as the principle camping facility for the youth of Madison County since 1981. The basic eligibility age for youth is between ages 9-17 and Cloverbud campers ages 5-8.

# NORTHERN VIRGINIA 4-H EDUCATIONAL AND CONFERENCE CENTER

## 2020 GOALS

Prevent the increase of Jr. 4-H camping fees so we can accommodate more youth from Madison County. 4-H junior camp allows youth from Madison to participate in multi-day programs designed to develop individual and group life skills.

Continue providing educational programs for youth and adults including those who are underserved and underprivileged as well as those who have special needs i.e., children with cancer, children of military families, autistic youth, senior citizens, etc.

Maintain a safe and secure facility. Make needed repairs and ADA suitable upgrades to the Conference Center as well as dining hall and all lodges. Repair and paint all structures as needed.

Replace air conditioning units in lodges that need it or not have it. Add A/C to Peters and Rector Lodge. These lodges sleep a total of 144 youth every summer.

Upgrade and maintain the athletic fields, tennis and basketball courts, archery range and Ropes Challenge Course.

Purchase or rent all-terrain vehicles or golf carts to provide transportation for program participants who have ambulatory needs.

Raise funds to upgrade, renovate and develop the 4-H Center's James E. Swart Animal Center, located on the site and utilizing facilities of the historical US Calvary Remount Depot.

Increase new user groups from Madison that use the 4-H Center during FY 2021 by 10% and encourage schools to allow students to participate in programs meeting the SOL requirements by 5%.

# NORTHERN VIRGINIA 4-H EDUCATIONAL AND CONFERENCE CENTER

## 2019 ACTIVITY/ACCOMPLISHMENTS

The number of participants in 4-H youth programs at the Northern Virginia 4-H Educational and Conference Center continues to increase because, in addition to 4-H junior camp, many youths are participating in education programs that are offered through The Center year-round. During 2019 new school audiences as well as church groups and civic organizations used the 4-H Center.

Many of these groups from Madison County, participated in multi-day programs designed to meet Virginia Standards of Learning. Among the programs that youth from Madison County participated in is the ropes challenge course, an experience designed to develop individual and group life-skill and emphasize the importance of cooperation and communication in achieving goals and meeting challenges. STEM programming during our 9 weeks of 4-H summer camp, assured the camp population participated in afternoon STEM focused active learning exploration activities focused on citizen science and answering the question, "*What does it mean to be a scientist?*" and engineering problems focused on answering the question, "W*hat does it mean to be an engineer?*"

With newly added trained staff our Resource Center provided our youth participants with valuable knowledge and skills in water and forest ecology, entomology, ornithology and wildlife exploration. Our program staff had a successful year in encouraging our participants in outdoor living skills such as orienteering, cast iron cooking, survival training and Leave No Trace. Of course, the ever-popular archery, canoeing, and hiking classes continue to assure our youth to seek out and enjoy outdoor activities.

The 4-H Center once again hosted Camp Fantastic, a camp for children living with and undergoing treatment for cancer, in late August. A team of doctors and nurses from the National Institutes of Health volunteer their time and are on-site the entire week, providing the same level of critical care available to juvenile cancer patients available in any major hospital. Camp Fantastic is sponsored by Special Love, Inc. which is headquartered in Winchester, *V*A. Children have attended from all over the United States over the past 36 years of the camp's history.

Nearly every weekend in 2019 was booked for conferences, youth programs or other groups at the 4-H Center. The Center continues to seek more mid-week business, especially during the winter months. Like the camping and other educational programs use of The Center by youth and adult groups, i.e., schools, churches, civic organizations, businesses, governments and more continues to increase. We are pleased with the diversity of audiences who use the 4-H Center but constantly strive to be as inclusive as we can.

Contributions from Local Governments are critical in enabling the 4-H Center to minimize program fees and provide scholarships where we can which ensures access to programs and enrichment for youth regardless of economic status. In order to continue providing programs and facilities for all audiences, including the underserved and underprivileged in Madison County, support from local governments is desperately needed. The 4-H Center respectfully requests $750 for FY2021.

NORTHERN VIRGINIA
4-H EDUCATIONAL AND CONFERENCE CENTER
600 4-H Center Drive – Front Royal, VA 22630
Phone: (540) 635-7171 – Fax: (540) 635-6876 www.nova4h.com

## Mission

*The Northern Virginia 4-H Educational and Conference Center's mission is to facilitate proven experiential learning programs for youth, families, and adults that educate, inspire and connect.*

## Vision

*The Center's vision is to improve all aspects of the world in which we live, work and play through recreation, education, leadership, and life skill development. Our vision is put into action through the support of diverse communities, impactful stewardship and the creation of meaningful relationships with those around us, making the 4-H Center a truly sustainable organization.*

## Core Values

*Educate, Inspire, Connect*

**The Northern Virginia 4-H Educational Conference Center is a 501 (c) 3 tax-exempt organization and your contribution is tax deductible to the fullest extent of the law. For your records, our tax identification # is: 54-1035176.**
**No goods or services were provided in exchange for your contribution.**

*Virginia Cooperative Extension programs and employment are open to all, regardless of age, color, disability, gender, gender identity, gender expression, national origin, political affiliation, race, religion, sexual orientation, genetic information, veteran status, or any other basis protected by law. An equal opportunity/affirmative action employer. Issued in furtherance of Cooperative Extension work, Virginia Polytechnic Institute and State University, Virginia State University, and the U.S. Department of Agriculture cooperating. Edwin J. Jones, Director, Virginia Cooperative Extension, Virginia Tech, Blacksburg; M. Ray McKinnie, Administrator, 1890 Extension Program, Virginia State University, Petersburg.*

# Northern Virginia 4-H Educational Center

## Local Gov't Allocations for Fiscal Years 2018 - 2020

| County | Received FY18 | Received FY19 | Received FY20 |
|---|---|---|---|
| ALEXANDRIA | $ - | $ - | $ - |
| ARLINGTON | $ - | $ - | $ - |
| CAROLINE | $ 1,250.00 | $ 1,250.00 | $ 1,250.00 |
| CLARKE | $ 2,300.00 | $ 2,300.00 | |
| CULPEPER | $ 1,500.00 | $ 1,500.00 | $ 1,500.00 |
| FAIRFAX | $ 15,000.00 | $ 15,000.00 | $ 15,000.00 |
| FAUQUIER | $ 6,172.00 | $ 6,172.00 | $ 6,172.00 |
| FREDERICK | $ - | $ - | $ - |
| KING GEORGE | $ - | $ - | $ - |
| LOUDOUN | $ - | $ 4,000.00 | |
| MADISON | $ 750.00 | $ 750.00 | |
| ORANGE | $ 1,000.00 | $ 1,000.00 | $ 1,000.00 |
| PAGE | $ 1,500.00 | $ 1,500.00 | $ 1,500.00 |
| PRINCE WILLIAM | $ - | $ - | $ - |
| RAPPAHANNOCK | $ 4,000.00 | $ - | |
| SHENANDOAH | $ 1,500.00 | $ 1,500.00 | $ 1,500.00 |
| SPOTSYLVANIA | $ 1,000.00 | $ 1,000.00 | $ 500.00 |
| STAFFORD | $ 1,000.00 | $ 1,000.00 | $ 1,000.00 |
| WARREN | $ 3,000.00 | $ 3,000.00 | $ 3,000.00 |
| **TOTAL** | **$ 39,972.00** | **$ 39,972.00** | **$ 32,422.00** |

# Northern Virginia 4-H Educational & Conference Center
## Profit & Loss
### January through December 2019

| | Jan - Dec 19 | |
|---|---|---|
| Ordinary Income/Expense | | |
| Income | | |
| 40000 · REVENUE | | |
| 41000 · CONTRIBUTIONS & SUPPORT | | |
| 41100 · General Donations | 29,537.09 | |
| 41200 · Government Contributions | 37,222.00 | |
| 41300 · In-Kind Donations | 12,863.68 | |
| 41500 · Restricted Donations | 1,000.00 | |
| 41600 · Scholarships & Sponsorships | 8,365.00 | |
| 41700 · Special Event Donation | 8,501.92 | |
| 41800 · VPI Contributions | 40,385.23 | |
| Total 41000 · CONTRIBUTIONS & SUPPORT | | 137,874.92 |
| Total 40000 · REVENUE | | 137,874.92 |
| 42000 · CONFERENCES | | |
| 42010 · Conference Meals | | 118,229.70 |
| 42020 · Conference Lodging | | 107,407.00 |
| 42030 · Conference Meeting Rooms | | 44,687.50 |
| 42040 · Conference Shelter Rental | | 3,320.00 |
| 42050 · Conference Campfire Circle | | 740.00 |
| 42070 · Conference Amphitheater | | 100.00 |
| 42080 · Conference Firewood | | 15.00 |
| 42090 · Conference Workshops | | 686.00 |
| 42100 · Conference Sports Facilities | | |
| 42110 · Conference Soccer Field | 15.00 | |
| Total 42100 · Conference Sports Facilities | | 15.00 |
| 42200 · Conference Stable | | 1,205.00 |
| 42201 · Conference Infirmary | | 1,050.00 |
| 42000 · CONFERENCES - Other | | -7,585.46 |
| Total 42000 · CONFERENCES | | 269,869.74 |
| 43000 · PROGRAMS | | |
| 43010 · Program Meals | | 11,811.00 |
| 43020 · Program Lodging | | 4,042.00 |
| 43030 · Program Meeting Rooms | | 100.00 |
| 43040 · Program Shelter | | 225.00 |
| 43050 · Program Campfire Circle | | 600.00 |
| 43070 · Program Camp Store | | 2,085.00 |
| 43075 · Program Concessions | | 6,013.58 |
| 43090 · Programs Jr. Camp | | 444,067.40 |
| 43095 · Program Special Camps | | 20,642.00 |
| 43100 · Program Courses | | 70,647.55 |
| 43000 · PROGRAMS - Other | | -2,526.37 |
| Total 43000 · PROGRAMS | | 557,707.16 |
| 44000 · POOL | | 6,775.00 |
| 45050 · VPI Contributed Services | | 10,000.00 |
| 45099 · Special Event Income | | 3,351.50 |
| 46000 · OTHER INCOME | | |
| 46010 · Interest Income | | 173.76 |
| 46020 · Miscelleanous | | 32,565.94 |
| Total 46000 · OTHER INCOME | | 32,739.70 |
| Total Income | | 1,018,318.02 |
| Gross Profit | | 1,018,318.02 |

# Northern Virginia 4-H Educational & Conference Center
## Profit & Loss
### January through December 2019

| | Jan - Dec 19 | |
|---|---|---|
| Expense | | |
| 50001 · MATERIALS & GOODS | | |
| 50100 · Food & drinks | 131,229.75 | |
| 50200 · Supplies, Chemical & Linens | 10,616.22 | |
| 50300 · Program Supplies | 12,229.58 | |
| Total 50001 · MATERIALS & GOODS | | 154,075.55 |
| 60000 · PERSONNEL | | |
| 60100 · Salaries & Wages | 271,597.66 | |
| 60105 · Hiring Costs | 309.41 | |
| 60200 · Employee Appreciation | 405.38 | |
| 60300 · Health Insurance | 2,616.49 | |
| 60400 · Payroll Taxes | 21,194.29 | |
| 60500 · VT Staff Wages | -1,030.43 | |
| 60515 · VT Staff Benefits | -792.77 | |
| 60600 · Workers Compensation Insurance | 9,839.04 | |
| 60700 · Payroll Service Expense | 867.67 | |
| 60900 · Personnel Miscellaneous | 1,688.96 | |
| Total 60000 · PERSONNEL | | 306,695.70 |
| 66900 · Reconciliation Discrepancies | | -15.00 |
| 70000 · OPERATING EXPENSES | | |
| 70105 · Bank Fees | 802.00 | |
| 70107 · Copier Costs | 1,987.18 | |
| 70110 · Credit Card Fees | 1,779.58 | |
| 70210 · Contract Labor | 11,775.41 | |
| 70300 · Depreciation | 185,803.80 | |
| 70310 · Dues & Subscription | 979.50 | |
| 70311 · Equipment Rental | 9,101.75 | |
| 70315 · In-Kind Contribution Expense | 4,167.73 | |
| 70380 · Interest Expense - Loan | 3,447.00 | |
| 70390 · LOC Interest Expense | 3,393.36 | |
| 70400 · Licences & Fees | 2,033.53 | |
| 70409 · Liability Insurance | | |
| 70410 · General Liabilty | 17,243.96 | |
| 70411 · Officers & Directors Insurance | 3,570.00 | |
| 70409 · Liability Insurance - Other | 1,005.34 | |
| Total 70409 · Liability Insurance | 21,819.30 | |
| 70412 · Marketing/Fund Raising | 15.80 | |
| 70415 · Office Supplies | 1,918.36 | |
| 70419 · Late Fees / Discount Loss | 542.19 | |
| 70420 · Miscellaneous | 1,212.86 | |
| 70500 · Postage & Shipping | 520.84 | |
| 70510 · Professional Fees | 12,593.04 | |
| 70515 · Property Insurance | 8,808.03 | |
| 70610 · Restricted Expenses | 23,323.59 | |
| 70620 · Small Equipment & Furniture | 604.97 | |
| 70650 · Special Event Expenses | 7,576.02 | |
| 70700 · Training | 9,429.39 | |
| 70715 · Travel/Mileage/Meals | 1,103.44 | |
| 70720 · Website Costs | 30.34 | |
| Total 70000 · OPERATING EXPENSES | | 314,769.01 |
| 80000 · MAINTENANCE & REPAIRS | | |
| 80100 · Groundskeeping | 1,650.00 | |
| 80200 · Maintenance Contracts | 190,209.00 | |
| 80300 · Repairs & Maintenance | 63,386.52 | |
| 80400 · Trash Removal | 7,555.00 | |

# Northern Virginia 4-H Educational & Conference Center
## Profit & Loss
### January through December 2019

| | Jan - Dec 19 |
|---|---|
| 80450 · Utilities | |
| 80451 · Electric | 88,880.78 |
| 80452 · Sewer & Water | 62,099.00 |
| 80453 · Telephone | 8,296.91 |
| 80454 · Gasoline | 4,105.23 |
| 80455 · Heating Fuel | 24,761.54 |
| 80456 · Propane | 5,587.57 |
| 80457 · Diesel Fuel | 80.14 |
| Total 80450 · Utilities | 193,811.17 |
| 80500 · Vehicles | 12,164.33 |
| 80600 · Equipment Repair | 809.29 |
| 80900 · Repair Miscellaneous | 30,795.06 |
| 80000 · MAINTENANCE & REPAIRS - Other | 3,459.77 |
| Total 80000 · MAINTENANCE & REPAIRS | 503,840.14 |
| Total Expense | 1,279,365.40 |
| Net Ordinary Income | -261,047.38 |
| Net Income | -261,047.38 |

| Summer Programs & Camp Numbers 2010-2019 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | Year-Over-Year | 5 Yr Avg | 10 Yr Avg |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Jr 4-H Camp** | | | | | | | | | | | | | |
| Alexandria | | 5 | 14 | 11 | 33 | 32 | 31 | 52 | 30 | 25 | -16.67% | 34 | 26 |
| Arlington | 98 | 57 | 37 | 44 | 58 | 73 | 73 | 61 | 52 | 48 | -7.69% | 61 | 60 |
| Caroline | 63 | 64 | 65 | 59 | 46 | 47 | 39 | 36 | 31 | 36 | 16.13% | 38 | 49 |
| Clarke | 116 | 128 | 105 | 99 | 87 | 97 | 90 | 69 | 58 | 60 | 3.45% | 75 | 91 |
| Culpeper | 113 | 97 | 90 | 86 | 93 | 84 | 77 | 69 | 53 | 60 | 13.21% | 69 | 82 |
| Fairfax | 172 | 131 | 145 | 173 | 162 | 148 | 154 | 113 | 82 | 97 | 18.29% | 119 | 138 |
| Fauquier | 107 | 136 | 119 | 136 | 142 | 142 | 144 | 179 | 183 | 146 | -20.22% | 159 | 143 |
| Frederick | 138 | 130 | 127 | 147 | 150 | 153 | 134 | 109 | 98 | 139 | 41.84% | 127 | 133 |
| King George | 142 | 163 | 153 | 147 | 155 | 109 | 146 | 161 | 157 | 158 | 0.64% | 146 | 149 |
| Loudoun | 184 | 152 | 173 | 148 | 162 | 177 | 180 | 138 | 140 | 146 | 4.29% | 156 | 160 |
| Madison | 75 | 77 | 72 | 75 | 80 | 76 | 61 | 59 | 67 | 93 | 38.81% | 71 | 74 |
| Orange | 195 | 175 | 164 | 143 | 129 | 103 | 100 | 88 | 79 | 100 | 26.58% | 94 | 128 |
| Page | 82 | 81 | 73 | 71 | 63 | 70 | 82 | 64 | 71 | 87 | 22.54% | 75 | 74 |
| Prince William | 141 | 137 | 158 | 123 | 142 | 154 | 157 | 162 | 157 | 153 | -2.55% | 157 | 148 |
| Rappahannock | 87 | 76 | 86 | 63 | 65 | 70 | 60 | 57 | 58 | 53 | -8.62% | 60 | 68 |
| Shenandoah | 69 | 75 | 54 | 47 | 57 | 54 | 52 | 59 | 31 | 39 | 25.81% | 47 | 54 |
| Spotsylvania | 114 | 104 | 98 | 92 | 88 | 77 | 93 | 96 | 67 | 71 | 5.97% | 81 | 90 |
| Stafford | 113 | 101 | 108 | 157 | 156 | 151 | 144 | 129 | 102 | 115 | 12.75% | 128 | 128 |
| Warren | 130 | 134 | 147 | 141 | 171 | 166 | 175 | 158 | 165 | 150 | -9.09% | 163 | 154 |
| **Totals** | **2139** | **2023** | **1988** | **1962** | **2039** | **1983** | **1992** | **1859** | **1681** | **1776** | 5.65% | **1858** | **1944** |
| **Bedspace** | **83.55%** | **79.02%** | **77.66%** | **76.64%** | **79.65%** | **77.46%** | **77.81%** | **72.62%** | **65.66%** | **69.38%** | 3.71% | **72.59%** | **75.95%** |
| **Special Interest Camps** | | | | | | | | | | | | | |
| TALT | 287 | 296 | 298 | 265 | 236 | 209 | 222 | 199 | 200 | 127 | -36.50% | 191 | 234 |
| WCSD Camp | 34 | 42 | 38 | 40 | 43 | 40 | 46 | 45 | 41 | 38 | -7.32% | 42 | 41 |
| Horse Camp | 22 | 25 | 27 | 22 | 22 | 15 | 18 | 0 | 0 | | N/A | 8 | 17 |
| Cloverbud | 30 | 40 | 45 | 41 | 36 | 52 | 70 | 55 | 49 | 36 | -26.53% | 52 | 45 |
| Camp Corral | | | 151 | 160 | 259 | 230 | 237 | 243 | 237 | | -100.00% | 237 | 217 |
| OMK Camp | | 44 | | | | 28 | | | | | N/A | 28 | 36 |
| Horse Day Camp | | | | | 20 | 16 | | | | | N/A | 16 | 18 |

| Summer Programs & Camp Numbers 2010-2019 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | Year-Over-Year | 5 Yr Avg | 10 Yr Avg |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adventure Day Camps | | | | | 20 | 86 | 37 | 0 | 0 | 25 | N/A | 30 | 28 |
| Other/Special Interest | | | | | | 61 | 24 | 37 | 224 | 119 | -46.88% | 93 | 93 |
| **Totals** | **373** | **447** | **559** | **528** | **636** | **737** | **654** | **579** | **751** | **345** | **-54.06%** | **613** | **613** |
| Summer Programs & Camp Grand Totals | 2512 | 2470 | 2547 | 2490 | 2675 | 2720 | 2646 | 2438 | 2432 | 2121 | 7.43% | 2471 | 2471 |

| Cluster | 2015 | | 2016 | | 2017 | | 2018 | | 2019 | | Year-Over-Year | 5 Yr Avg |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Campers | Beds Filled | Campers | Beds Filled | Campers | Beds Filled | Campers | Beds Filled | Campers | Beds Filled | | |
| Orange/Madison | 179 | 56% | 161 | 50% | 147 | 46% | 146 | 46% | 193 | 60% | 32.19% | 165 |
| Loudoun/Fauquier | 319 | 100% | 324 | 101% | 317 | 99% | 323 | 101% | 292 | 91% | -9.60% | 315 |
| Frederick/Page | 223 | 70% | 216 | 68% | 173 | 54% | 169 | 53% | 226 | 71% | 33.73% | 201 |
| Fairfax/Alexandria/Arlington | 253 | 79% | 258 | 81% | 226 | 71% | 164 | 51% | 170 | 53% | 3.66% | 214 |
| Clarke/Warren | 263 | 82% | 265 | 83% | 227 | 71% | 223 | 70% | 210 | 66% | -5.83% | 238 |
| KG/Spotsy/Caroline (Spotsy left | 233 | 73% | 278 | 87% | 293 | 92% | 255 | 80% | 192 | 60% | | 250 |
| Prince William/Stafford | 305 | 95% | 301 | 94% | 291 | 91% | 259 | 81% | 268 | 84% | 3.47% | 285 |
| Culp/Shen/Rap(Spotsy added in | 208 | 65% | 189 | 59% | 185 | 58% | 142 | 44% | 281 | 88% | 97.89% | 201 |
| **TOTALS** | | **1983** | | **1992** | | **1859** | | **1681** | | **1832** | **8.98%** | **1869** |

Form **990**

Department of the Treasury
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**2018**

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning and ending

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
NORTHERN VIRGINIA 4-H EDUCATIONAL AND CONFERENCE CENTER INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
600 4-H CENTER DRIVE

City or town, state or province, country, and ZIP or foreign postal code
FRONT ROYAL, VA 22630

F Name and address of principal officer: TOBIN SMITH
600 4-H CENTER DRIVE, FRONT ROYAL, VA 22630

D Employer identification number
COPY FOR CLIENT
**-***5176

E Telephone number
540-635-7171

G Gross receipts $ 1,289,816.

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.NOVA4H.COM

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

L Year of formation: 1976 M State of legal domicile: VA

## Part I Summary

| | | | |
|---|---|---|---|
| Activities & Governance | 1 | Briefly describe the organization's mission or most significant activities: TO PROVIDE RECREATIONAL AND EDUCATIONAL FACILITIES FOR 4-H AFFILIATED YOUTH PROGRAMS. | |
| | 2 | Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. | |
| | 3 | Number of voting members of the governing body (Part VI, line 1a) | 11 |
| | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 11 |
| | 5 | Total number of individuals employed in calendar year 2018 (Part V, line 2a) | 63 |
| | 6 | Total number of volunteers (estimate if necessary) | 67 |
| | 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 0. |
| | b | Net unrelated business taxable income from Form 990-T, line 38 | 0. |

| | | | Prior Year | Current Year |
|---|---|---|---|---|
| Revenue | 8 | Contributions and grants (Part VIII, line 1h) | 148,974. | 173,910. |
| | 9 | Program service revenue (Part VIII, line 2g) | 1,272,282. | 1,100,100. |
| | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 2,168. | 1,043. |
| | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 2,200. | 13,841. |
| | 12 | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 1,425,624. | 1,288,894. |
| Expenses | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 0. | 0. |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | 0. | 0. |
| | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 850,475. | 519,427. |
| | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | 0. | 0. |
| | b | Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,253. | | |
| | 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 1,009,926. | 936,983. |
| | 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 1,860,401. | 1,456,410. |
| | 19 | Revenue less expenses. Subtract line 18 from line 12 | -434,777. | -167,516. |

| | | | Beginning of Current Year | End of Year |
|---|---|---|---|---|
| Net Assets or Fund Balances | 20 | Total assets (Part X, line 16) | 2,307,674. | 2,320,633. |
| | 21 | Total liabilities (Part X, line 26) | 72,413. | 252,888. |
| | 22 | Net assets or fund balances. Subtract line 21 from line 20 | 2,235,261. | 2,067,745. |

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer — Date: 4-30-19

▶ TOBIN SMITH, PRESIDENT
Type or print name and title

Paid Preparer Use Only

| Print/Type preparer's name | Preparer's signature | Date | Check if self-employed | PTIN |
|---|---|---|---|---|
| JENNIFER R. FILES, CPA | JENNIFER R. FILES, C | 4-30-19 | ☐ | P01275752 |

Firm's name ▶ YOUNT, HYDE & BARBOUR, P.C. Firm's EIN ▶ **-***9263

Firm's address ▶ P.O. BOX 2560
WINCHESTER, VA 22604-1760 Phone no. 540-662-3417

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III ☐

1 Briefly describe the organization's mission:
THE NORTHERN VIRGINIA 4-H EDUCATIONAL CENTER, INC. IS DEDICATED TO ENRICHING THE DEVELOPMENT OF YOUTH THROUGH INNOVATIVE 4-H CAMPING/TRAINING/LEADERSHIP PROGRAMS. IN ADDITION THE CENTER OFFERS SPECIAL CAMPING, RETREATING AND EDUCATIONAL EXPERIENCES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses $ 1,288,764. including grants of $ _____) (Revenue $ 1,114,863.)
THE CENTER IS OPEN DAILY YEAR-ROUND FOR PUBLIC RECREATION AT LITTLE OR NO COST.

MID-WEEK DURING THE SUMMER MONTHS IS DEDICATED TO 4-H CAMPING PROGRAMS-WEEK LONG CAMPS FOR 4-H AFFILIATED YOUTHS, EDUCATIONAL CONFERENCES, AND MEETINGS; EDUCATIONAL RECREATIONAL FACILITY-INCLUDING: POOL, LAKE, SHOOTING RANGE AND OTHER RECREATIONAL FACILITIES. THE FACILITY IS AVAILABLE TO OTHER GROUPS, LARGE OR SMALL, ON WEEKENDS AND NON-SUMMER MONTHS FOR SEMINARS, CONFERENCES, WORKSHOPS, MEETINGS AND RETREATS. COMPLETE SERVICES INCLUDE DORMITORY LODGING, FOOD SERVICE, PROGRAM ASSISTANCE AND THE USE OF ALL RECREATIONAL FACILITIES.

4b (Code: _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4c (Code: _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4d Other program services (Describe in Schedule O.)
(Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4e Total program service expenses ▶ 1,288,764.

**Part IV Checklist of Required Schedules**

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A* | 1 | X | |
| 2 | Is the organization required to complete *Schedule B, Schedule of Contributors*? | 2 | X | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I* | 3 | | X |
| 4 | **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II* | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III* | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I* | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II* | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III* | 8 | | X |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV* | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V* | 10 | | X |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | | |
| a | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI* | 11a | X | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII* | 11b | | X |
| c | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII* | 11c | | X |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX* | 11d | | X |
| e | Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X* | 11e | X | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X* | 11f | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII* | 12a | X | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional* | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E* | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV* | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV* | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV* | 16 | | X |
| 17 | Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* | 17 | | X |
| 18 | Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II* | 18 | | X |
| 19 | Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III* | 19 | | X |
| 20a | Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II* | 21 | | X |

**Part IV Checklist of Required Schedules** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| 22 | Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III* | 22 | | X |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J* | 23 | | X |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a* | 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | **Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I* | 25a | | X |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I* | 25b | | X |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II* | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III* | 27 | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| a | A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV* | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV* | 28b | | X |
| c | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV* | 28c | | X |
| 29 | Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M* | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M* | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I* | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II* | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I* | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1* | 34 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* | 35b | | |
| 36 | **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2* | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI* | 37 | | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O | 38 | X | |

## Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

| | | | | Yes | No |
|---|---|---|---|---|---|
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | 3 | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | 0 | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | | X | |

**Part V Statements Regarding Other IRS Filings and Tax Compliance** *(continued)*

| | | | | Yes | No |
|---|---|---|---|---|---|
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | 2a | 63 | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | | X | |
| | **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions) | | | | |
| 3a | Did the organization have unrelated business gross income of $1,000 or more during the year? | 3a | | | X |
| b | If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* | 3b | | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | | X |
| b | If "Yes," enter the name of the foreign country: ▶ | | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | | X |
| c | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | | |
| 6a | Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | | |
| 7 | **Organizations that may receive deductible contributions under section 170(c).** | | | | |
| a | Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | | X |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | | |
| 8 | **Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | 8 | | | |
| 9 | **Sponsoring organizations maintaining donor advised funds.** | | | | |
| a | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | | |
| 10 | **Section 501(c)(7) organizations.** Enter: | | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | | | |
| 11 | **Section 501(c)(12) organizations.** Enter: | | | | |
| a | Gross income from members or shareholders | 11a | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | 11b | | | |
| 12a | **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041? | 12a | | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | | | |
| 13 | **Section 501(c)(29) qualified nonprofit health insurance issuers.** | | | | |
| a | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | | |
| | **Note.** See the instructions for additional information the organization must report on Schedule O. | | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | 13b | | | |
| c | Enter the amount of reserves on hand | 13c | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | | X |
| b | If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* | 14b | | | |
| 15 | Is the organization 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? | 15 | | | X |
| | If "Yes," see instructions and file Form 4720, Schedule N. | | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | 16 | | | X |
| | If "Yes," complete Form 4720, Schedule O. | | | | |

**Part VI Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI ..... X

## Section A. Governing Body and Management

| | | | | Yes | No |
|---|---|---|---|---|---|
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 1a | 11 | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | 1b | 11 | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | | X |
| 6 | Did the organization have members or stockholders? | 6 | | | X |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | | | X |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | |
| a | The governing body? | 8a | | X | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* | 9 | | | X |

## Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

| | | | Yes | No |
|---|---|---|---|---|
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | X |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | X | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a | Did the organization have a written conflict of interest policy? *If "No," go to line 13* | 12a | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | X | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* | 12c | X | |
| 13 | Did the organization have a written whistleblower policy? | 13 | X | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | X | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| a | The organization's CEO, Executive Director, or top management official | 15a | | X |
| b | Other officers or key employees of the organization | 15b | | X |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | | |

## Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

THE ORGANIZATION - 540-635-7171
600 4-H CENTER DRIVE, FRONT ROYAL, VA 22630

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

Check if Schedule O contains a response or note to any line in this Part VII ☐

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) TOBIN SMITH<br>PRESIDENT | 3.00 | X | | X | | | | 0. | 0. | 0. |
| (2) ANN MARLOW<br>SECRETARY | 1.00 | X | | X | | | | 0. | 0. | 0. |
| (3) KACI DANIEL<br>DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (4) ALYSSA WALDEN<br>DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (5) JENNIFER MONTGOMERY<br>DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (6) JOHN W. MCCARTHY<br>VICE PRESIDENT | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (7) LAURA GALANTE<br>DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (8) KIM MONROE<br>DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (9) JAY ROBINSON<br>DIRECTOR | 3.00 | X | | | | | | 0. | 0. | 0. |
| (10) TAMMY HENRY<br>DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (11) STEPHEN JEROME<br>DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 1b Sub-total ▶ | | | | | | | | 0. | 0. | 0. |
| c Total from continuation sheets to Part VII, Section A ▶ | | | | | | | | 0. | 0. | 0. |
| d Total (add lines 1b and 1c) ▶ | | | | | | | | 0. | 0. | 0. |

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 0

| | | Yes | No |
|---|---|---|---|
| 3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual* | 3 | | X |
| 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual* | 4 | | X |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person* | 5 | | X |

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|---|---|
| NONE | | |
| | | |
| | | |
| | | |
| | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII ☐

| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
|---|---|---|---|---|---|---|---|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a Federated campaigns | 1a | | | | | |
| | b Membership dues | 1b | | | | | |
| | c Fundraising events | 1c | | | | | |
| | d Related organizations | 1d | | | | | |
| | e Government grants (contributions) | 1e | 39,922. | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f | 133,988. | | | | |
| | g Noncash contributions included in lines 1a-1f: $ 2,134. | | | | | | |
| | h Total. Add lines 1a-1f ▶ | | | 173,910. | | | |
| Program Service Revenue | | Business Code | | | | | |
| | 2a 4-H CAMP FEES | 900099 | | 635,491. | 635,491. | | |
| | b CONFERENCE FEES | 721000 | | 457,384. | 457,384. | | |
| | c POOL FEES | 900099 | | 6,940. | 6,940. | | |
| | d RENTAL INCOME | 900099 | | 285. | 285. | | |
| | e | | | | | | |
| | f All other program service revenue | | | | | | |
| | g Total. Add lines 2a-2f ▶ | | | 1,100,100. | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) ▶ | | | 1,043. | | | 1,043. |
| | 4 Income from investment of tax-exempt bond proceeds ▶ | | | | | | |
| | 5 Royalties ▶ | | | | | | |
| | | (i) Real | (ii) Personal | | | | |
| | 6a Gross rents | | | | | | |
| | b Less: rental expenses | | | | | | |
| | c Rental income or (loss) | | | | | | |
| | d Net rental income or (loss) ▶ | | | | | | |
| | | (i) Securities | (ii) Other | | | | |
| | 7a Gross amount from sales of assets other than inventory | | | | | | |
| | b Less: cost or other basis and sales expenses | | | | | | |
| | c Gain or (loss) | | | | | | |
| | d Net gain or (loss) ▶ | | | | | | |
| | 8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 | a | 0. | | | | |
| | b Less: direct expenses | b | 922. | | | | |
| | c Net income or (loss) from fundraising events ▶ | | | -922. | | | -922. |
| | 9a Gross income from gaming activities. See Part IV, line 19 | a | | | | | |
| | b Less: direct expenses | b | | | | | |
| | c Net income or (loss) from gaming activities ▶ | | | | | | |
| | 10a Gross sales of inventory, less returns and allowances | a | | | | | |
| | b Less: cost of goods sold | b | | | | | |
| | c Net income or (loss) from sales of inventory ▶ | | | | | | |
| | Miscellaneous Revenue | Business Code | | | | | |
| | 11a OTHER INCOME | 900099 | | 14,763. | 14,763. | | |
| | b | | | | | | |
| | c | | | | | | |
| | d All other revenue | | | | | | |
| | e Total. Add lines 11a-11d ▶ | | | 14,763. | | | |
| | 12 Total revenue. See instructions ▶ | | | 1,288,894. | 1,114,863. | 0. | 121. |

## Part IX Statement of Functional Expenses

*Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).*

Check if Schedule O contains a response or note to any line in this Part IX ☐

| *Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.* | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|---|---|---|---|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | | | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | | | | |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | 456,085. | 376,370. | 77,485. | 2,230. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 Other employee benefits | 28,673. | 17,364. | 10,828. | 481. |
| 10 Payroll taxes | 34,669. | 29,652. | 4,908. | 109. |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | | | | |
| c Accounting | 8,000. | 1,206. | 6,794. | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) | 3,700. | 558. | 3,142. | |
| 12 Advertising and promotion | | | | |
| 13 Office expenses | | | | |
| 14 Information technology | | | | |
| 15 Royalties | | | | |
| 16 Occupancy | 233,032. | 195,747. | 37,285. | |
| 17 Travel | | | | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | | | | |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 198,550. | 190,608. | 7,942. | |
| 23 Insurance | 44,321. | 38,241. | 5,966. | 114. |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a PROGRAM SUPPLIES | 201,101. | 201,101. | | |
| b REPAIRS AND MAINTENANCE | 164,075. | 161,582. | 2,493. | |
| c OTHER COSTS | 50,276. | 42,407. | 7,550. | 319. |
| d CONTRACT LABOR | 33,928. | 33,928. | | |
| e All other expenses | | | | |
| 25 Total functional expenses. Add lines 1 through 24e | 1,456,410. | 1,288,764. | 164,393. | 3,253. |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) | | | | |

**Part X Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X ☐

| | | | | (A) Beginning of year | | (B) End of year |
|---|---|---|---|---|---|---|
| Assets | 1 | Cash - non-interest-bearing | | 126,401. | 1 | 225,415. |
| | 2 | Savings and temporary cash investments | | 120,410. | 2 | 83,367. |
| | 3 | Pledges and grants receivable, net | | | 3 | 34,065. |
| | 4 | Accounts receivable, net | | 3,034. | 4 | 12,394. |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L | | | 6 | |
| | 7 | Notes and loans receivable, net | | | 7 | |
| | 8 | Inventories for sale or use | | 20,911. | 8 | 14,232. |
| | 9 | Prepaid expenses and deferred charges | | 12,204. | 9 | 7,831. |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 9,313,367. | | | |
| | b | Less: accumulated depreciation | 10b 7,377,409. | 2,017,343. | 10c | 1,935,958. |
| | 11 | Investments - publicly traded securities | | | 11 | |
| | 12 | Investments - other securities. See Part IV, line 11 | | | 12 | |
| | 13 | Investments - program-related. See Part IV, line 11 | | | 13 | |
| | 14 | Intangible assets | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | 7,371. | 15 | 7,371. |
| | 16 | **Total assets.** Add lines 1 through 15 (must equal line 34) | | 2,307,674. | 16 | 2,320,633. |
| Liabilities | 17 | Accounts payable and accrued expenses | | 70,771. | 17 | 149,264. |
| | 18 | Grants payable | | | 18 | |
| | 19 | Deferred revenue | | 1,247. | 19 | 13,624. |
| | 20 | Tax-exempt bond liabilities | | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | | 21 | |
| | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 395. | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | | 0. | 25 | 90,000. |
| | 26 | **Total liabilities.** Add lines 17 through 25 | | 72,413. | 26 | 252,888. |
| Net Assets or Fund Balances | | **Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.** | | | | |
| | 27 | Unrestricted net assets | | 1,976,500. | 27 | 1,776,899. |
| | 28 | Temporarily restricted net assets | | 29,761. | 28 | 61,846. |
| | 29 | Permanently restricted net assets | | 229,000. | 29 | 229,000. |
| | | **Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.** | | | | |
| | 30 | Capital stock or trust principal, or current funds | | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | | 32 | |
| | 33 | Total net assets or fund balances | | 2,235,261. | 33 | 2,067,745. |
| | 34 | Total liabilities and net assets/fund balances | | 2,307,674. | 34 | 2,320,633. |

## Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI ☐

| | | | |
|---|---|---|---|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 1,288,894. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 1,456,410. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -167,516. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 2,235,261. |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 2,067,745. |

## Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☒

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| b | Were the organization's financial statements audited by an independent accountant? | 2b | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | 2c | X | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a | | X |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | 3b | | |

**SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

# Public Charity Status and Public Support

**Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.**

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

**2018**

**Open to Public Inspection**

| Name of the organization | Employer identification number |
|---|---|
| NORTHERN VIRGINIA 4-H EDUCATIONAL AND CONFERENCE CENTER INC | **-***5176 |

## Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____

10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations .....

g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) Is the organization listed in your governing document? Yes | (iv) No | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Total | | | | | | |

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

## Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 180,797. | 173,461. | 173,974. | 148,974. | 173,910. | 851,116. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | 30,000. | 30,000. | 30,000. | | | 90,000. |
| 4 **Total.** Add lines 1 through 3 | 210,797. | 203,461. | 203,974. | 148,974. | 173,910. | 941,116. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 **Public support.** Subtract line 5 from line 4. | | | | | | 941,116. |

## Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 7 Amounts from line 4 | 210,797. | 203,461. | 203,974. | 148,974. | 173,910. | 941,116. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 5,462. | 3,140. | 2,622. | 2,168. | 1,043. | 14,435. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | 15,958. | 14,763. | 30,721. |
| 11 **Total support.** Add lines 7 through 10 | | | | | | 986,272. |

12 Gross receipts from related activities, etc. (see instructions) ..... 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ..... ▶ ☐

## Section C. Computation of Public Support Percentage

| | | |
|---|---|---|
| 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) ..... | 14 | 95.42 % |
| 15 Public support percentage from 2017 Schedule A, Part II, line 14 ..... | 15 | 96.53 % |

16a **33 1/3% support test - 2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ..... ▶ ☒

b **33 1/3% support test - 2017.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ..... ▶ ☐

17a **10% -facts-and-circumstances test - 2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ..... ▶ ☐

b **10% -facts-and-circumstances test - 2017.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ..... ▶ ☐

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

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

## Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 **Total.** Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 **Public support.** (Subtract line 7c from line 6.) | | | | | | |

## Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
|---|---|---|---|---|---|---|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 **Total support.** (Add lines 9, 10c, 11, and 12.) | | | | | | |

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

## Section C. Computation of Public Support Percentage

| | | |
|---|---|---|
| 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2017 Schedule A, Part III, line 15 | 16 | % |

## Section D. Computation of Investment Income Percentage

| | | |
|---|---|---|
| 17 Investment income percentage for **2018** (line 10c, column (f), divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from **2017** Schedule A, Part III, line 17 | 18 | % |

19a **33 1/3% support tests - 2018.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.* | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).* | 2 | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.* | 3a | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination.* | 3b | | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* **Part VI** *what controls the organization put in place to ensure such use.* | 3c | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.* | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.* | 4b | | |
| c | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.* | 4c | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in* **Part VI,** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).* | 5a | | |
| b | **Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | | |
| c | **Substitutions only.** Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.** | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).* | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).* | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.** | 9a | | |
| b | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.** | 9b | | |
| c | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.** | 9c | | |
| 10a | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.* | 10a | | |
| b | Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)* | 10b | | |

**Part IV Supporting Organizations** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| a | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described in (a) above? | 11b | | |
| c | A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* **Part VI.** | 11c | | |

**Section B. Type I Supporting Organizations**

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* **Part VI** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.* | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* **Part VI** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.* | 2 | | |

**Section C. Type II Supporting Organizations**

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).* | 1 | | |

**Section D. All Type III Supporting Organizations**

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).* | 2 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.* | 3 | | |

**Section E. Type III Functionally Integrated Supporting Organizations**

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea***(see instructions).**

a ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a government entity (see instructions).*

| | | | Yes | No |
|---|---|---|---|---|
| 2 | Activities Test. **Answer (a) and (b) below.** | | | |
| a | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.* | 2a | | |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* **Part VI** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.* | 2b | | |
| 3 | Parent of Supported Organizations. **Answer (a) and (b) below.** | | | |
| a | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* **Part VI.** | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.* | 3b | | |

**Part V** **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| **Section A - Adjusted Net Income** | | (A) Prior Year | (B) Current Year (optional) |
|---|---|---|---|
| 1 Net short-term capital gain | 1 | | |
| 2 Recoveries of prior-year distributions | 2 | | |
| 3 Other gross income (see instructions) | 3 | | |
| 4 Add lines 1 through 3 | 4 | | |
| 5 Depreciation and depletion | 5 | | |
| 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 Other expenses (see instructions) | 7 | | |
| 8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4) | 8 | | |

| **Section B - Minimum Asset Amount** | | (A) Prior Year | (B) Current Year (optional) |
|---|---|---|---|
| 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | | |
| a Average monthly value of securities | 1a | | |
| b Average monthly cash balances | 1b | | |
| c Fair market value of other non-exempt-use assets | 1c | | |
| d **Total** (add lines 1a, 1b, and 1c) | 1d | | |
| e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**): | | | |
| 2 Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 Subtract line 2 from line 1d | 3 | | |
| 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | | |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 Multiply line 5 by .035 | 6 | | |
| 7 Recoveries of prior-year distributions | 7 | | |
| 8 **Minimum Asset Amount** (add line 7 to line 6) | 8 | | |

| **Section C - Distributable Amount** | | | Current Year |
|---|---|---|---|
| 1 Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| 2 Enter 85% of line 1 | 2 | | |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | |
| 4 Enter greater of line 2 or line 3 | 4 | | |
| 5 Income tax imposed in prior year | 5 | | |
| 6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | 6 | | |

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

| Section D - Distributions | | Current Year |
|---|---|---|
| 1 | Amounts paid to supported organizations to accomplish exempt purposes | |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | |
| 4 | Amounts paid to acquire exempt-use assets | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | |
| 6 | Other distributions (describe in **Part VI**). See instructions. | |
| 7 | **Total annual distributions.** Add lines 1 through 6. | |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions. | |
| 9 | Distributable amount for 2018 from Section C, line 6 | |
| 10 | Line 8 amount divided by line 9 amount | |

| Section E - Distribution Allocations (see instructions) | | (i) Excess Distributions | (ii) Underdistributions Pre-2018 | (iii) Distributable Amount for 2018 |
|---|---|---|---|---|
| 1 | Distributable amount for 2018 from Section C, line 6 | | | |
| 2 | Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in **Part VI**). See instructions. | | | |
| 3 | Excess distributions carryover, if any, to 2018 | | | |
| a | From 2013 | | | |
| b | From 2014 | | | |
| c | From 2015 | | | |
| d | From 2016 | | | |
| e | From 2017 | | | |
| f | **Total** of lines 3a through e | | | |
| g | Applied to underdistributions of prior years | | | |
| h | Applied to 2018 distributable amount | | | |
| i | Carryover from 2013 not applied (see instructions) | | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| 4 | Distributions for 2018 from Section D, line 7: $ | | | |
| a | Applied to underdistributions of prior years | | | |
| b | Applied to 2018 distributable amount | | | |
| c | Remainder. Subtract lines 4a and 4b from 4. | | | |
| 5 | Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in **Part VI**. See instructions. | | | |
| 6 | Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in **Part VI**. See instructions. | | | |
| 7 | **Excess distributions carryover to 2019.** Add lines 3j and 4c. | | | |
| 8 | Breakdown of line 7: | | | |
| a | Excess from 2014 | | | |
| b | Excess from 2015 | | | |
| c | Excess from 2016 | | | |
| d | Excess from 2017 | | | |
| e | Excess from 2018 | | | |

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

# Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

# Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

**2018**

Name of the organization
NORTHERN VIRGINIA 4-H EDUCATIONAL AND CONFERENCE CENTER INC

Employer identification number
**-***5176

**Organization type** (check one):

| Filers of: | Section: |
|---|---|
| Form 990 or 990-EZ | [X] 501(c)( 3 ) (enter number) organization |
| | [ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation |
| | [ ] 527 political organization |
| Form 990-PF | [ ] 501(c)(3) exempt private foundation |
| | [ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | [ ] 501(c)(3) taxable private foundation |

Check if your organization is covered by the **General Rule** or a **Special Rule.**
**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year ..... ▶ $ _____

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
NORTHERN VIRGINIA 4-H EDUCATIONAL AND CONFERENCE CENTER INC

Employer identification number
**-***5176

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|---|---|---|---|
| 1 | COUNTY OF FAUQUIER<br>320 HOSPITAL DRIVE, SUITE 24<br>WARRENTON, VA 20186 | $ 6,172. | Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.) |
| 2 | COUNTY OF FAIRFAX, DEPT. OF MGMT & BUDGET<br>12000 GOVERNMENT CENTER PARKWAY, SUITE 561<br>FAIRFAX, VA 22035 | $ 15,000. | Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.) |
| 3 | LAURA GALANTE<br>11450 SENECA VIEW WAY<br>GREAT FALLS, VA 22066 | $ 5,950. | Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.) |
| 4 | LANTZ CONSTRUCTION CO. OF WINCHESTER<br>221 AVIATION DRIVE<br>WINCHESTER, VA 22602 | $ 5,000. | Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.) |
| | | $ | Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.) |
| | | $ | Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.) |

Name of organization: NORTHERN VIRGINIA 4-H EDUCATIONAL AND CONFERENCE CENTER INC

Employer identification number: **-***5176

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---|---|---|---|
| | | $ | |

Name of organization
NORTHERN VIRGINIA 4-H EDUCATIONAL AND CONFERENCE CENTER INC

Employer identification number
**-***5176

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|---|---|
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|---|---|
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|---|---|
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|---|---|
| | |

**SCHEDULE D** (Form 990)

Department of the Treasury
Internal Revenue Service

# Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**2018**

Open to Public Inspection

Name of the organization: NORTHERN VIRGINIA 4-H EDUCATIONAL AND CONFERENCE CENTER INC

Employer identification number: **-***5176

## Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

| | (a) Donor advised funds | (b) Funds and other accounts |
|---|---|---|
| 1 Total number at end of year | | |
| 2 Aggregate value of contributions to (during year) | | |
| 3 Aggregate value of grants from (during year) | | |
| 4 Aggregate value at end of year | | |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

## Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (e.g., recreation or education)
- ☐ Protection of natural habitat
- ☐ Preservation of open space
- ☐ Preservation of a historically important land area
- ☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | Held at the End of the Tax Year |
|---|---|
| 2a Total number of conservation easements | |
| 2b Total acreage restricted by conservation easements | |
| 2c Number of conservation easements on a certified historic structure included in (a) | |
| 2d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register | |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

## Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

| | | Amount |
|---|---|---|
| c Beginning balance | 1c | |
| d Additions during the year | 1d | |
| e Distributions during the year | 1e | |
| f Ending balance | 1f | |

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|---|---|---|---|---|
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Temporarily restricted endowment ▶ _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

| | | Yes | No |
|---|---|---|---|
| (i) unrelated organizations | 3a(i) | | |
| (ii) related organizations | 3a(ii) | | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | | |

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|---|---|---|---|
| 1a Land | | 229,000. | | 229,000. |
| b Buildings | | 8,255,934. | 6,704,933. | 1,551,001. |
| c Leasehold improvements | | | | |
| d Equipment | | 611,063. | 485,711. | 125,352. |
| e Other | | 217,370. | 186,765. | 30,605. |
| Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶ | | | | 1,935,958. |

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|---|---|
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other | | |
| (A) | | |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ | | |

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|---|---|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ | | |

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|---|
| (1) | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶ | |

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1. (a) Description of liability | (b) Book value |
|---|---|
| (1) Federal income taxes | |
| (2) SECURED NOTE PAYABLE TO VIRGINIA | |
| (3) TECH FOUNDATION | 90,000. |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶ | 90,000. |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

## Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | | | |
|---|---|---|---|---|---|
| 1 | Total revenue, gains, and other support per audited financial statements | | | 1 | 1,404,904. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | | |
| a | Net unrealized gains (losses) on investments | 2a | | | |
| b | Donated services and use of facilities | 2b | 116,010. | | |
| c | Recoveries of prior year grants | 2c | | | |
| d | Other (Describe in Part XIII.) | 2d | | | |
| e | Add lines 2a through 2d | | | 2e | 116,010. |
| 3 | Subtract line 2e from line 1 | | | 3 | 1,288,894. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIII.) | 4b | | | |
| c | Add lines 4a and 4b | | | 4c | 0. |
| 5 | Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)* | | | 5 | 1,288,894. |

## Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | | | |
|---|---|---|---|---|---|
| 1 | Total expenses and losses per audited financial statements | | | 1 | 1,572,420. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | | |
| a | Donated services and use of facilities | 2a | 116,010. | | |
| b | Prior year adjustments | 2b | | | |
| c | Other losses | 2c | | | |
| d | Other (Describe in Part XIII.) | 2d | | | |
| e | Add lines 2a through 2d | | | 2e | 116,010. |
| 3 | Subtract line 2e from line 1 | | | 3 | 1,456,410. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIII.) | 4b | | | |
| c | Add lines 4a and 4b | | | 4c | 0. |
| 5 | Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)* | | | 5 | 1,456,410. |

## Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

FORM 990, SCHEDULE D, PART XI LINE 2B AND PART XII LINE 2A

THE CENTER HAS AN ADMINISTRATIVE AGREEMENT WITH THE COOPERATIVE EXTENSION SERVICE OF VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY. THE EXTENSION PROVIDED IN-KIND SALARIES, WAGES AND BENEFITS OF $54,579 AND IN-KIND CONSULTANT FEES OF $61,431.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information to Form 990 990-EZ**

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

**2018**

Open to Public Inspection

Name of the organization: NORTHERN VIRGINIA 4-H EDUCATIONAL AND CONFERENCE CENTER INC

Employer identification number: **-***5176

FORM 990, PART VI, SECTION B, LINE 11B:

A COPY OF THE FORM 990 IS PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL BEFORE FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

PERSONS COVERED BY THE CONFLICT OF INTEREST POLICY WILL ANNUALLY DISCLOSE OR UPDATE TO THE PRESIDENT OF THE BOARD OF DIRECTORS THEIR INTERESTS THAT COULD GIVE RISE TO CONFLICTS OF INTEREST. FOR EACH INTEREST DISCLOSED THE PRESIDENT WILL DETERMINE WHAT ACTION NEEDS TO BE TAKEN.

FORM 990, PART VI, SECTION C, LINE 19:

THE CENTER MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE CENTER HAS NOT CHANGED ITS OVERSIGHT PROCESS OF THE AUDIT OF ITS FINANCIAL STATEMENTS OR SELECTION OF AN INDEPENDENT ACCOUNTANT DURING THE TAX YEAR.

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: MAR 05 2013

NORTHERN VIRGINIA 4-H EDUCATIONAL
AND CONFERENCE CENTER INC
600 4-H CENTER DR
FRONT ROYAL, VA 22630

Employer Identification Number:
54-1035176
DLN:
17053139317022
Contact Person:
MICHELLE A GLUTZ ID# 31213
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
509(a)(2)
Form 990 Required:
Yes
Effective Date of Exemption:
May 15, 2012
Contribution Deductibility:
Yes
Addendum Applies:
Yes

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

NORTHERN VIRGINIA 4-H EDUCATIONAL

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

Holly O. Paz

Holly O. Paz
Director, Exempt Organizations
Rulings and Agreements

Enclosure: Publication 4221-PC

NORTHERN VIRGINIA 4-H EDUCATIONAL

Our records show that you were previously tax-exempt as a subordinate under group exemption number 2704. Because you applied for and have been granted your own individual tax-exempt status, you no longer rely on your affiliation with a parent organization for recognition of your tax-exemption and will be listed individually in the Exempt Organizations Select Check (Pub. 78 data).

If, in the future, you choose to become a subordinate under a group ruling, you will lose your individual recognition of tax-exempt status and will no longer appear in the Exempt Organizations Select Check (Pub. 78 data). Moreover, if you become a subordinate under a group ruling and your parent organization loses its tax-exempt status, you also will lose your exempt status. To reestablish your individual tax-exemption after rejoining a group exemption, you will be required to reapply and pay the appropriate user fee.

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE: January 13, 2020**

| IDENTIFICATION | |
|---|---|
| *Organization/Agency Name:* | Legal Aid Works® |
| *Street Name:* | 500 Lafayette Blvd., Suite 100 |
| *Mailing Address:* | Fredericksburg, VA 22401 |
| *Agency Contact:* | Ann H. Kloeckner, Esq. |
| *Telephone Number:* | 540-371-1105 EXT. 116 |
| *E-mail Address – Agency Contact* | akloeckner@legalaidworks.org |
| *Agency's Web Address:* | www.legalaidworks.org |
| *Federal Tax ID#:* | 23-7362601 |
| *Audit:* | ☒Yes ☐No |

| PURPOSE/NARRATIVE |
|---|
| *Missions and Goals:* We champion fairness by advocating for those with the least access to the civil court system. We provide free, high-quality legal services for indigent clients who have civil legal issues. Our main goal is to ensure that domestic violence victims and those at risk of homelessness receive the help they need to be safe and stay in their homes. |
| *Experience and Accomplishments:* Our office in Culpeper has been serving the citizens of Madison County since 1980. Currently, two attorneys are the only resource for poor persons struggling to find equal access to justice in the civil legal system. According to the 2010 Census, there are 2,071 citizens of Madison County who qualify for our services. In FY 2019, we served 15 clients in Madison County courts. |

| |
|---|
| *Benefits of Funding:* When Madison County funds Legal Aid Works®, they are ensuring several important benefits for the community. When Legal Aid Works® represents a client, the court system runs more smoothly instead of having to take time to deal with a confused person handling a case on her own. We help reduce the strain on Madison County's social services budget by putting dollars back into the pockets of our clients through court awards for child and spousal support and unemployment benefits that had been unlawfully denied. And we provide a service that no other agency provides. We help get protective orders for abuse victims, and keep tenants and homeowners in their homes. And we make sure that workers get the unemployment benefits they are entitled to receive. |
| *Intention of Use:* We will use this support to continue the work of our Culpeper office which provides legal services to the poor citizens of Madison County in the critical areas of domestic violence, family law, housing and public benefits. |

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>☒ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 2,000 |

Signature: Ann H. Kloeckner Title: Executive Director

Printed Name: Ann H. Kloeckner, Esq. Date: 1/8/2020

**LEGAL AID WORKS® BOARD OF DIRECTORS**
**TENURE**

| NUMBER | NAME | MAIL AND EMAIL ADDRESS | PHONE AND FAX | TERM | SERVICE AREA/ NOMINATING AGENCY | TITLE/DUTIES |
|---|---|---|---|---|---|---|
| 1 | Teresa L. Pagliaro, Esq. | Woehrle Dahlberg Jones Yao PLLC<br>2016 Lafayette Boulevard, Suite 101, Fredericksburg VA 22401<br>teresa@lawfirmvirginia.com | (540) 898-8881<br>FAX (540) 898-0755 | 1/1/19 – 12/31/21<br>Since 8/1/2018 | | Board Member |
| 2 | Jeannie P. Dahnk, Esq. | Law Office of Jeannie P. Dahnk, Esq.<br>P.O. Box 207<br>Fredericksburg, VA 22404-0207<br>jpd@gloveranddahnk.com | (540) 373-8600<br>FAX (540) 373-8629 | 1/1/18 – 12/31/20<br>Since 10/28/09 | Fredericksburg/FABA | *President,* Executive, Audit , Fundraising and Search Committees , Ad Hoc Investment Policy Committee |
| 3 | Stacie C. Bordick, Esq. | Hirschler Fleischer<br>725 Jackson Street, Suite 200<br>Fredericksburg, VA 22401-5720<br>sbordick@hf-law.com | (540) 604-2115<br>FAX (540) 604-2101 | 1/1/19 – 12/31/21<br>Since December 2015 | | Board Member; Governance and Nominations Committee |
| 4 | Sara Branner | Co-Owner of SaraGray Designs<br>810 Sunken Road, Fredericksburg, VA 22401<br>sbranner.sb@gmail.com | (540) 760-5976 Cell | 1/1/17 – 12/31/19<br>Since 2/1/2017 | | Board Member, Salary and Benefits Committee chair; Governance and Nominations Committee |
| 5 | Steve Cameli | Co-Owner of Sunken Well Tavern<br>2008 Elmhurst Ave<br>Fredericksburg VA<br>22401<br>stevecameli@gmail.com | | 1/1/17 – 12/31/19<br>Since 8/1/2018 | | Board Member |

| | | | | | | |
|---|---|---|---|---|---|---|
| 6 | Elizabeth "Libby" Humphries, Esq. | 209 Ferdinand Street, Fredericksburg, VA 22401<br><br>Elizabeth.k.humphries@gmail.com<br><br>ekhumphries@fredericksburgva.gov | 434.249.7420 Cell<br>540.371.7181 Home Phone<br>540.372.1040, Ext 316 Work | 1/1/19-12/31/21 (START 6/5/2019) | | Board Member |
| 7 | David M. Williams, Jr., Esq. | Allen Allen Allen & Allen<br>50 Dunn Drive, Suite 105, Stafford, VA 22556<br>David.Williams@AllenandAllen.com | (540) 786-4100<br>FAX (540) 785-5246 | 1/1/17-12/31/19 | | Board Member, Audit Committee |
| 8 | Colleen Jordan | P.O. Box 1734<br>Warsaw, VA 22572-1734<br>colleen.jordan@havenshelter.org | (804) 333-1099<br>FAX (804) 333-1150 | 1/1/18 - 12/31/20<br>Since 10/2003 | Tappahannock/Haven Shelter and Services, Inc. | Board Member; Governance and Nominations Committee |
| 9 | VACANT | | | 1/1/18-12/31/20 | | |
| 10 | Robin Lam | Audit Manager, PBMares<br>725 Jackson Street, Suite 210<br>Fredericksburg, VA 22401<br>rlam@pbmares.com | (540) 371-3566<br>FAX (540) 371-3598 | 1/1/18-12/31/20<br>Since 12/2014 | Fredericksburg Area | Board Member, *Treasurer*, Executive and Audit Committees |
| 11 | VACANT | | | 1/1/19-12/31/21 | | |
| 12 | Hall B. Cheshire | 9631 Edenton Road<br>Partlow, VA 22534<br>hall.cheshire@gmail.com | (c) 540-845-6420 | 1/1/17 – 12/31/19<br>Since 6/15 | | Board Member, Strategic Planning Committee Chair |
| 13 | Joel W. Young, Esq. | Reinhardt \| Harper \| Davis, PLC<br>600 Westwood Office Park<br>Fredericksburg, VA 22401<br>joelwyoung@aol.com<br>Joel@vacomplaw.com | (540) 371-4444<br>FAX (540) 368-1025 | 1/1/18-12/31/20 | Fredericksburg Area | Board Member; *Vice President*; Executive Committee; J4J Committee Chair; Investment Ad Hoc Committee |

| | | | | | | |
|---|---|---|---|---|---|---|
| **14** | **Sara S. Josey, Esq.** | **Kurylo, Gold & Josey, PLC<br>910 Littlepage Street, Suite A<br>Fredericksburg, VA 22401<br>sara.josey@law-va.com** | **540-656-2210<br>FAX 888-415-5743** | **1/1/17-12/31/19<br>Since 10/15** | **Fredericksburg Area** | **Board Member , Fundraising Committee** |
| **15** | **Shelia J. Weimer, Esq.** | **Senior Assistant County Attorney<br>Culpeper County Attorney's Office<br>306 N. Main Street<br>Culpeper, VA 22701<br>SWeimer@culpeperhumanservices.org** | **Home Cell: 304-887-2729<br>Work: 540-727-0372, Ext. 372,<br>Work Cell: 540-219-6808** | **1/1/19-12/31/21<br>Since 10/2016** | | **Board Member, Strategic Planning Committee** |

**As of 12/4/2019**

IRS Department of the Treasury
Internal Revenue Service
P.O. Box 2508, Room 4010
Cincinnati OH 45201

In reply refer to: 4051094588
Nov. 14, 2016 LTR 4168C 0
23-7362601 000000 00
00021310
BODC: TE

LEGAL AID WORKS
500 LAFAYETTE BLVD STE 100
FREDERICKSBRG VA 22401-6070

015733

Employer ID Number: 23-7362601
Form 990 required: Yes

Dear Taxpayer:

This is in response to your request dated Oct. 13, 2016, regarding your tax-exempt status.

We issued you a determination letter in April 1974, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

Our records also indicate you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If a return is required, you must file Form 990, 990-EZ, 990-N, or 990-PF by the 15th day of the fifth month after the end of your annual accounting period. IRC Section 6033(j) provides that, if you don't file a required annual information return or notice for three consecutive years, your exempt status will be automatically revoked on the filing due date of the third required return or notice.

For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).

If you have questions, call 1-877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific Time).

IRS Department of the Treasury
Internal Revenue Service
P.O. Box 2508, Room 4010
Cincinnati OH 45201

015733.559210.147954.30254 1 MB 0.419 536

LEGAL AID WORKS
500 LAFAYETTE BLVD STE 100
FREDERICKSBRG VA 22401-6070

015733

CUT OUT AND RETURN THE VOUCHER AT THE BOTTOM OF THIS PAGE IF YOU ARE MAKING A PAYMENT, EVEN IF YOU ALSO HAVE AN INQUIRY.

The IRS address must appear in the window.

4051094588

BODCD-TE

Use for payments

Letter Number: LTR4168C
Letter Date : 2016-11-14
Tax Period : 000000

*237362601*

LEGAL AID WORKS
500 LAFAYETTE BLVD STE 100
FREDERICKSBRG VA 22401-6070

INTERNAL REVENUE SERVICE
P.O. Box 2508, Room 4010
Cincinnati OH 45201

237362601 0C RAPP 00 2 000000 670 00000000000

**Poverty Guidelines, all states (except Alaska and Hawaii)** **2019 Annual**

| Household /Family Size | 50% | *100%* | 125% | 130% | 133% | 135% | 138% | 150% | 175% | 185% | 200% | 250% | 300% | 400% |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 6,245 | $12,490 | 15,613 | 16,237 | 16,612 | 16,862 | 17,236 | 18,735 | 21,858 | 23,107 | 24,980 | 31,225 | 37,470 | 49,960 |
| 2 | 8,455 | $16,910 | 21,138 | 21,983 | 22,490 | 22,829 | 23,336 | 25,365 | 29,593 | 31,284 | 33,820 | 42,275 | 50,730 | 67,640 |
| 3 | 10,665 | $21,330 | 26,663 | 27,729 | 28,369 | 28,796 | 29,435 | 31,995 | 37,328 | 39,461 | 42,660 | 53,325 | 63,990 | 85,320 |
| 4 | 12,875 | $25,750 | 32,188 | 33,475 | 34,248 | 34,763 | 35,535 | 38,625 | 45,063 | 47,638 | 51,500 | 64,375 | 77,250 | 103,000 |
| 5 | 15,085 | $30,170 | 37,713 | 39,221 | 40,126 | 40,730 | 41,635 | 45,255 | 52,798 | 55,815 | 60,340 | 75,425 | 90,510 | 120,680 |
| 6 | 17,295 | $34,590 | 43,238 | 44,967 | 46,005 | 46,697 | 47,734 | 51,885 | 60,533 | 63,992 | 69,180 | 86,475 | 103,770 | 138,360 |
| 7 | 19,505 | $39,010 | 48,763 | 50,713 | 51,883 | 52,664 | 53,834 | 58,515 | 68,268 | 72,169 | 78,020 | 97,525 | 117,030 | 156,040 |
| 8 | 21,715 | $43,430 | 54,288 | 56,459 | 57,762 | 58,631 | 59,933 | 65,145 | 76,003 | 80,346 | 86,860 | 108,575 | 130,290 | 173,720 |
| 9 | 23,925 | $47,850 | 59,813 | 62,205 | 63,641 | 64,598 | 66,033 | 71,775 | 83,738 | 88,523 | 95,700 | 119,625 | 143,550 | 191,400 |
| 10 | 26,135 | $52,270 | 65,338 | 67,951 | 69,519 | 70,565 | 72,133 | 78,405 | 91,473 | 96,700 | 104,540 | 130,675 | 156,810 | 209,080 |

**Poverty Guidelines, all states (except Alaska and Hawaii)** **2019 Monthly**

| Household /Family Size | 50% | *100%* | 125% | 130% | 133% | 135% | 138% | 150% | 175% | 185% | 200% | 250% | 300% | 400% |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 520 | $1,041 | 1,301 | 1,353 | 1,384 | 1,405 | 1,436 | 1,561 | 1,821 | 1,926 | 2,082 | 2,602 | 3,123 | 4,163 |
| 2 | 705 | $1,409 | 1,761 | 1,832 | 1,874 | 1,902 | 1,945 | 2,114 | 2,466 | 2,607 | 2,818 | 3,523 | 4,228 | 5,637 |
| 3 | 889 | $1,778 | 2,222 | 2,311 | 2,364 | 2,400 | 2,453 | 2,666 | 3,111 | 3,288 | 3,555 | 4,444 | 5,333 | 7,110 |
| 4 | 1,073 | $2,146 | 2,682 | 2,790 | 2,854 | 2,897 | 2,961 | 3,219 | 3,755 | 3,970 | 4,292 | 5,365 | 6,438 | 8,583 |
| 5 | 1,257 | $2,514 | 3,143 | 3,268 | 3,344 | 3,394 | 3,470 | 3,771 | 4,400 | 4,651 | 5,028 | 6,285 | 7,543 | 10,057 |
| 6 | 1,441 | $2,883 | 3,603 | 3,747 | 3,834 | 3,891 | 3,978 | 4,324 | 5,044 | 5,333 | 5,765 | 7,206 | 8,648 | 11,530 |
| 7 | 1,625 | $3,251 | 4,064 | 4,226 | 4,324 | 4,389 | 4,486 | 4,876 | 5,689 | 6,014 | 6,502 | 8,127 | 9,753 | 13,003 |
| 8 | 1,810 | $3,619 | 4,524 | 4,705 | 4,813 | 4,886 | 4,994 | 5,429 | 6,334 | 6,695 | 7,238 | 9,048 | 10,858 | 14,477 |
| 9 | 1,994 | $3,988 | 4,984 | 5,184 | 5,303 | 5,383 | 5,503 | 5,981 | 6,978 | 7,377 | 7,975 | 9,969 | 11,963 | 15,950 |
| 10 | 2,178 | $4,356 | 5,445 | 5,663 | 5,793 | 5,880 | 6,011 | 6,534 | 7,623 | 8,058 | 8,712 | 10,890 | 13,068 | 17,423 |

**Poverty Guidelines: Alaska** **2018 Annual**

| Household/ Family Size | 25% | 50% | 75% | 100% | 125% | 133% | 135% | 138% | 150% | 175% | 185% | 200% | 225% | 250% |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 3,900 | 3,900 | 7,800 | $15,600 | 19,500 | 20,748 | 21,060 | 21,528 | 23,400 | 27,300 | 28,860 | 31,200 | 35,100 | 39,000 |
| 2 | 5,283 | 5,283 | 10,565 | $21,130 | 26,413 | 28,103 | 28,526 | 29,159 | 31,695 | 36,978 | 39,091 | 42,260 | 47,543 | 52,825 |
| 3 | 6,665 | 6,665 | 13,330 | $26,660 | 33,325 | 35,458 | 35,991 | 36,791 | 39,990 | 46,655 | 49,321 | 53,320 | 59,985 | 66,650 |
| 4 | 8,048 | 8,048 | 16,095 | $32,190 | 40,238 | 42,813 | 43,457 | 44,422 | 48,285 | 56,333 | 59,552 | 64,380 | 72,428 | 80,475 |
| 5 | 9,430 | 9,430 | 18,860 | $37,720 | 47,150 | 50,168 | 50,922 | 52,054 | 56,580 | 66,010 | 69,782 | 75,440 | 84,870 | 94,300 |
| 6 | 10,813 | 10,813 | 21,625 | $43,250 | 54,063 | 57,523 | 58,388 | 59,685 | 64,875 | 75,688 | 80,013 | 86,500 | 97,313 | 108,125 |
| 7 | 12,195 | 12,195 | 24,390 | $48,780 | 60,975 | 64,877 | 65,853 | 67,316 | 73,170 | 85,365 | 90,243 | 97,560 | 109,755 | 121,950 |
| 8 | 13,578 | 13,578 | 27,155 | $54,310 | 67,888 | 72,232 | 73,319 | 74,948 | 81,465 | 95,043 | 100,474 | 108,620 | 122,198 | 135,775 |
| 9 | 14,960 | 14,960 | 29,920 | $59,840 | 74,800 | 79,587 | 80,784 | 82,579 | 89,760 | 104,720 | 110,704 | 119,680 | 134,640 | 149,600 |
| 10 | 16,343 | 16,343 | 32,685 | $65,370 | 81,713 | 86,942 | 88,250 | 90,211 | 98,055 | 114,398 | 120,935 | 130,740 | 147,083 | 163,425 |
| 11 | 17,725 | 17,725 | 35,450 | $70,900 | 88,625 | 94,297 | 95,715 | 97,842 | 106,350 | 124,075 | 131,165 | 141,800 | 159,525 | 177,250 |
| 12 | 19,108 | 19,108 | 38,215 | $76,430 | 95,538 | 101,652 | 103,181 | 105,473 | 114,645 | 133,753 | 141,396 | 152,860 | 171,968 | 191,075 |

**Poverty Guidelines: Alaska** **2018 Monthly**

| Household/ Family Size | 25% | 50% | 75% | 100% | 125% | 133% | 135% | 138% | 150% | 175% | 185% | 200% | 225% | 250% |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 325 | 325 | 650 | $1,300 | 1,625 | 1,729 | 1,755 | 1,794 | 1,950 | 2,275 | 2,405 | 2,600 | 2,925 | 3,250 |
| 2 | 440 | 440 | 880 | $1,761 | 2,201 | 2,342 | 2,377 | 2,430 | 2,641 | 3,081 | 3,258 | 3,522 | 3,962 | 4,402 |
| 3 | 555 | 555 | 1,111 | $2,222 | 2,777 | 2,955 | 2,999 | 3,066 | 3,333 | 3,888 | 4,110 | 4,443 | 4,999 | 5,554 |
| 4 | 671 | 671 | 1,341 | $2,683 | 3,353 | 3,568 | 3,621 | 3,702 | 4,024 | 4,694 | 4,963 | 5,365 | 6,036 | 6,706 |
| 5 | 786 | 786 | 1,572 | $3,143 | 3,929 | 4,181 | 4,244 | 4,338 | 4,715 | 5,501 | 5,815 | 6,287 | 7,073 | 7,858 |
| 6 | 901 | 901 | 1,802 | $3,604 | 4,505 | 4,794 | 4,866 | 4,974 | 5,406 | 6,307 | 6,668 | 7,208 | 8,109 | 9,010 |
| 7 | 1,016 | 1,016 | 2,033 | $4,065 | 5,081 | 5,406 | 5,488 | 5,610 | 6,098 | 7,114 | 7,520 | 8,130 | 9,146 | 10,163 |
| 8 | 1,131 | 1,131 | 2,263 | $4,526 | 5,657 | 6,019 | 6,110 | 6,246 | 6,789 | 7,920 | 8,373 | 9,052 | 10,183 | 11,315 |
| 9 | 1,247 | 1,247 | 2,493 | $4,987 | 6,233 | 6,632 | 6,732 | 6,882 | 7,480 | 8,727 | 9,225 | 9,973 | 11,220 | 12,467 |
| 10 | 1,362 | 1,362 | 2,724 | $5,448 | 6,809 | 7,245 | 7,354 | 7,518 | 8,171 | 9,533 | 10,078 | 10,895 | 12,257 | 13,619 |
| 11 | 1,477 | 1,477 | 2,954 | $5,908 | 7,385 | 7,858 | 7,976 | 8,154 | 8,863 | 10,340 | 10,930 | 11,817 | 13,294 | 14,771 |
| 12 | 1,592 | 1,592 | 3,185 | $6,369 | 7,961 | 8,471 | 8,598 | 8,789 | 9,554 | 11,146 | 11,783 | 12,738 | 14,331 | 15,923 |

## Poverty Guidelines: Hawaii — 2019 Annual

| Household /Family Size | 25% | 50% | 75% | 100% | 125% | 133% | 135% | 138% | 150% | 175% | 185% | 200% | 225% | 250% |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 3,595 | 7,190 | 10,785 | $14,380 | 17,975 | 19,125 | 19,413 | 19,844 | 21,570 | 25,165 | 26,603 | 28,760 | 32,355 | 35,950 |
| 2 | 4,865 | 9,730 | 14,595 | $19,460 | 24,325 | 25,882 | 26,271 | 26,855 | 29,190 | 34,055 | 36,001 | 38,920 | 43,785 | 48,650 |
| 3 | 6,135 | 12,270 | 18,405 | $24,540 | 30,675 | 32,638 | 33,129 | 33,865 | 36,810 | 42,945 | 45,399 | 49,080 | 55,215 | 61,350 |
| 4 | 7,405 | 14,810 | 22,215 | $29,620 | 37,025 | 39,395 | 39,987 | 40,876 | 44,430 | 51,835 | 54,797 | 59,240 | 66,645 | 74,050 |
| 5 | 8,675 | 17,350 | 26,025 | $34,700 | 43,375 | 46,151 | 46,845 | 47,886 | 52,050 | 60,725 | 64,195 | 69,400 | 78,075 | 86,750 |
| 6 | 9,945 | 19,890 | 29,835 | $39,780 | 49,725 | 52,907 | 53,703 | 54,896 | 59,670 | 69,615 | 73,593 | 79,560 | 89,505 | 99,450 |
| 7 | 11,215 | 22,430 | 33,645 | $44,860 | 56,075 | 59,664 | 60,561 | 61,907 | 67,290 | 78,505 | 82,991 | 89,720 | 100,935 | 112,150 |
| 8 | 12,485 | 24,970 | 37,455 | $49,940 | 62,425 | 66,420 | 67,419 | 68,917 | 74,910 | 87,395 | 92,389 | 99,880 | 112,365 | 124,850 |
| 9 | 13,755 | 27,510 | 41,265 | $55,020 | 68,775 | 73,177 | 74,277 | 75,928 | 82,530 | 96,285 | 101,787 | 110,040 | 123,795 | 137,550 |
| 10 | 15,025 | 30,050 | 45,075 | $60,100 | 75,125 | 79,933 | 81,135 | 82,938 | 90,150 | 105,175 | 111,185 | 120,200 | 135,225 | 150,250 |
| 11 | 16,295 | 32,590 | 48,885 | $65,180 | 81,475 | 86,689 | 87,993 | 89,948 | 97,770 | 114,065 | 120,583 | 130,360 | 146,655 | 162,950 |
| 12 | 17,565 | 35,130 | 52,695 | $70,260 | 87,825 | 93,446 | 94,851 | 96,959 | 105,390 | 122,955 | 129,981 | 140,520 | 158,085 | 175,650 |

## Poverty Guidelines: Hawaii — 2019 Monthly

| Household/ Family Size | 25% | 50% | 75% | 100% | 125% | 133% | 135% | 138% | 150% | 175% | 185% | 200% | 225% | 250% |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 300 | 599 | 899 | $1,198 | 1,498 | 1,594 | 1,618 | 1,654 | 1,798 | 2,097 | 2,217 | 2,397 | 2,696 | 2,996 |
| 2 | 405 | 811 | 1,216 | $1,622 | 2,027 | 2,157 | 2,189 | 2,238 | 2,433 | 2,838 | 3,000 | 3,243 | 3,649 | 4,054 |
| 3 | 511 | 1,023 | 1,534 | $2,045 | 2,556 | 2,720 | 2,761 | 2,822 | 3,068 | 3,579 | 3,783 | 4,090 | 4,601 | 5,113 |
| 4 | 617 | 1,234 | 1,851 | $2,468 | 3,085 | 3,283 | 3,332 | 3,406 | 3,703 | 4,320 | 4,566 | 4,937 | 5,554 | 6,171 |
| 5 | 723 | 1,446 | 2,169 | $2,892 | 3,615 | 3,846 | 3,904 | 3,991 | 4,338 | 5,060 | 5,350 | 5,783 | 6,506 | 7,229 |
| 6 | 829 | 1,658 | 2,486 | $3,315 | 4,144 | 4,409 | 4,475 | 4,575 | 4,973 | 5,801 | 6,133 | 6,630 | 7,459 | 8,288 |
| 7 | 935 | 1,869 | 2,804 | $3,738 | 4,673 | 4,972 | 5,047 | 5,159 | 5,608 | 6,542 | 6,916 | 7,477 | 8,411 | 9,346 |
| 8 | 1,040 | 2,081 | 3,121 | $4,162 | 5,202 | 5,535 | 5,618 | 5,743 | 6,243 | 7,283 | 7,699 | 8,323 | 9,364 | 10,404 |
| 9 | 1,146 | 2,293 | 3,439 | $4,585 | 5,731 | 6,098 | 6,190 | 6,327 | 6,878 | 8,024 | 8,482 | 9,170 | 10,316 | 11,463 |
| 10 | 1,252 | 2,504 | 3,756 | $5,008 | 6,260 | 6,661 | 6,761 | 6,912 | 7,513 | 8,765 | 9,265 | 10,017 | 11,269 | 12,521 |
| 11 | 1,358 | 2,716 | 4,074 | $5,432 | 6,790 | 7,224 | 7,333 | 7,496 | 8,148 | 9,505 | 10,049 | 10,863 | 12,221 | 13,579 |
| 12 | 1,464 | 2,928 | 4,391 | $5,855 | 7,319 | 7,787 | 7,904 | 8,080 | 8,783 | 10,246 | 10,832 | 11,710 | 13,174 | 14,638 |

EXHIBIT B

# FY 2021 LOCAL FUNDING REQUESTS

| Jurisdiction | FY 2020 Award | FY 2021 Request |
|---|---|---|
| Fredericksburg | $29,380 | $29,380 |
| Spotsylvania | $28,684 | $28,684 |
| Stafford | $32,445 | $32,445 |
| King George | $0.00 | $4,403 |
| Caroline | $1,500 | $1,500 |
| Fauquier | $13,613 | $13,613 |
| Culpeper Co. | $3,645 | $3,645 |
| Culpeper Town | $0.00 | $0.00 |
| Orange | $3,500 | $3,500 |
| Madison | $0.00 | $2,000 |
| Rappahannock | $2,147 | $2,147 |
| Essex | $8,500 | $8,500 |
| King & Queen | $4,712 | $4,712 |
| King William | $5,440 | $5,440 |
| Richmond | $2,467 | $2,467 |
| Northumberland | $9,056 | $9,056 |
| Lancaster | $0.00 | $5,600 |
| Westmoreland | $8,964 | $8,964 |
| **Total** | **$154,053** | **$166,056** |

# Legal Aid Works
# Profit & Loss Budget vs. Actual
## July 2018 through June 2019

**Non County Funding History FY21 (Projected)**

**LEGAL AID WORKS®**

**MADISON COUNTY GOVERNMENT**

**2021 COUNTY FUNDING REQUEST**

| | Jul '20 - Jun 21 |
|---|---|
| **Ordinary Income/Expense** | |
| **Income** | |
| **30000 · Grants** | |
| **30100 · LSCV-State** | 536,189.00 |
| **30101 · LSCV-CARE** | 80,000.00 |
| **30102 · LSCV-BOA** | 90,000.00 |
| **30110 · LSNV** | 52,500.00 |
| **30200 · Foundation Grants** | 15,000.00 |
| **30300 · Local Funds** | 154,053.00 |
| **30310 · CDBG** | 8,400.00 |
| **30340 · VSDVVF** | 30,400.00 |
| **30350 · VSTOP** | 23,558.00 |
| **30400 · Title IIIB-Agencies on Aging** | 9,511.81 |
| **30500 · SAFE** | 1,800.00 |
| **Total 30000 · Grants** | 1,001,411.81 |
| **31000 · Fundraising** | |
| **31010 · Church** | 2,000.00 |
| **31022 · PAFD** | |
| **31023 · Bar Association Donations** | 5,000.00 |
| **31022 · PAFD - Other** | 4,000.00 |
| **Total 31022 · PAFD** | 9,000.00 |
| **31040 · FOLAW** | 10,000.00 |
| **31050 · Events** | 7,500.00 |
| **Total 31000 · Fundraising** | 28,500.00 |
| **32000 · Contributions - Unrestricted** | |
| **32100 · Donations** | |
| **32100 · Donations - Other** | 5,000.00 |
| **Total 32100 · Donations** | 5,000.00 |
| **32200 · Client Donations** | 300.00 |
| **32300 · Equal Justice Society - Monthly** | 2,000.00 |
| **32000 · Reserves - Other** | 460,133.82 |
| **Total 32000 · Contributions - Unrestricted** | 467,433.82 |
| **33000 · Donated Services** | 0.00 |
| **35000 · Fees, Tax Benefits** | |
| **35501 · Guardian Ad Litem Fees** | 15,000.00 |
| **35000 · Fees, Tax Benefits - Other** | 0.00 |
| **Total 35000 · Fees, Tax Benefits** | 15,000.00 |
| **Total Income** | 1,512,345.63 |

# Legal Aid Works
## Profit & Loss Budget vs. Actual
### July 2018 through June 2019

| | Jul '20 - Jun 21 |
|---|---|
| **Gross Profit** | 1,512,345.63 |

# Legal Aid Works
# Profit & Loss Budget vs. Actual
## July 2018 through June 2019

**Non County Funding History FY21 (Projected)**

**LEGAL AID WORKS®**

**MADISON COUNTY GOVERNMENT**

**2021 COUNTY FUNDING REQUEST**

- Ordinary Income/Expense
  - Income
    - 30000 · Grants
      - 30100 · LSCV-State
      - 30101 · LSCV-CARE
      - 30102 · LSCV-BOA
      - 30110 · LSNV
      - 30200 · Foundation Grants
      - 30300 · Local Funds
      - 30310 · CDBG
      - 30340 · VSDVVF
      - 30350 · VSTOP
      - 30400 · Title IIIB-Agencies on Aging
      - 30500 · SAFE
    - Total 30000 · Grants
    - 31000 · Fundraising
      - 31010 · Church
      - 31022 · PAFD
        - 31023 · Bar Association Donations
        - 31022 · PAFD - Other
      - Total 31022 · PAFD
      - 31040 · FOLAW
      - 31050 · Events
    - Total 31000 · Fundraising
    - 32000 · Contributions - Unrestricted
      - 32100 · Donations
        - 32100 · Donations - Other
      - Total 32100 · Donations
      - 32200 · Client Donations
      - 32300 · Equal Justice Society - Monthly
      - 32000 · Reserves - Other
    - Total 32000 · Contributions - Unrestricted
    - 33000 · Donated Services
    - 35000 · Fees, Tax Benefits
      - 35501 · Guardian Ad Litem Fees
      - 35000 · Fees, Tax Benefits - Other
    - Total 35000 · Fees, Tax Benefits
  - Total Income

# Legal Aid Works
## Profit & Loss Budget vs. Actual
### July 2018 through June 2019

**Gross Profit**

# Legal Aid Works
# Profit & Loss Budget vs. Actual
## July 2018 through June 2019

**Non County Funding History FY21 (Projected)**

**LEGAL AID WORKS®**

**MADISON COUNTY GOVERNMENT**

**2021 COUNTY FUNDING REQUEST**

- Ordinary Income/Expense
  - Income
    - 30000 · Grants
      - 30100 · LSCV-State
      - 30101 · LSCV-CARE
      - 30102 · LSCV-BOA
      - 30110 · LSNV
      - 30200 · Foundation Grants
      - 30300 · Local Funds
      - 30310 · CDBG
      - 30340 · VSDVVF
      - 30350 · VSTOP
      - 30400 · Title IIIB-Agencies on Aging
      - 30500 · SAFE
    - Total 30000 · Grants
    - 31000 · Fundraising
      - 31010 · Church
      - 31022 · PAFD
        - 31023 · Bar Association Donations
        - 31022 · PAFD - Other
      - Total 31022 · PAFD
      - 31040 · FOLAW
      - 31050 · Events
    - Total 31000 · Fundraising
    - 32000 · Contributions - Unrestricted
      - 32100 · Donations
        - 32100 · Donations - Other
      - Total 32100 · Donations
      - 32200 · Client Donations
      - 32300 · Equal Justice Society - Monthly
      - 32000 · Reserves - Other
    - Total 32000 · Contributions - Unrestricted
    - 33000 · Donated Services
    - 35000 · Fees, Tax Benefits
      - 35501 · Guardian Ad Litem Fees
      - 35000 · Fees, Tax Benefits - Other
    - Total 35000 · Fees, Tax Benefits
  - Total Income

# Legal Aid Works
## Profit & Loss Budget vs. Actual
### July 2018 through June 2019

**Gross Profit**

# Legal Aid Works
# Profit & Loss Budget vs. Actual
## July 2018 through June 2019

**Non County Funding History FY21 (Projected)**

**LEGAL AID WORKS®**

**MADISON COUNTY GOVERNMENT**

**2021 COUNTY FUNDING REQUEST**

- Ordinary Income/Expense
  - Income
    - 30000 · Grants
      - 30100 · LSCV-State
      - 30101 · LSCV-CARE
      - 30102 · LSCV-BOA
      - 30110 · LSNV
      - 30200 · Foundation Grants
      - 30300 · Local Funds
      - 30310 · CDBG
      - 30340 · VSDVVF
      - 30350 · VSTOP
      - 30400 · Title IIIB-Agencies on Aging
      - 30500 · SAFE
    - Total 30000 · Grants
    - 31000 · Fundraising
      - 31010 · Church
      - 31022 · PAFD
        - 31023 · Bar Association Donations
        - 31022 · PAFD - Other
      - Total 31022 · PAFD
      - 31040 · FOLAW
      - 31050 · Events
    - Total 31000 · Fundraising
    - 32000 · Contributions - Unrestricted
      - 32100 · Donations
        - 32100 · Donations - Other
      - Total 32100 · Donations
      - 32200 · Client Donations
      - 32300 · Equal Justice Society - Monthly
      - 32000 · Reserves - Other
    - Total 32000 · Contributions - Unrestricted
    - 33000 · Donated Services
    - 35000 · Fees, Tax Benefits
      - 35501 · Guardian Ad Litem Fees
      - 35000 · Fees, Tax Benefits - Other
    - Total 35000 · Fees, Tax Benefits
  - Total Income

# Legal Aid Works
## Profit & Loss Budget vs. Actual
### July 2018 through June 2019

**Gross Profit**

# Legal Aid Works
# Profit & Loss Budget vs. Actual
## July 2018 through June 2019

**Non County Funding History FY19 (Actual)**

**LEGAL AID WORKS®**

**MADISON COUNTY GOVERNMENT**

**2021 COUNTY FUNDING REQUEST**

| | Jul '18 - Jun 19 | Budget |
|---|---|---|
| **Ordinary Income/Expense** | | |
| **Income** | | |
| **30000 · Grants** | | |
| **30100 · LSCV-State** | 536,189.04 | 536,189.04 |
| **30101 · LSCV-CARE** | 0.00 | 0.00 |
| **30102 · LSCV-BOA** | 90,000.00 | 90,000.00 |
| **30103 · VOCA-DCJS** | 233,567.11 | 233,567.11 |
| **30110 · LSNV** | 50,000.04 | 50,000.04 |
| **30200 · Foundation Grants** | 30,650.00 | 7,500.00 |
| **30300 · Local Funds** | 154,053.00 | 154,053.00 |
| **30310 · CDBG** | 8,400.00 | 8,400.00 |
| **30340 · VSDVVF** | 30,400.00 | 30,400.00 |
| **30350 · VSTOP** | 23,558.00 | 23,558.00 |
| **30400 · Title IIIB-Agencies on Aging** | 5,535.50 | 7,308.60 |
| **30450 · Quin Rivers, Inc.** | 0.00 | 0.00 |
| **30500 · SAFE** | 1,800.00 | 1,800.00 |
| **30900 · United Way-RUW** | | |
| **30905 · United Way Donations** | 2,453.51 | 0.00 |
| **30900 · United Way-RUW - Other** | 52,000.00 | 52,000.00 |
| **Total 30900 · United Way-RUW** | 54,453.51 | 52,000.00 |
| **30910 · United Way - Piedmont** | 3,813.39 | 813.39 |
| **Total 30000 · Grants** | 1,222,419.59 | 1,195,589.18 |
| **31000 · Fundraising** | | |
| **31010 · Church** | 3,700.00 | 2,500.00 |
| **31022 · AFLAW (old PAFD)** | 4,997.80 | 6,000.00 |
| **31023 · Bar Association Donations** | 5,000.00 | 10,000.00 |
| **31040 · FOLAW** | 14,669.02 | 10,000.00 |
| **31050 · Events** | 22,299.66 | 7,000.00 |
| **Total 31000 · Fundraising** | 50,666.48 | 35,500.00 |
| **32000 · Contributions - Unrestricted** | | |
| **32100 · Donations** | | |
| **32101 · Corporate** | 1,977.77 | 0.00 |
| **32102 · Organization** | 1,557.51 | 0.00 |
| **32106 · Give Local Piedmont** | 9,636.78 | 0.00 |
| **32100 · Donations - Other** | 35,792.99 | 4,000.00 |
| **Total 32100 · Donations** | 48,965.05 | 4,000.00 |
| **32200 · Client Donations** | 732.25 | 300.00 |
| **32300 · Equal Justice Society - Monthly** | 4,297.58 | 800.00 |
| **Total 32000 · Contributions - Unrestricted** | 53,994.88 | 5,100.00 |
| **33000 · Donated Services** | 168,089.25 | 0.00 |

# Legal Aid Works
## Profit & Loss Budget vs. Actual
### July 2018 through June 2019

| | Jul '18 - Jun 19 | Budget |
|---|---|---|
| 35000 · Fees, Tax Benefits | | |
| 35500 · Attorney Fees | 0.00 | 0.00 |
| 35501 · Guardian Ad Litem Fees | 27,707.30 | 13,000.00 |
| 35000 · Fees, Tax Benefits - Other | 0.00 | 0.00 |
| Total 35000 · Fees, Tax Benefits | 27,707.30 | 13,000.00 |
| Total Income | 1,522,877.50 | 1,249,189.18 |
| Expense | | |
| 51000 · Fundraising Expense | | |
| 51100 · Events | 2,050.36 | 4,500.00 |
| 51200 · Letter Campaigns | 1,400.00 | 1,400.00 |
| 51300 · Promotion | 529.43 | 3,080.00 |
| Total 51000 · Fundraising Expense | 3,979.79 | 8,980.00 |
| 52000 · Subscriptions/Services | | |
| 52010 · Kemps | 7,612.64 | 8,472.00 |
| 52020 · Online Backup | 199.00 | 400.00 |
| 52030 · Web Hosting | 233.32 | 0.00 |
| Total 52000 · Subscriptions/Services | 8,044.96 | 8,872.00 |
| 52500 · Misc Expense | | |
| 52501 · Discretionary Fund | 0.00 | 0.00 |
| 52500 · Misc Expense - Other | -268.21 | |
| Total 52500 · Misc Expense | -268.21 | 0.00 |
| 52800 · Depreciation Expense | 3,327.47 | |
| 53000 · Dues and Fees | 5,715.49 | 5,500.00 |
| 53602 · Litigation Expense | 0.00 | 5,000.00 |
| 53603 · Language Access | 0.00 | 500.00 |
| 53604 · Hesed Fund-Foundation Grant | 3,963.99 | 5,000.00 |
| 54000 · Supplies | 7,414.34 | 9,000.00 |
| 54100 · Printing and Reproduction | 2,961.97 | 3,000.00 |
| 55000 · Library | 2,870.19 | 4,000.00 |
| 56000 · Postage | 3,395.43 | 3,500.00 |
| 57000 · Travel | | |
| 57100 · Statewide Conference | 6,065.26 | 6,000.00 |
| 57000 · Travel - Other | 16,975.40 | 20,000.00 |
| Total 57000 · Travel | 23,040.66 | 26,000.00 |
| 57500 · Professional Development | 4,856.81 | 10,000.00 |
| 59000 · Professional Fees | | |
| 59100 · Accounting | 4,000.00 | 4,000.00 |
| 59200 · Logo/Webdesign/Media | 0.00 | 0.00 |
| 59300 · Payroll Service Fees | 3,580.11 | 2,700.00 |
| 59400 · Insurance Service Fees | 1,886.00 | 1,700.00 |
| 59500 · Investment Management | 109.69 | 300.00 |
| 59000 · Professional Fees - Other | 386.78 | 400.00 |
| Total 59000 · Professional Fees | 9,962.58 | 9,100.00 |
| 60000 · Rent | 69,600.00 | 69,600.00 |
| 61000 · Repairs and Maintenance | | |

# Legal Aid Works
## Profit & Loss Budget vs. Actual
### July 2018 through June 2019

| | Jul '18 - Jun 19 | Budget |
|---|---|---|
| 61100 · Building and Facilities | 3,683.24 | 4,740.00 |
| 61200 · Computers, Copiers, Equipment | 19,754.85 | 19,000.00 |
| Total 61000 · Repairs and Maintenance | 23,438.09 | 23,740.00 |
| 61400 · Furnishings, Equipmt, Software | 5,588.78 | 3,500.00 |
| 61500 · Equipment Rental | 411.48 | 1,000.00 |
| 62000 · Utilities | | |
| 62100 · Electric | 2,635.50 | 3,000.00 |
| 62200 · Gas | 416.93 | 700.00 |
| 62300 · Internet | 5,058.86 | 5,000.00 |
| 62500 · Telephone | 8,535.40 | 8,000.00 |
| 62600 · Trash Service | 60.00 | 50.00 |
| 62700 · Water | 1,254.12 | 955.00 |
| Total 62000 · Utilities | 17,960.81 | 17,705.00 |
| 64000 · Taxes and Licenses | 981.25 | 800.00 |
| 66000 · Payroll Expenses | | |
| 66100 · Salaries | | |
| 66110 · Change in Accrued Vacation | 8,986.56 | |
| 66100 · Salaries - Other | 935,394.08 | 993,348.68 |
| Total 66100 · Salaries | 944,380.64 | 993,348.68 |
| 66210 · Social Security - Employer | 54,519.93 | 61,587.63 |
| 66220 · Medicare Expenses - Employer | 12,751.25 | 14,403.56 |
| 66300 · Employee Benefits | | |
| 66310 · Health Insurance | 84,778.70 | 103,463.04 |
| 66311 · HRA Payments | 46,542.95 | 52,000.00 |
| 66312 · Flex Benefits | 0.00 | 0.00 |
| 66320 · Disability | 7,600.97 | 6,384.24 |
| 66330 · Life Insurance | 3,045.22 | 2,706.48 |
| 66300 · Employee Benefits - Other | 0.00 | 0.00 |
| Total 66300 · Employee Benefits | 141,967.84 | 164,553.76 |
| Total 66000 · Payroll Expenses | 1,153,619.66 | 1,233,893.63 |
| 66700 · Interns/Temp Workers | 14,777.50 | |
| 67000 · Program Insurance | 12,630.57 | 10,000.00 |
| 69000 · Service Charges | 539.64 | 300.00 |
| 69500 · Donated Services Expense | | |
| 69510 · Events | 0.00 | 0.00 |
| 69530 · Library Law Books | 390.00 | 0.00 |
| 69570 · Professional Services | 0.00 | 0.00 |
| 69590 · Travel | 3,460.60 | 0.00 |
| 69500 · Donated Services Expense - Other | 164,208.65 | 0.00 |
| Total 69500 · Donated Services Expense | 168,059.25 | 0.00 |
| Total Expense | 1,546,872.50 | 1,458,990.63 |
| Net Ordinary Income | -23,995.00 | -209,801.45 |
| Other Income/Expense | | |
| Other Income | | |
| 70000 · Other Income | | |

# Legal Aid Works
## Profit & Loss Budget vs. Actual
### July 2018 through June 2019

| | Jul '18 - Jun 19 | Budget |
|---|---|---|
| 70100 · Interest | 1,808.37 | 0.00 |
| 71000 · Investment Income | 14,789.64 | 0.00 |
| Total 70000 · Other Income | 16,598.01 | 0.00 |
| Total Other Income | 16,598.01 | 0.00 |
| Other Expense | | |
| 80000 · Other Expense | | |
| 81000 · Investment Loss | 7,701.57 | 0.00 |
| Total 80000 · Other Expense | 7,701.57 | 0.00 |
| Total Other Expense | 7,701.57 | 0.00 |
| Net Other Income | 8,896.44 | 0.00 |
| **Net Income** | **-15,098.56** | **-209,801.45** |

# Legal Aid Works
# Profit & Loss Budget vs. Actual
## July 2019 through June 2020

**Non County Funding History FY20 (YTD)**

**LEGAL AID WORKS®**

**MADISON COUNTY GOVERNMENT**

**2021 COUNTY FUNDING REQUEST**

| | Jul '19 - Jun 20 | Budget |
|---|---|---|
| **Ordinary Income/Expense** | | |
| **Income** | | |
| **30000 · Grants** | | |
| **30100 · LSCV-State** | 312,776.47 | 536,189.00 |
| **30101 · LSCV-CARE** | 46,666.69 | 80,000.00 |
| **30102 · LSCV-BOA** | 52,500.00 | 90,000.00 |
| **30103 · VOCA-DCJS** | 0.00 | 0.00 |
| **30110 · LSNV** | 27,499.98 | 52,500.00 |
| **30200 · Foundation Grants** | 28,500.00 | 15,000.00 |
| **30300 · Local Funds** | 82,507.00 | 154,053.00 |
| **30310 · CDBG** | 1,568.00 | 8,400.00 |
| **30340 · VSDVVF** | 17,579.65 | 30,400.00 |
| **30350 · VSTOP** | 0.00 | 23,558.00 |
| **30400 · Title IIIB-Agencies on Aging** | 4,110.62 | 6,000.00 |
| **30450 · Quin Rivers, Inc.** | 0.00 | 0.00 |
| **30500 · SAFE** | 255.00 | 1,800.00 |
| **30900 · United Way-RUW** | | |
| **30905 · United Way Donations** | 1,014.58 | 0.00 |
| **30900 · United Way-RUW - Other** | 18,908.00 | 52,000.00 |
| **Total 30900 · United Way-RUW** | 19,922.58 | 52,000.00 |
| **30910 · United Way - Piedmont** | 0.00 | 0.00 |
| **Total 30000 · Grants** | 593,885.99 | 1,049,900.00 |
| **31000 · Fundraising** | | |
| **31010 · Church** | 1,600.00 | 2,000.00 |
| **31022 · AFLAW (old PAFD)** | 4,632.72 | 4,000.00 |
| **31023 · Bar Association Donations** | 1,000.00 | 5,000.00 |
| **31040 · FOLAW** | 22,855.36 | 10,000.00 |
| **31050 · Events** | 18,895.36 | 7,500.00 |
| **Total 31000 · Fundraising** | 48,983.44 | 28,500.00 |
| **31100 · Miscellaneous Income** | 524.75 | |
| **32000 · Contributions - Unrestricted** | | |
| **32100 · Donations** | | |
| **32101 · Corporate** | 0.00 | 0.00 |
| **32102 · Organization** | 405.51 | 0.00 |
| **32106 · Give Local Piedmont** | 0.00 | 0.00 |
| **32100 · Donations - Other** | 150.00 | 5,000.00 |
| **Total 32100 · Donations** | 555.51 | 5,000.00 |
| **32200 · Client Donations** | 543.46 | 300.00 |
| **32300 · Equal Justice Society - Monthly** | 1,895.15 | 2,000.00 |

# Legal Aid Works
## Profit & Loss Budget vs. Actual
### July 2019 through June 2020

| | Jul '19 - Jun 20 | Budget |
|---|---|---|
| Total 32000 · Contributions - Unrestricted | 2,994.12 | 7,300.00 |
| 33000 · Donated Services | 1,883.32 | 0.00 |
| 35000 · Fees, Tax Benefits | | |
| 35500 · Attorney Fees | 0.00 | 0.00 |
| 35501 · Guardian Ad Litem Fees | 18,502.50 | 15,000.00 |
| 35000 · Fees, Tax Benefits - Other | 0.00 | 0.00 |
| Total 35000 · Fees, Tax Benefits | 18,502.50 | 15,000.00 |
| Total Income | 666,774.12 | 1,100,700.00 |
| Expense | | |
| 51000 · Fundraising Expense | | |
| 51100 · Events | 36.38 | 2,500.00 |
| 51200 · Letter Campaigns | 932.92 | 1,500.00 |
| 51300 · Promotion | 50.02 | 1,000.00 |
| Total 51000 · Fundraising Expense | 1,019.32 | 5,000.00 |
| 52000 · Subscriptions/Services | | |
| 52010 · Kemps | 5,325.36 | 10,952.00 |
| 52020 · Online Backup | 0.00 | 100.00 |
| 52030 · Web Hosting | 116.68 | 350.00 |
| Total 52000 · Subscriptions/Services | 5,442.04 | 11,402.00 |
| 52500 · Misc Expense | | |
| 52501 · Discretionary Fund | 281.14 | 1,030.00 |
| 52500 · Misc Expense - Other | 0.73 | |
| Total 52500 · Misc Expense | 281.87 | 1,030.00 |
| 53000 · Dues and Fees | 7,147.56 | 6,600.00 |
| 53602 · Litigation Expense | 0.00 | 0.00 |
| 53603 · Language Access | 0.00 | 0.00 |
| 53604 · Hesed Fund-Foundation Grant | 1,429.57 | 5,000.00 |
| 54000 · Supplies | 3,731.81 | 7,440.00 |
| 54100 · Printing and Reproduction | 1,856.33 | 3,100.00 |
| 55000 · Library | 1,910.72 | 3,000.00 |
| 56000 · Postage | 2,084.57 | 2,700.00 |
| 57000 · Travel | | |
| 57100 · Statewide Conference | 6,910.17 | 6,900.00 |
| 57000 · Travel - Other | 12,264.64 | 16,500.00 |
| Total 57000 · Travel | 19,174.81 | 23,400.00 |
| 57500 · Professional Development | 2,993.34 | 5,200.00 |
| 59000 · Professional Fees | | |
| 59100 · Accounting | 4,000.00 | 4,000.00 |
| 59200 · Logo/Webdesign/Media | 0.00 | 0.00 |
| 59300 · Payroll Service Fees | 1,532.20 | 3,165.00 |
| 59400 · Insurance Service Fees | 1,832.00 | 2,066.00 |
| 59500 · Investment Management | 124.67 | 300.00 |
| 59000 · Professional Fees - Other | 350.00 | 400.00 |
| Total 59000 · Professional Fees | 7,838.87 | 9,931.00 |
| 60000 · Rent | 41,300.00 | 71,100.00 |

# Legal Aid Works
## Profit & Loss Budget vs. Actual
### July 2019 through June 2020

| | Jul '19 - Jun 20 | Budget |
|---|---|---|
| 61000 · Repairs and Maintenance | | |
| 61100 · Building and Facilities | 231.13 | 1,740.00 |
| 61200 · Computers, Copiers, Equipment | 15,658.49 | 20,949.00 |
| Total 61000 · Repairs and Maintenance | 15,889.62 | 22,689.00 |
| 61400 · Furnishings, Equipmt, Software | 4,428.28 | 9,400.00 |
| 61500 · Equipment Rental | 308.61 | 1,000.00 |
| 62000 · Utilities | | |
| 62100 · Electric | 1,312.65 | 3,000.00 |
| 62200 · Gas | 139.39 | 700.00 |
| 62300 · Internet | 2,696.56 | 6,000.00 |
| 62500 · Telephone | 3,740.36 | 8,375.00 |
| 62600 · Trash Service | 20.00 | 60.00 |
| 62700 · Water | 701.85 | 1,200.00 |
| Total 62000 · Utilities | 8,610.81 | 19,335.00 |
| 64000 · Taxes and Licenses | 538.47 | 950.00 |
| 66000 · Payroll Expenses | | |
| 66100 · Salaries | 542,627.25 | 1,027,948.00 |
| 66210 · Social Security - Employer | 31,259.37 | 63,732.78 |
| 66220 · Medicare Expenses - Employer | 7,310.68 | 14,905.25 |
| 66300 · Employee Benefits | | |
| 66310 · Health Insurance | 60,191.15 | 116,335.80 |
| 66311 · HRA Payments | 30,074.69 | 58,080.00 |
| 66312 · Flex Benefits | 0.00 | 0.00 |
| 66320 · Disability | 3,883.97 | 6,651.24 |
| 66330 · Life Insurance | 1,551.17 | 2,824.08 |
| 66300 · Employee Benefits - Other | 0.00 | 0.00 |
| Total 66300 · Employee Benefits | 95,700.98 | 183,891.12 |
| Total 66000 · Payroll Expenses | 676,898.28 | 1,290,477.15 |
| 66700 · Interns/Temp Workers | 1,012.50 | |
| 67000 · Program Insurance | 11,037.43 | 12,492.48 |
| 69000 · Service Charges | 320.24 | 450.00 |
| 69500 · Donated Services Expense | | |
| 69530 · Library Law Books | 410.00 | 0.00 |
| 69590 · Travel | 1,473.32 | 0.00 |
| 69500 · Donated Services Expense - Other | 0.00 | 0.00 |
| Total 69500 · Donated Services Expense | 1,883.32 | 0.00 |
| Total Expense | 817,138.37 | 1,511,696.63 |
| Net Ordinary Income | -150,364.25 | -410,996.63 |
| Other Income/Expense | | |
| Other Income | | |
| 70000 · Other Income | | |
| 70100 · Interest | 2,092.06 | 0.00 |
| 71000 · Investment Income | 40.04 | 0.00 |
| Total 70000 · Other Income | 2,132.10 | 0.00 |
| Total Other Income | 2,132.10 | 0.00 |

# Legal Aid Works
## Profit & Loss Budget vs. Actual
### July 2019 through June 2020

| | Jul '19 - Jun 20 | Budget |
|---|---|---|
| **Other Expense** | | |
| **80000 · Other Expense** | | |
| **81000 · Investment Loss** | 0.00 | 0.00 |
| **Total 80000 · Other Expense** | 0.00 | 0.00 |
| **Total Other Expense** | 0.00 | 0.00 |
| **Net Other Income** | 2,132.10 | 0.00 |
| **Net Income** | **-148,232.15** | **-410,996.63** |

# Legal Aid Works

**Financial Statements**
**and**
**Accompanying Information**
**for the year ended**
**June 30, 2019**
**(With comparative financial information for**
**the year ended June 30, 2018)**

# Legal Aid Works

## Contents


| | Page |
|---|---|
| Independent Auditor's Report | 1 - 2 |
| Statement of Financial Position | 3 |
| Statement of Activities | 4 |
| Statement of Functional Expenses | 5 |
| Statement of Cash Flows | 6 |
| Notes to Financial Statements | 7 - 11 |
| Accompanying Information | |
| Schedule of Support, Revenue, Expenses and Changes in Net Assets | 12 |

# Frank Barcalow CPA, P.L.L.C.

# Independent Auditor's Report

Board of Directors
Legal Aid Works
Fredericksburg, Virginia

**Report on Financial Statements**

We have audited the accompanying financial statements of Legal Aid Works (a nonprofit organization), which comprise the statement of financial position as of June 30, 2019, and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements.

**Management's Responsibility for the Financial Statements**

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

**Auditor's Responsibility**

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

**Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Legal Aid Works as of June 30, 2019, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

**Report on Summarized Comparative Information**

We have previously audited the Legal Aid Works's 2018 financial statements, and our report dated August 10, 2018, expressed an unmodified opinion on those audited financial statements. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2018, is consistent, in all material respects, with the audited financial statements from which it has been derived.

**Other Matters**

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedule of support, revenue and expenses is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

*Frank Barcalow CPA P.L.L.C.*

Richmond, Virginia
August 1, 2019

# Legal Aid Works



**Statement of Financial Position**
**June 30, 2019**
**(with comparative totals for the year ended June 30, 2018)**

| **Assets** | | **2019** | | **2018** |
|---|---|---|---|---|
| **Current assets** | | | | |
| Cash and cash equivalents | $ | 815,326 | $ | 807,420 |
| Investment | | 62,568 | | 54,205 |
| Accounts receivable | | 84,764 | | 112,876 |
| Prepaid expenses | | 28,744 | | 24,015 |
| Client escrow deposits | | 1,618 | | 1,722 |
| **Total current assets** | | 993,020 | | 1,000,238 |
| Property and equipment | | | | |
| Furniture, fixtures and equipment | | 62,008 | | 62,578 |
| Law Libraries | | 2,331 | | 2,331 |
| | | 64,339 | | 64,909 |
| Less: accumulated depreciation | | (51,966) | | (53,288) |
| **Total property and equipment** | | 12,373 | | 11,621 |
| Other non-current assets: deposits | | 5,875 | | 5,930 |
| **Total assets** | $ | 1,011,268 | $ | 1,017,789 |
| **Liabilities and net assets** | | | | |
| **Current liabilities** | | | | |
| Accounts payable | $ | 2,718 | $ | 3,425 |
| Accrued vacation | | 34,814 | | 25,828 |
| Deferred revenue | | 4,167 | | 4,167 |
| Client escrow deposits | | 1,618 | | 1,722 |
| **Total current liabilities** | | 43,317 | | 35,142 |
| **Commitments** | | | | |
| **Net assets** | | | | |
| Without donor restrictions | | 967,951 | | 982,647 |
| **Total liabilities and net assets** | $ | 1,011,268 | $ | 1,017,789 |

See notes to financial statements.

# Legal Aid Works



**Statement of Activities**
**For the Year Ended June 30, 2019**
**(with summarized totals for the year ended June 30, 2018)**

| | Without Donor Restrictions | With Donor Restrictions | 2019 Total | 2018 Total |
|---|---|---|---|---|
| **Support and revenue** | | | | |
| Grants and other support | $ - | $ 1,264,796 | $ 1,264,796 | $ 1,285,405 |
| Investment income | 8,897 | - | 8,897 | 15,134 |
| Donated services | 168,089 | - | 168,089 | 179,139 |
| Contributions | 89,992 | - | 89,992 | 243,356 |
| | 266,978 | 1,264,796 | 1,531,774 | 1,723,034 |
| Net assets released from restrictions | | | | |
| Expiration of time or purpose restrictions | 1,264,796 | (1,264,796) | - | - |
| **Total support and revenue** | 1,531,774 | - | 1,531,774 | 1,723,034 |
| **Expenses** | | | | |
| **Program services** | | | | |
| Legal assistance | 1,279,300 | - | 1,279,300 | 1,190,294 |
| **Supporting services** | | | | |
| Management and general | 226,480 | - | 226,480 | 206,455 |
| Fund-raising expenses | 40,690 | - | 40,690 | 30,694 |
| **Total expenses** | 1,546,470 | - | 1,546,470 | 1,427,443 |
| **Change in net assets** | (14,696) | - | (14,696) | 295,591 |
| **Net assets at beginning of year** | 982,647 | - | 982,647 | 687,056 |
| **Net assets at end of year** | $ 967,951 | $ - | $ 967,951 | $ 982,647 |

See notes to financial statements.

# Legal Aid Works



**Statement of Functional Expenses**
**For the Year Ended June 30, 2019**
**(with summarized totals for the year ended June 30, 2018)**

| | Program Services | Supporting Services | Fundraising Expense | 2019 Total Expenses | 2018 Total Expenses |
|---|---|---|---|---|---|
| Salaries | $ 760,908 | $ 153,509 | $ 29,964 | $ 944,381 | $ 851,218 |
| Fringe benefits | 170,761 | 33,772 | 6,592 | 211,125 | 197,395 |
| Temporary staffing | 8,797 | 5,981 | - | 14,778 | 11,011 |
| Donated services | 164,209 | - | - | 164,209 | 179,139 |
| Rent | 59,160 | 10,440 | - | 69,600 | 69,158 |
| Utilities | 8,011 | 1,414 | - | 9,425 | 9,479 |
| Consumables | 8,820 | 1,556 | - | 10,376 | 9,630 |
| Postage | 2,390 | 449 | 154 | 2,993 | 3,528 |
| Equipment maintenance | 19,922 | 3,516 | - | 23,438 | 18,319 |
| Telephone | 7,255 | 1,280 | - | 8,535 | 7,767 |
| Program travel | 22,526 | 3,975 | - | 26,501 | 18,321 |
| Training | 4,857 | - | - | 4,857 | 7,842 |
| Library maintenance | 3,260 | - | - | 3,260 | 2,687 |
| Insurance | 10,736 | 1,895 | - | 12,631 | 10,922 |
| Dues and fees | 5,715 | - | - | 5,715 | 5,068 |
| Fundraising expenses | - | - | 3,980 | 3,980 | 2,240 |
| Miscellaneous expense | 4,320 | 897 | - | 5,217 | 2,752 |
| Professional fees | 496 | 7,581 | - | 8,077 | 7,605 |
| Software costs | 8,045 | - | - | 8,045 | 7,880 |
| Depreciation | 3,112 | 215 | - | 3,327 | 2,050 |
| Equipment purchases | 5,589 | - | - | 5,589 | 2,972 |
| Equipment rental | 411 | - | - | 411 | 460 |
| | $ 1,279,300 | $ 226,480 | $ 40,690 | $ 1,546,470 | $ 1,427,443 |

See notes to financial statements.

# Legal Aid Works

## Statement of Cash Flows
**For the Year Ended June 30, 2019**
**(with comparative totals for the year ended June 30, 2018)**

| | 2019 | 2018 |
|---|---|---|
| **Cash flows from operating activities** | | |
| Change in net assets | $ (14,696) | $ 295,591 |
| Adjustments to reconcile increase (decrease) in net assets to net cash provided by (used by) operating activities | | |
| Depreciation | 3,327 | 2,050 |
| (Increase) decrease in accounts receivables | 28,113 | (21,009) |
| (Increase) decrease in prepaid expenses | (4,730) | (2,521) |
| (Increase) decrease in deposits | 55 | - |
| Increase (decrease) in accounts payable | (717) | (932) |
| Increase (decrease) in deferred revenue | - | 4,167 |
| Increase (decrease) in accrued vacation | 8,987 | (4,662) |
| **Net cash provided by (used by) operations** | 20,339 | 272,684 |
| **Cash flows used in investing activities** | | |
| Additions to property and equipment | (4,080) | (9,705) |
| Change in investments | (8,363) | (13,416) |
| **Net cash provided by (used by) investing activities** | (12,443) | (23,121) |
| **Net increase (decrease) in cash and cash equivalents** | 7,896 | 249,563 |
| **Cash and cash equivalents, beginning of year** | 807,420 | 557,857 |
| **Cash and cash equivalents, end of year** | $ 815,316 | $ 807,420 |

See notes to financial statements.

# Notes to Financial Statements
# June 30, 2019

## Note 1 - Nature of organization and summary of significant accounting policies

***Nature of organization***

Legal Aid Works (LAW), is a non-profit corporation organized for the purpose of providing legal assistance in non-criminal proceedings on matters to persons financially unable to afford legal assistance in Fredericksburg, Virginia and sixteen counties of the Rappahannock River watershed. LAW is principally funded through grants from Legal Services Corporation of Virginia, a non-profit corporation at the state level.

***Promises to give***

Contributions are recognized when the donor makes a promise to give to the Corporation that is, in substance, unconditional. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in net assets with donor restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions.

The Corporation uses the allowance method to determine uncollectible unconditional promises receivable. Historically, there have not been significant differences between the amounts allocated and collected, accordingly, no provision has been made for uncollectible amounts

***Basis of presentation***

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with generally accepted accounting principles in the United States. Under these accounting principles, LAW is required to report information regarding its financial position and activities using two classes of net assets: net assets without donor restrictions and net assets with donor restrictions.

***Estimates***

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

***Advertising***

Advertising costs are expensed as incurred. There was no advertising expense in the current year.

***Cash equivalents***

For purposes of the Statement of Cash Flows, LAW considers highly liquid debt instruments purchased with an original maturity of three months or less to be a cash equivalent.

## Notes to Financial Statements
## June 30, 2019

### Note 1 - Summary of significant accounting policies (continued)

***Grant support***

The Corporation recognizes grant funds as awarded. In accordance with the terms of its contract, LAW may use unexpended funds in future periods to the extent that expenses incurred are in compliance with the specified terms of the contract.

***Property and equipment***

Property and equipment is carried at cost and depreciated under the straight-line method over the estimated useful lives of the assets, ranging from three to fifteen years.

The Corporation capitalizes equipment purchased with a cost exceeding $1,000. Any expenditures under $1,000 are expensed as incurred.

Property donated to LAW is recorded at its market value at the time of receipt. The value of donated property and equipment is depreciated over the useful life of the asset.

***Law library***

The Corporation capitalizes the cost of books, reference materials and multiple volume sets of law books. Depreciation on the law library is computed on the straight-line method over an estimated life of fifteen years.

***Allocation of expenses***

In some cases common expenses are incurred which support the work performed under more than one grant or contract. Allocation of such expenses is as agreed upon by the funding sources or, in absence of an agreement, on the basis which appears most reasonable to the Corporation.

The costs of providing the various programs and other activities have been summarized on a functional basis in the Statement of Activities and in the Statement of Functional Expenses. Accordingly, certain costs have been allocated between the program and supporting services benefitted.

***Investments***

The investments consist of marketable securities and are presented in the financial statements at fair value based on quoted prices in active markets (all Level 1 measurements). Market risk could occur and is dependent on the future changes in market prices of the investments held. The cost of the original investment was $25,000 and the fair market value at 2019 totaled $62,568 and for 2018 fair market value was $54,205. Unrealized losses totaled $(386) for the year and investment income totaled $2,494 for the current year. Additional contributions to the investment totaled $6,702 during the current year.

## Notes to Financial Statements
## June 30, 2019

### Note 1 - Summary of significant accounting policies (concluded)

***Income taxes***

LAW is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code and from Virginia income taxes. In addition, LAW has been determined not to be a "private foundation" within the meaning of Section 509(a) of the Code. The Corporation's income tax returns are potentially subject to examination by the Internal Revenue Service generally for three years after being filed. The Association has no uncertain tax positions for the current year or prior year.

### Note 2 - Donated services

Donated services for the current year are recognized as both support and expenses. Donated services are valued as follows:

| | |
|---|---|
| Attorneys at $225 per hour | $ 76 291 |
| Paralegals and law clerks at $100 per hour | 79 500 |
| Other volunteers at $10 per hour | 8 372 |
| Donated supplies | 3 926 |
| | $ 168 089 |

### Note 3 - Commitments

According to three leases for the rental of office space in effect at June 30, 2019 , the minimum annual rental payments over the remaining terms of the leases are as follows:

| | |
|---|---|
| 2020 | $ 68 900 |
| 2021 | 59 400 |
| 2022 | 63 600 |
| 2023 | 48 000 |
| Total | $ 239 900 |

All of the leases may be terminated by LAW if aggregate funding decrease by the following levels:

| | |
|---|---|
| Tappahannock | $ 100 000 |
| Culpeper | $ 100 000 |
| Fredericksburg | $ 100 000 |

Lease expense aggregated $69,600 for the year ended June 30, 2019.

## Note 4 - Accumulated depreciation

Accumulated depreciation by classes of property is shown in the following tabulation.

| | June 30 2019 | June 30 2018 |
|---|---|---|
| Furniture, fixtures and equipment | $ 49 635 | $ 50 957 |
| Law libraries | 2 331 | 2 331 |
| | $ 51 966 | $ 53 288 |

Depreciation expense for the current year was $3,327.

## Note 5 - Concentration of credit risk

Financial instruments which potentially subject the Corporation to concentration of credit risk consist principally of cash and cash equivalents and unsecured receivables. The cash and cash equivalents is insured by the Federal Deposit Insurance Corporation up to $250,000 for the year ended June 30, 2019 and 2018. Balances may exceed the insured limits from time to time, but management does not believe there is risk. Accounts receivable are amounts due from grantors and other sources. Management believes there is no significant credit risk because of the close monitoring of the receivables.

## Note 6 - Concentration of funding

The Corporation's operations are funded principally through general purpose contracts from Legal Services Corporation of Virginia. Legal Services Corporation of Virginia provides 46% of funding and a Department of Justice Grants which provided an additional 19% of total funding.

## Note 7 - Retirement plan

The Corporation has a voluntary tax deferred annuity plan for all qualified employees. For the current year the Corporation did not make any contributions to the plan.

## Note 8 - Net assets with donor restrictions

Net assets released by satisfying the time or purpose restrictions for the current year are as follows:

| | |
|---|---|
| Grants and other support | $ 1 264 796 |

## Note 9 - Comparative amounts

The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Corporation's financial statements for the year ended June 30, 2018, from which the summarized information was derived.

## Notes to Financial Statements
## June 30, 2019

### Note 10 - Fair value measurements

The Corporation records fair value adjustments to certain assets and liabilities and determines fair value disclosures. The fair value of certain assets and liabilities is an exit price, representing the amount that would be received to sell and asset or paid to transfer a liability in an orderly transaction between market participants. Three levels of the fair value hierarchy under this standard based on these three types of inputs are as follows:

Level 1 - Valuation is based on quoted prices in active markets for identical assets and liabilities.

Level 2 - Valuation is based on observable inputs including quoted prices in active markets for similar assets and liabilities, quoted prices for identical or similar assets and liabilities in less active markets, and model-based valuation techniques for which significant assumptions can be derived primarily from or corroborated by observable data in the market.

Level 3 - Valuation is based on model-based techniques that use one or more significant inputs or assumptions that are unobservable in the market.

All investments and liabilities were measured at fair value by level one valuation, because they generally provide the most reliable evidence of fair value.

### Note 11 - Subsequent events

In preparing these financial statements, the Corporation has evaluated events and transactions for potential recognition or disclosure through August 1, 2019 the date the financial statements were issued.

### Note 12 - Liquidity and Availability

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the balance sheet date, comprise the following:

| | | |
|---|---|---|
| Cash and cash equivalents | $ | 815 326 |
| Certificates of deposits | | 62 568 |
| Accounts receivable | | 84 764 |
| Less: donor restrictions | | - |
| | $ | 962 658 |

### Note 13 - Change in Accounting Principle

On August 18, 2016, FASB issued Accounting Standards Update (ASU) 2016-14, Not-for-Profit Entities (Topic 958) "Presentation of Financial Statements of Not-for-Profit Entities". The update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return. We have implemented ASU 2016-14 and have adjusted the presentation in these consolidated financial statements accordingly. The ASU has been applied retrospectively to all periods presented, but there were no changes to net assets.

# Accompanying Information

# Legal Aid Works



**Statement of Support, Revenue, Expenses and Changes in Net Assets**
**For the Year Ended June 30, 2019**
**(with summarized totals for the year ended June 30, 2018)**

| | Legal Services of Virginia | Legal Services of N. Virginia Sub-grant | Property and Equipment | United Way | Title III | Local Funds | General Funds | Total 2019 | Total 2018 |
|---|---|---|---|---|---|---|---|---|---|
| **Support and revenue** | | | | | | | | | |
| Grants and contracts | $ 626,189 | $ 50,000 | $ - | $ 58,267 | $ 5,536 | $ 154,053 | $ 105,226 | $ 999,271 | $ 989,106 |
| Community Development Block Grant | - | - | - | - | - | - | 8,400 | 8,400 | 8,373 |
| Department of Justice Grant | - | - | - | - | - | - | 257,125 | 257,125 | 287,926 |
| Donated services | - | - | - | - | - | - | 168,089 | 168,089 | 179,139 |
| Investment income | - | - | - | - | - | - | 8,897 | 8,897 | 15,134 |
| Contributions | - | - | - | - | - | - | 89,992 | 89,992 | 242,893 |
| Attorney fees | - | - | - | - | - | - | - | - | 463 |
| **Total support and revenue** | 626,189 | 50,000 | - | 58,267 | 5,536 | 154,053 | 637,729 | 1,531,774 | 1,723,034 |
| **Expenses** | | | | | | | | | |
| Salaries | 433,649 | 34,067 | - | 39,699 | 4,546 | 104,962 | 327,458 | 944,381 | 851,218 |
| Fringe benefits | 96,946 | 7,741 | - | 9,021 | 990 | 23,850 | 72,577 | 211,125 | 197,395 |
| Temporary staffing | 6,786 | 542 | - | 631 | - | 1,669 | 5,149 | 14,778 | 11,011 |
| Donated services | - | - | - | - | - | - | 164,209 | 164,209 | 179,139 |
| Rent | 31,960 | 2,552 | - | 2,974 | - | 7,863 | 24,252 | 69,600 | 69,158 |
| Utilities | 4,328 | 346 | - | 403 | - | 1,065 | 3,284 | 9,425 | 9,479 |
| Consumables | 4,765 | 380 | - | 443 | - | 1,172 | 3,616 | 10,376 | 9,630 |
| Postage | 1,374 | 110 | - | 128 | - | 338 | 1,043 | 2,993 | 3,528 |
| Equipment maintenance | 10,762 | 859 | - | 1,001 | - | 2,648 | 8,167 | 23,438 | 18,319 |
| Telephone | 3,919 | 313 | - | 365 | - | 964 | 2,974 | 8,535 | 7,767 |
| Program travel | 12,169 | 972 | - | 1,132 | - | 2,994 | 9,234 | 26,501 | 18,321 |
| Training | 2,230 | 178 | - | 208 | - | 549 | 1,692 | 4,857 | 7,842 |
| Library maintenance | 1,497 | 120 | - | 139 | - | 368 | 1,136 | 3,260 | 2,687 |
| Insurance | 5,800 | 463 | - | 540 | - | 1,427 | 4,401 | 12,631 | 10,922 |
| Dues and fees | 2,624 | 210 | - | 244 | - | 646 | 1,991 | 5,715 | 5,068 |
| Fundraising expense | 1,828 | 146 | - | 170 | - | 450 | 1,387 | 3,980 | 2,240 |
| Miscellaneous | 2,396 | 191 | - | 223 | - | 589 | 1,818 | 5,217 | 2,752 |
| Professional fees | 3,709 | 296 | - | 345 | - | 912 | 2,814 | 8,077 | 7,605 |
| Software costs | 3,694 | 295 | - | 344 | - | 909 | 2,803 | 8,045 | 7,880 |
| Depreciation | - | - | 3,327 | - | - | - | - | 3,327 | 2,050 |
| Equipment purchases | 2,566 | 205 | - | 239 | - | 631 | 1,948 | 5,589 | 2,972 |
| Equipment rental | 188 | 15 | - | 18 | - | 46 | 144 | 411 | 460 |
| **Total expenses** | 633,190 | 50,000 | 3,327 | 58,267 | 5,536 | 154,053 | 642,097 | 1,546,470 | 1,427,443 |
| **Change in net assets** | (7,001) | - | (3,327) | - | - | - | (4,368) | (14,696) | 295,591 |
| **Net assets at beginning of year** | 91,715 | - | 11,621 | - | - | - | 879,311 | 982,647 | 687,056 |
| Acquisition of property and equipment | - | - | 4,079 | - | - | - | (4,079) | - | - |
| **Net assets at end of year** | $ 84,714 | $ - | $ 12,373 | $ - | $ - | $ - | $ 870,864 | $ 967,951 | $ 982,647 |

Legal Aid Works PD9
Local Funding Awards & Budgets PD16

| Jurisdiction | FY19 Cty Awards | FY19 Closed cases | FY19 Clients served | FY19 Lump Recove | FY19 Mthly Recoverie | FY19 Avoided | FY19 Mthly Avoided |
|---|---|---|---|---|---|---|---|
| Caroline | $1,500 | 39 | 116 | $0.00 | $1,071.00 | $4,820.00 | $146.00 |
| City of Fredericksburg | $29,380 | 66 | 202 | $0.00 | $0.00 | $699.21 | $0.00 |
| Culpeper Co. | $3,645 | 66 | 234 | $0.00 | $644.64 | $4,500.00 | $0.00 |
| Essex | $8,500 | 106 | 194 | $17,329.60 | $771.00 | $25.00 | $216.00 |
| Fauquier | $13,613 | 36 | 98 | $0.00 | $0.00 | $0.00 | $0.00 |
| King George | $0 | 18 | 41 | $0.00 | $0.00 | $1,240.00 | $0.00 |
| King & Queen | $4,712 | 17 | 17 | $0.00 | $800.00 | $0.00 | $0.00 |
| King William | $5,440 | 24 | 47 | $0.00 | $0.00 | $0.00 | $0.00 |
| Lancaster | $0 | 35 | 51 | $30,297.00 | $2,721.00 | $0.00 | $0.00 |
| Madison | $0 | 4 | 15 | $0.00 | $0.00 | $560.00 | $0.00 |
| Northumberland | $9,056 | 44 | 94 | $37,145.00 | $2,210.00 | $0.00 | $0.00 |
| Orange | $3,500 | 15 | 65 | $1,504.00 | $2,952.00 | $0.00 | $0.00 |
| Rappahannock | $2,147 | 3 | 7 | $0.00 | $0.00 | $7,900.00 | $0.00 |
| Richmond | $2,467 | 36 | 78 | $42,430.00 | $2,331.00 | $100,000.00 | $0.00 |
| Spotsylvania | $28,684 | 131 | 386 | $11,615.17 | $8,315.63 | $158,962.85 | $0.00 |
| Stafford | $32,445 | 127 | 427 | $25,240.60 | $8,312.00 | $102,295.08 | $0.00 |
| Westmoreland | $8,964 | 38 | 90 | $12,447.00 | $0.00 | $0.00 | $0.00 |
| Total | **$154,053** | 805 | 2162 | $178,008.37 | $30,128.27 | $381,002.14 | $362.00 |
| | | | | | $361,539.24 | | $4,344.00 |
| PD9-Culpeper | $22,905 | | | | $178,008.37 | | $381,002.14 |
| PD16-Fred | $92,009 | | | Total Awards | $539,547.61 | Total Awards | $385,346.14 Total All |
| Tapp office | $39,139 | | | | | | |

| PD9 | Cases Closed | Clients Served | Awards | M Awards | Avoid | M Avoid |
|---|---|---|---|---|---|---|
| Culpeper | 66 | 234 | $0.00 | $644.64 | $4,500.00 | $0.00 |
| Fauquier | 36 | 98 | $0.00 | $0.00 | $0.00 | $0.00 |
| Madison | 4 | 15 | $0.00 | $0.00 | $560.00 | $0.00 |
| Orange | 15 | 65 | $1,504.00 | $2,952.00 | $0.00 | $0.00 |
| Rappahannock | 3 | 7 | $0.00 | $0.00 | $7,900.00 | $0.00 |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Total PD9 | 124 | 419 | $1,504.00 | $3,596.64 | $12,960.00 | $0.00 | |
| | | | | $43,159.68 | | $0.00 | |
| | | | | $1,504.00 | | $12,960.00 | |
| | | | Total Awards | $ 44,663.68 | Total Avoids | $ 12,960.00 | $ 57,623.68 |
| | | | | | | | |
| PD16 | Cases Closed | Clients Served | Awards | M Awards | Avoid | M Avoid | |
| Caroline | 39 | 116 | $0.00 | $1,071.00 | $4,820.00 | $146.00 | |
| Frederickburg | 66 | 202 | $0.00 | $0.00 | $699.21 | $0.00 | |
| King George | 18 | 41 | $0.00 | $0.00 | $1,240.00 | $0.00 | |
| Spotsy | 131 | 386 | $11,615.17 | $8,315.63 | $158,962.85 | $0.00 | |
| Stafford | 127 | 427 | $25,240.60 | $8,312.00 | $102,295.08 | $0.00 | |
| Total PD16 | 381 | 1172 | $36,855.77 | $17,698.63 | $268,017.14 | $146.00 | |
| | | | | $ 212,383.56 | | $ 1,752.00 | |
| | | | | $ 36,855.77 | | $268,017.14 | |
| | | | Total Awards | $ 249,239.33 | Total Avoids | $ 269,769.14 | $ 519,008.47 |

$924,893.75

Legal Aid Works
Local Funding Awards & Budgets

PD9
PD16

| Jurisdiction | FY20 Cty Awards | Budgeted FY20 Closed Cases | Budgeted FY20 Clients Served |
|---|---|---|---|
| Caroline | $1,500 | 35 | 100 |
| City of Fredericksburg | $29,380 | 50 | 130 |
| Culpeper Co. | $3,645 | 25 | 80 |
| Culpeper Town | $0 | 20 | 50 |
| Essex | $8,500 | 105 | 185 |
| Fauquier | $13,613 | 25 | 65 |
| King George | $0 | 20 | 55 |
| King & Queen | $4,712 | 10 | 20 |
| King William | $5,440 | 10 | 25 |
| Lancaster | $0 | 30 | 65 |
| Madison | $0 | 10 | 25 |
| Northumberland | $9,056 | 40 | 95 |
| Orange | $3,500 | 25 | 75 |
| Other Localities | $0 | 10 | 50 |
| Rappahannock | $2,147 | 4 | 10 |
| Richmond | $2,467 | 30 | 65 |
| Spotsylvania | $28,684 | 150 | 460 |
| Stafford | $31,796 | 120 | 350 |
| Westmoreland | $8,964 | 40 | 80 |
| Total | **$153,404** | 759 | 1985 |

Legal Aid Works PD9

Local Funding Awards & Budgets PD16

| Jurisdiction | Projected FY21 & 22 Cty Aw | Projected FY21 & 22 Closed Ca | Projected FY21 & 22 Clients Served |
|---|---|---|---|
| Caroline | $1,500 | 35 | 100 |
| City of Fredericksburg | $29,380 | 50 | 130 |
| Culpeper Co. | $3,645 | 25 | 80 |
| Culpeper Town | $0 | 20 | 50 |
| Essex | $8,500 | 105 | 185 |
| Fauquier | $13,613 | 25 | 65 |
| King George | $0 | 20 | 55 |
| King & Queen | $4,712 | 10 | 20 |
| King William | $5,440 | 10 | 25 |
| Lancaster | $0 | 30 | 65 |
| Madison | $0 | 10 | 25 |
| Northumberland | $9,056 | 40 | 95 |
| Orange | $3,500 | 25 | 75 |
| Other Localities | $0 | 10 | 50 |
| Rappahannock | $2,147 | 4 | 10 |
| Richmond | $2,467 | 30 | 65 |
| Spotsylvania | $28,684 | 150 | 460 |
| Stafford | $31,796 | 120 | 350 |
| Westmoreland | $8,964 | 40 | 80 |
| Total | **$153,404** | 759 | 1985 |

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE: January 13, 2020**

| **IDENTIFICATION** | |
|---|---|
| *Organization/Agency Name:* | Virginia Regional Transit |
| *Street Name:* | 109 North Bailey Lane |
| *Mailing Address:* | Purcellville, VA 20132 |
| *Agency Contact:* | Sally Dehler, Director of Financial Services |
| *Telephone Number:* | 540-338-1610 x1104 |
| *E-mail Address – Agency Contact* | sally@vatransit.org |
| *Agency's Web Address:* | https://vatransit.org/ |
| *Federal Tax ID#:* | 62-1441965 |
| *Audit:* | ☒Yes ☐No |

| **PURPOSE/NARRATIVE** |
|---|
| *Missions and Goals:*<br><br>Virginia Regional Transit is a non-profit transportation provider; operating, managing and planning fixed route, on-demand and commuter transportation services. We deliver efficient, cost effective and quality services for riders so they can move about their communities and live their lives fully. Our organization strives to be the provider of choice for our customers, looking to offer transportation as a vital community resource. |
| *Experience and Accomplishments:* |

Currently, VRT operates the "Foothills Express", providing three days of service per week, three round trips per day, originating at the UVA Health System Culpeper Medical Center to all points in Charlottesville City to include Downtown, Sentara Martha Jefferson Hospital, UVA Hospital and outposts. This route is an effective hybrid on-demand route providing additional stops in rural areas such as Madison and Green Counties to connect passengers with medical services that may not be available in their communities. During 2018, the Foothills Express route provided over 2000 rides and traveled over 44,000 miles. Without this service, many in our community would suffer a lack in connection to medical care.

*Benefits of Funding:*

Continued Foothills Express Service described above.

The Foothills Express routes current funding mechanism is expiring with the end of this fiscal year June 2020. The 10 hour per day route provides 1560 hours of service per year and costs $92,000.00 annually to operate. VRT will be applying to the Federal Transportation Administration and the Virginia Department of Rail and Public Transportation for 68% of the total cost of operation. That leaves a 32% unfunded "local match" requirement to draw down those funds.

*Intention of Use:*

Part of the total local match required = $29,453. $7K is being requested from Culpeper County, $4K was awarded from the Northern Piedmont Community Foundation and VRT is currently seeking assistance from other counties/grants to make up the $18K shortfall.

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☐ *General Community/Civic*<br>☒ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 5,000 - $18,000 |

Signature: _____ Title: Director of Financial Services

Printed Name: Sally Dehler Date:

**Virginia Regional Transit**
**Fiscal Year End = June 30th**

| Route Name | | Hrs | Days | HPW | WKS | HPY | CPH | Operating Budget | FTA 50% | State 18% | Local 32% | Local Funding Partners |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Foothills Express | T,W,TH | 10 | 3 | 30 | 52 | 1,560 | $59 | $92,040 | $46,020 | $16,567 | $29,453 | Madison County & Culpeper County 7K; Northern Piedmont Community Foundation $4K |

| | FY 2019 Actual 7/1/18 - 6/30/19 | FY 2020 Budget 7/1/19 - 6/30/20 | FY 2021 Budget | Comments |
|---|---|---|---|---|
| Income | $ 90,667 | $ 104,592 | | New funding mechanism in FY 2021 - 5311 Funding |
| Federal Funds | | | $ 46,020 | |
| State Funds | | | $ 16,567 | |
| Local Funds - Madison County | | | $ 5,000 | |
| Local Funds - Culpeper County | | | $ 5,000 | |
| Local Funds - Northern Piedmont Comm Foundation | | | $ 4,000 | |
| Local Funds - TBD | | | $ 15,453 | |
| **TOTAL REVENUE** | **$ 90,667** | **$ 104,592** | **$ 92,040** | |
| Salaries and Benefits | $ 27,704 | $ 40,000 | $ 40,000 | |
| Other Employee Costs (Training, Drug T | $ 135 | $ 692 | $ 700 | |
| Fuel | $ 12,193 | $ 25,000 | $ 25,000 | |
| Other Vehicle Expenses | $ 728 | $ 4,287 | $ 4,300 | |
| Office/Utilities | $ 1,063 | $ 918 | $ 1,000 | |
| Communication | $ 94 | $ 393 | $ 400 | |
| General Liability | $ 2,497 | $ 2,203 | $ 2,200 | |
| Prof Audit/Legal Service | $ 1,088 | $ 200 | $ 1,000 | |
| Fixed Charges | $ 1,124 | $ 3,421 | $ 2,440 | |
| Capital Expense | $ 13,943 | $ 15,000 | $ 15,000 | |
| **TOTAL EXPENSES** | **$ 60,570** | **$ 92,114** | **$ 92,040** | |
| **CLIENTS SERVED** | **1,927** | **1,850** | **1,900** | Passenger Counts are actual counts as clients enter the bus. One person = One count |

*Financial Statements*

# VIRGINIA REGIONAL TRANSIT

June 30, 2019

## GENERAL ORGANIZATIONAL DATA

## ORGANIZATION AND PURPOSE

Virginia Regional Transit (VRT) (formerly Virginia Regional Transportation Association and Loudoun County Transportations Association) was incorporated under the laws of the Commonwealth of Virginia on August 28, 1990, to operate a nonstock, nonprofit organization. The organization changed its name from Virginia Regional Transportation Association to Virginia Regional Transit effective December 18, 2006 and from Loudoun County Transportation Association to Virginia Regional Transportation Association effective January 1, 2002.

The purpose of VRT is to coordinate, promote, and provide an efficient system of public transportation to all citizens of the region with emphasis on the disabled, elderly, and disadvantaged residents, and to carry out all other incidental services as directed by the Board of Directors within the general charitable purpose of the organization.

## OFFICERS AND BOARD OF DIRECTORS

### OFFICERS

Maxie Brown, Chair
Noel A. Brown, Vice Chair
E. Bruce Simms, President/CEO
James Askegren, Secretary
Joseph Boling, Treasurer

Charles D. Grant, Chair Emeritus

### BOARD OF DIRECTORS

| | | |
|---|---|---|
| Maxie Brown | Charles D. Grant | Russ Neyman |
| Noel A. Brown | E. Bruce Simms | Randolph A. Sutliff |
| Janet Clarke | James W. Askegren | Joseph L. Boling |

---

Mary Gale R. Holden, Corporate Attorney

**TABLE OF CONTENTS**


| | |
|---|---|
| **INDEPENDENT AUDITOR'S REPORT** | 1-2 |
| **FINANCIAL STATEMENTS** | |
| Statement of Financial Position | 3 |
| Statement of Activities | 4 |
| Statement of Functional Expenses | 5 |
| Statement of Cash Flows | 6 |
| Notes to Financial Statements | 7-13 |
| **SUPPLEMENTARY INFORMATION** | |
| Schedule of Expenditures of Federal Awards | 14 |
| **COMPLIANCE REPORTS** | |
| Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards* | 15-16 |
| Report on Compliance for Each Major Program and on Internal Control over Compliance Required by Uniform Guidance | 17-18 |
| Schedule of Findings and Questioned Costs | 19 |
| **SUPPLEMENTAL SCHEDULES** | |
| Governmental Grant Funded Schedule of Financial Position | 20 |
| Governmental Grant Funded Schedule of Activities | 21 |

# MITCHELL & CO., P.C.

CERTIFIED PUBLIC ACCOUNTANTS

JEFFREY D. MITCHELL, CPA
SANDRA M. TONDREAU, CPA
W. MATTHEW BURNS, CPA

AMANDA M. NOORDHOFF, CPA
KARA J. SANTMYER, CPA
TONJI M. LEISS, CPA

110 EAST MARKET STREET
SUITE 200
LEESBURG, VIRGINIA 20176
703.777.4900

108 W. WASHINGTON STREET
SUITE 203
MIDDLEBURG, VIRGINIA 20117
540.883.3173

WWW.MCOCPA.COM | FAX: 703.771.3082

MEMBERS
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

VIRGINIA SOCIETY OF
CERTIFIED PUBLIC ACCOUNTANTS


## INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Virginia Regional Transit
Purcellville, Virginia

**Report on the Financial Statements**

We have audited the accompanying financial statements of Virginia Regional Transit (a nonprofit organization), which comprise the statement of financial position as of June 30, 2019, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

***Auditor's Responsibility***

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

***Opinion***

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Virginia Regional Transit as of June 30, 2019 and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

***Other Matters***

*Other Information*

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. *Code of Federal Regulations Part* 200*, Uniform Administrative Requirements, Cost Principles and Audit Requirement for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

**Other Reporting Required by *Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated September 19, 2019, on our consideration of Virginia Regional Transit's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Virginia Regional Transit's internal control over financial reporting and compliance.

***Report on Supplementary Information***

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary schedules on pages 20-21 are presented for purposes of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Leesburg, Virginia
September 19, 2019

Mitchell & Co., P.C.

**VIRGINIA REGIONAL TRANSIT**

**STATEMENT OF FINANCIAL POSITION**
**June 30, 2019**

| | |
|---|---|
| **ASSETS** | |
| Current Assets | |
| Cash deposits | $ 1,528,841 |
| Contracts receivable | 326,173 |
| Grants receivable | 319,209 |
| Other receivables | 38,950 |
| Prepaid expenses/deposits/advances | 16,570 |
| **Total current assets** | 2,229,743 |
| Property, vehicles and equipment (net of accumulated depreciation of $6,559,137) | 13,478,180 |
| **Total assets** | $ 15,707,923 |
| **LIABILITIES AND NET ASSETS** | |
| Current Liabilities | |
| Accounts payable | $ 132,897 |
| Accrued expenses | 268,624 |
| Current maturities of notes payable | 236,992 |
| Deferred income | 18,165 |
| **Total current liabilities** | 656,678 |
| Notes payable, net of current portion | 514,834 |
| **Total liabilities** | 1,171,512 |
| Net assets | |
| Without Donor Restriction | |
| Capital investment | 12,726,354 |
| Committed for capital reinvestment | 74,003 |
| Undesignated | 1,736,054 |
| With Donor Restriction | - |
| **Total net assets** | 14,536,411 |
| **Total liabilities and net assets** | $ 15,707,923 |

See Notes to Financial Statements.

**VIRGINIA REGIONAL TRANSIT**

**STATEMENT OF ACTIVITIES**
**For The Year Ended June 30, 2019**

| | Without Donor Restriction | | | | |
|---|---|---|---|---|---|
| | Operations | Capital/ Non-operating | Total | With Donor Restriction | **Totals** |
| **SUPPORT AND REVENUE** | | | | | |
| Public support | | | | | |
| Federal funds | 1,508,418 | 623,481 | 2,131,899 | - | **2,131,899** |
| Virginia State funds | 653,427 | 124,697 | 778,124 | - | **778,124** |
| Virginia RTAP funds | 22,107 | - | 22,107 | - | **22,107** |
| Loudoun County funds | 461,448 | 72,000 | 533,448 | - | **533,448** |
| Local government funds | 624,528 | - | 624,528 | - | **624,528** |
| Local private funds | 13,008 | - | 13,008 | - | **13,008** |
| Facilities in-kind | 71,490 | - | 71,490 | - | **71,490** |
| Total public support | 3,354,426 | 820,178 | 4,174,604 | - | **4,174,604** |
| Revenue | | | | | |
| Passenger fares | 88,913 | - | 88,913 | - | **88,913** |
| Ridership contract services | 2,951,039 | - | 2,951,039 | - | **2,951,039** |
| Ridership management services | 25,398 | - | 25,398 | - | **25,398** |
| Advertising service | 49,265 | - | 49,265 | - | **49,265** |
| Rental income | 45,310 | - | 45,310 | - | **45,310** |
| DMV revenue | 98,277 | - | 98,277 | - | **98,277** |
| Reimbursements | 5,930 | - | 5,930 | - | **5,930** |
| Special event, net | 5,066 | - | 5,066 | - | **5,066** |
| Gain on sale of assets | - | 41,462 | 41,462 | - | **41,462** |
| Total revenue | 3,269,198 | 41,462 | 3,310,660 | - | **3,310,660** |
| Net assets released from restrictions | | | | | |
| Satisfaction of usage restrictions | - | - | - | - | **-** |
| **Total support and revenue** | 6,623,624 | 861,640 | 7,485,264 | - | **7,485,264** |
| **EXPENSES** | | | | | |
| Program Services | 5,805,110 | 821,693 | 6,626,803 | - | **6,626,803** |
| Supportive services | | | | | |
| Management & General | 701,131 | 25,000 | 726,131 | - | **726,131** |
| Fundraising | 7,420 | - | 7,420 | - | **7,420** |
| **Total expenses** | 6,513,661 | 846,693 | 7,360,354 | - | **7,360,354** |
| **Changes in net assets** | 109,963 | 14,947 | 124,910 | - | **124,910** |
| **Net asset reclassification** | (134,529) | 134,529 | - | - | **-** |
| **Net assets, beginning of year** | 1,834,623 | 12,576,878 | 14,411,501 | - | **14,411,501** |
| **Net assets, end of year** | $ 1,810,057 | $ 12,726,354 | $ 14,536,411 | $ - | **$ 14,536,411** |

See Notes to Financial Statements.

**VIRGINIA REGIONAL TRANSIT**

**STATEMENT OF FUNCTIONAL EXPENSES**
**For The Year Ended June 30, 2019**

| | Program Services | Supportive Services: Management & General | Supportive Services: Fundraising | **Totals** |
|---|---|---|---|---|
| Wages, payroll taxes and benefits | 3,523,176 | 548,843 | 7,287 | **4,079,306** |
| Other personnel costs | 61,571 | 3,241 | - | **64,812** |
| Vehicle operating costs | 1,169,346 | - | - | **1,169,346** |
| Communication services | 82,844 | 4,360 | - | **87,204** |
| Office expense | 100,847 | 33,616 | - | **134,463** |
| Occupancy and maintenance | 153,195 | - | - | **153,195** |
| Conferences and travel | 30,468 | - | - | **30,468** |
| RTAP conferences and travel | 20,729 | - | - | **20,729** |
| Insurance | 324,338 | 3,276 | - | **327,614** |
| Advertising | 26,546 | - | - | **26,546** |
| Professional services | 31,696 | 60,265 | - | **91,961** |
| Commissions | 12,104 | - | - | **12,104** |
| Interest expense | 47,382 | - | - | **47,382** |
| Miscellaneous | 8,168 | - | - | **8,168** |
| Employer responsibility shared payment | 68,627 | 10,020 | 133 | **78,780** |
| Capital lease deposit forefiture on refinance | - | 37,510 | - | **37,510** |
| Leased vehicles | 20,138 | - | - | **20,138** |
| Other repairs and maintance | 32,713 | - | - | **32,713** |
| Other fixed charges | 66,693 | - | - | **66,693** |
| Transportation service | 24,529 | - | - | **24,529** |
| Depreciation expense | 821,693 | 25,000 | - | **846,693** |
| **Total expenses** | 6,626,803 | 726,131 | 7,420 | **7,360,354** |

See Notes to Financial Statements.

**VIRGINIA REGIONAL TRANSIT**

**STATEMENT OF CASH FLOWS**
**For The Year Ended June 30, 2019**

| | |
|---|---|
| **Cash Flows from Operating Activities** | |
| Change in net assets | $ 124,910 |
| Adjustments to reconcile change in net assets to net cash provided (used) by operating activities: | |
| Depreciation | 846,693 |
| Gain on disposal of assets | (41,462) |
| Changes in assets and liabilities: | |
| (Increase) decrease in assets: | |
| Contracts receivable | (106,887) |
| Grants receivable | 36,924 |
| Other receivables | 22,920 |
| Prepaid expenses/deposits/advances | 62,745 |
| Increase (decrease) in liabilities: | |
| Accounts payable | (29,845) |
| Accrued expenses | 64,186 |
| Deferred income | 3,865 |
| **Net cash provided operating activities** | 984,049 |
| **Cash Flows from Investing Activities** | |
| Purchase of fixed assets | (805,042) |
| Proceeds on sale of vehicles and equipment | 41,462 |
| **Net cash (used in) investing activities** | (763,580) |
| **Cash Flows from Financing Activities** | |
| Proceeds from notes payable | 666,646 |
| Debt repayment including capital lease obligation | (857,773) |
| **Net cash (used in) financing activities** | (191,127) |
| **Net increase in cash** | 29,342 |
| **Cash and cash equivalents** | |
| Beginning | 1,499,499 |
| Ending | $ 1,528,841 |
| **Supplemental disclosures of cash flow information** | |
| Cash payments for interest | $ 47,382 |
| Cash payments for U.S. federal income taxes | $ - |
| Capital lease obligations incurred for use of equipment | $ - |

See Notes to Financial Statements.

## Note 1. Nature of Activities and Significant Accounting Policies

### Nature of Activities

Virginia Regional Transit (VRT) (the "Organization") provides public transportation to all citizens in designated regions. The Organization is primarily supported through various sources of federal, state and local county/town/city governmental funding.

VRT adopted a June 30 company reporting year end effective for the nine months ended October 1, 2014 to June 30, 2015. Prior to this reporting year VRT reported financial information on the fiscal year October 1 to September 30.

### Significant Accounting Policies

The financial statements of VRT have been prepared in accordance with policies followed by nonprofit organizations. The significant accounting policies that follow are described below to enhance the usefulness of the financial statements to the reader.

*Basis of Accounting*: The financial statements of VRT have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

*Basis of Presentation*: Financial statement presentation follows the recommendations of the Financial Accounting Standards Board (FASB) as defined in the FASB Accounting Standards Codification (ASC) Topic 958 dated August 2016, *Not-For-Profit Entities*, and the provisions of the American Institute of Certified Public Accountants (AICPA) "Audit and Accounting Guide for Not-for-Profit Organizations". (ASC) 958-205 was effective January 1, 2018. Under ASC Topic 958, the Organization is required to report information regarding its financial position and activities according to two classes of net assets:

*Net Assets Without Donor Restriction*: Net assets not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Organization. The Organization's board may designate assets without restrictions for specific operational purposes from time to time.

*Net Assets With Donor Restriction:* Net assets subject to stipulations imposed by donors, and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Non-Profit Organization or by the passage of time. Other donor restrictions are perpetual in nature, where by the donor has stipulated the funds be maintained in perpetuity.

*Property, Vehicles and Equipment and Depreciation*: Property, vehicles and equipment are carried at cost or fair value at date of donation. Depreciation of property, vehicles and equipment is provided using the straight-line method at rates based on the following estimated useful lives:

| Description | Estimated Life |
|---|---|
| Vehicles | 3-4 |
| Machinery and equipment | 5 |
| Furniture and fixtures | 7 |
| Buildings and building improvements | 12-50 |

Expenditures for major renewals and betterments that extend the useful lives of property and equipment are capitalized. Expenditures for maintenance and repairs are charged to expense as incurred.

**Note 1. Nature of Activities and Significant Accounting Policies (Continued)**

*Taxes*: Virginia Regional Transit was granted exemption from federal income tax under Section 501(c)(3) of the Internal Revenue Code August 12, 1991, local personal property taxes February 15, 1999, and local real estate taxes February 15, 2004.

For federal income tax purposes, VRT is taxed on all income from unrelated business activities reduced by expenses from unrelated business activities for which a profit motive exists. Unrelated business income is not offset by tax exempt function expenses. The organization files form 990-T, which has graduated tax rates of 15% to 34% that are applied to net unrelated business taxable income.

The Organization adopted the guidance under ASC Topic 740, Accounting for Uncertainty in Income Taxes. Management has evaluated the Organization's tax positions and concluded that the Organization has taken no uncertain tax provisions that would require adjustment to, or disclosure in, the financial statements to comply with the provisions of the guidance.

*Accounts receivable*: Accounts and grants receivable are stated at the amount management expects to collect from outstanding balances. Management provides for probable uncollectible amounts through an allowance for bad debt based on its assessment of the current status of individual accounts. Balances that are still outstanding after management has used reasonable collection efforts are written off. Management believes all current outstanding amounts are collectible and has not provided for a bad debt allowance. Amounts written off and not collected have not been material to the financial statements.

*Estimates*: The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

*Revenue recognition*: Contributions of donated noncash assets are recorded at their fair values in the period received. Contributions of donated services that create or enhance nonfinancial assets or that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation, are recorded at their fair values in the period received. Contributions restricted for the acquisition of land, buildings, and equipment are reported as net assets without donor restriction upon acquisition of the assets and the assets are placed in service.

Governmental public support, grant funds and contract revenue are reported as the income is earned or in the designated funding period. Specific revenue recognition is governed by the contract. Funds received in advance of services or for future periods are reported as unearned or deferred.

*Cash and cash equivalents*: For purposes of reporting cash flows, VRT considers all cash on demand deposits, money market deposits, cash management accounts, and certificates of deposit to be cash equivalents.

**Note 1. Nature of Activities and Significant Accounting Policies (Continued)**

*Functional Allocation of Expenses:* The costs of providing program and other activities have been summarized on a functional basis in the statements of activities. Management allocates all costs directly when possible. Accordingly, certain costs have been allocated among program services and supporting services benefited. Such allocations are determined by management on based on their natural cost driver. The expenses that are allocated include the following:

| Description | Allocation Method |
|---|---|
| Personnel costs | Time and effort |
| Depreciation | Utilization |
| Professional fees | Time and effort |
| Office and other | Time and effort |

*Measure of Operations:* The statements of activities reports all changes in net assets, including changes in net assets from operating and non-operating activities. Operating activities consist of those items attributable to VRT's ongoing activities. Non-operating activities are limited to resources that generate return from investments, endowment contributions, financing costs, and other activities considered to be of a more unusual or nonrecurring nature. There were no non-operating activities in 2019.

*New Accounting Pronouncement:* On August 18, 2016, FASB issued ASU 2016-14, Not-for-Profit Entities (Topic 958) – Presentation of Financial Statements of Not-for-Profit Entities. The update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return. VRT has adjusted the presentation of these statements accordingly.

**Note 2. Cash and Cash Equivalents**

Cash and cash equivalent deposits consist of the following:

| Description | Bank Balance | Accounting Balance |
|---|---|---|
| BB&T | $ 425,454 | $ 425,964 |
| John Marshall Bank | 1,117,028 | 1,102,577 |
| Petty cash | - | 300 |
| | $ 1,542,482 | 1,528,841 |

Individual bank combined cash account deposits up to $250,000 are insured by the Federal Deposit Insurance Corporation (FDIC). At June 30, 2019 bank balances exceed FDIC coverage by $1,042,482.

## Note 3. Grants Receivable

Grants receivable are composed of the following amounts due at June 30, 2019:

| Source | Operating | Capital | Total |
|---|---|---|---|
| U.S. Federal Government | $ 311,090 | $ 3,393 | $ 314,483 |
| Local governments | 4,726 | - | 4,726 |
| | $ 315,816 | $ 3,393 | $ 319,209 |

## Note 4. Property, Vehicles and Equipment

A summary of property, vehicles and equipment for the year ended June 30, 2019 is as follows:

| Description | 6/30/2018 Balance | Additions | Deletions | 6/30/2019 Balance |
|---|---|---|---|---|
| Land and buildings | $ 14,748,586 | $ 20,333 | $ - | $ 14,768,919 |
| Vehicles | 4,427,129 | 771,151 | (409,974) | 4,788,306 |
| Computers | 54,816 | - | - | 54,816 |
| Furniture | 117,885 | - | - | 117,885 |
| Bus stop shelters | 96,411 | - | - | 96,411 |
| Office equipment | 54,429 | 13,558 | - | 67,987 |
| Machinery | 153,546 | - | (23,615) | 129,931 |
| Radios | 13,062 | - | - | 13,062 |
| | 19,665,864 | 805,042 | (433,589) | 20,037,317 |
| Less accumulated depreciation | (6,146,033) | (846,693) | 433,589 | (6,559,137) |
| | $ 13,646,834 | $ (41,651) | $ - | $ 13,478,180 |

## Note 5. Notes Payable

A summary of the notes payable as of June 30, 2019 is as follows:

| Description | Amount |
|---|---|
| $512,000 note payable to Summit Community Bank, dated November, 2005 due in 240 installments of $4,079 at 7.25% to November 2008, variable thereafter at 3.0% over bank index due November 2025, collateralized by land and improvements with a cost value of $584,534. | $ 232,580 |
| $666,646 note payable to John Marshall Bank, dated September 13, 2018 payable in installments of $15,374 at 5.00% due September 13, 2022, collateralized by vehicles. | 519,246 |
| | 751,826 |
| Less current maturities | (236,992) |
| | $ 514,834 |

**Note 5. Notes Payable (Continued)**

Principal annual debt service requirements to maturity for notes payable are as follows:

| | Amount |
|---|---|
| Fiscal year 2020 | $ 236,992 |
| Fiscal year 2021 | 249,284 |
| Fiscal year 2022 | 133,882 |
| Fiscal year 2023 | 37,502 |
| Fiscal year 2024 | 39,617 |
| Thereafter | 54,549 |
| | $ 751,826 |

**Note 6. Bank Line of Credit**

VRT has available a $1,500,000 operating line of credit financing instrument established with John Marshall Bank, and a $500,000 capital line of credit available. The terms of the credit arrangement are secured by vehicles and equipment. There was no outstanding balance as of June 30, 2019.

**Note 7. Liquidity**

The Organization's financial assets available within one year of the balance sheet date for general expenditure are as follows:

| Description | Amount |
|---|---|
| Cash and cash equivalents | $ 1,528,841 |
| Less: current maturies of notes payable: | (236,992) |
| | $ 1,291,849 |

**Note 8. Commitment and Contingent Liabilities**

VRT is subjected to various legal actions and lawsuits throughout the normal course of business activities. The outcomes of these current legal actions is not presently known, it is the opinion of management and legal counsel that any eventual settlement (if any) will be within provided insurance coverage and limits.

**Note 9. Provision for Unrelated Business Income**

A summary of unrelated business income is as follows:

| Description | Amount |
|---|---|
| Unrelated business income | $ 147,542 |
| Allocated expenses/exemption | (148,427) |
| Unrelated business income (loss) | $ (885) |

No tax provision is made or required.

### Note 10. Employee Benefit Plan

Effective January 1, 2006, VRT adopted a 403(b) retirement pension plan. Eligible employees can elect to defer and contribute their wages into this retirement plan with VRT matching employee contributions up to a set percentage of their wages. VRT matches up to 3% of employee contributions. For the year ended June 30, 2019, the employer match amounted to $38,170.

### Note 11. Rental Property Income under Operating Leases

VRT receives rental income from the Purcellville facility summarized as follows:

| Rental Type | Amount |
|---|---|
| Offices | $ 15,310 |
| Parking spaces for Park-N-Ride | 28,000 |
| | $ 43,310 |

The offices are rented on a month to month basis. The parking spaces are leased to Loudoun County, Virginia under a three (3) year lease effective July 1, 2018.

Future minimum rental income under the Loudoun County, Virginia lease is as follows:

| Fiscal year ended | Amount |
|---|---|
| June 30, 2020 | $ 37,500 |
| June 30, 2021 | 37,500 |
| | $ 75,000 |

### Note 12. Financial Assistance Grants

For fiscal year ended June 30, 2019, financial assistance grants are summarized as follows:

| Type/Purpose | Total | Federal | Virginia | Loudoun County | Local Government | Private |
|---|---|---|---|---|---|---|
| Operating | $ 3,260,829 | $ 1,508,418 | $ 653,427 | $ 461,448 | $ 624,528 | $ 13,008 |
| Capital funding | 820,178 | 623,481 | 124,697 | 72,000 | - | - |
| Training (RTAP) | 22,107 | - | 22,107 | - | - | - |
| | $ 4,103,114 | $ 2,131,899 | $ 800,231 | $ 533,448 | $ 624,528 | $ 13,008 |

Approximately 54 percent of VRT operating program funding support is from federal, state and local government grant programs. During 2014, the state and local government funding model of public transportation for many VRT service routes, changed to a contract for service arrangement. Under this model, VRT provides public transportation services under a procurement contract without federal government funding. VRT anticipates future public transportation support payments provided by the federal government to be reduced and provided only in limited areas. This will reduce the overall operations and public service routes provided by VRT.

### Note 13. Contract Service Income

VRT provides public transportation to local governments on a contract service fee basis. A summary of 2019 contract service areas and fees is as follows:

| Local Government | Service Fees |
|---|---|
| Central Shenandoah PDC | $ 1,703,674 |
| City of Suffolk, Virginia | 1,156,698 |
| Rappahannock-Rapidan Regional Commission | 90,667 |
| | $ 2,951,039 |

### Note 14. Lease Commitments

Facilities: VRT leases a regional hub operational office space in Suffolk, Virginia on a year to year basis. Current monthly rental expense is $1,475. VRT maintains another regional hub operation in Fishersville, Virginia. This is provided to VRT in-kind. The estimated value of this economic benefit has been reflected in the financial statements. VRT owns and operates its main operational and maintenance facility in Purcellville, Virginia and its operational hub regional facility in Culpeper, Virginia. Rental expense for leased operational offices and maintenance facilities rented during fiscal year 2019 amounted to $89,190 summarized as follows:

| Location | Rent Expense |
|---|---|
| Suffolk, Virginia | $ 17,700 |
| Fishersville, Virginia (in-kind) | 71,490 |
| | $ 89,190 |

### Note 15. Passenger Fares

In their roll as providing a contract transportation service, VRT collects passenger fares that are remitted directly to the contracting party. A summary of 2019 fares collected for other contracting governments and those collected for VRT managed routes which are retained by VRT is as follows:

| Description | Fares |
|---|---|
| Total fares collected by Virginia Regional Transit | $ 256,770 |
| Third party fares collected by Virginia Regional Transit | (167,857) |
| Virginia Regional Transit fare revenue | $ 88,913 |

### Note 16. Fair Value Financial Instruments

The Organization's financial instruments are cash deposits, accounts receivable, grants receivable, other receivables, accounts payable and accrued expenses, the recorded values of which approximate their fair values based on their short-term nature.

### Note 17. Subsequent Events

VRT has evaluated events and transaction subsequent to June 30, 2019 through September 19, 2019 the date these financial statements were available to be issued, and determined that there were no material subsequent events requiring disclosure in the financial statements for the year ended June 30, 2019.

**VIRGINIA REGIONAL TRANSIT**

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**
**For The Year Ended June 30, 2019**

| Grant Information | Federal CFDA Number | Federal Expenditures |
|---|---|---|
| U.S. Dept. of Transportation – Federal Transit Administration | | |
| State Pass-through Program | | |
| Commonwealth of Virginia | | |
| Department of Rail and Public Transportation | | |
| FTA Section 5311 Program - Mass Transit - Operating | 20.509 | $ 1,495,555 |
| FTA Section 5311 Program - Mass Transit - Capital/Vehicle | 20.509 | 636,344 |
| | | $ 2,131,899 |

**NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**

**Note 1. Basis of Presentation**

The accompanying schedule of expenditures of federal awards (the "Schedule") includes the federal grant activity of VRT under programs of the federal government for the year ended June 30, 2019. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles and Audit Requirement for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of VRT, it is not intended to and does not present the financial position, changes in net assets or cash flows of VRT.

**Note 2. Summary of Significant Accounting Policies**

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Negative amounts shown on the Schedule represent adjustments or credits made in the normal course of business to amounts reported as expenditures in prior years. Pass-through entity identifying numbers are presented where available.

**Note 3. Indirect Cost Rate**

VRT maintains approved USDOT - FTA approved cost reimbursement direct programs.

# MITCHELL & CO., P.C.
CERTIFIED PUBLIC ACCOUNTANTS

JEFFREY D. MITCHELL, CPA
SANDRA M. TONDREAU, CPA
W. MATTHEW BURNS, CPA
AMANDA M. NOORDHOFF, CPA
KARA J. SANTMYER, CPA
TONJI M. LEISS, CPA

110 EAST MARKET STREET
SUITE 200
LEESBURG, VIRGINIA 20176
703.777.4900

108 W. WASHINGTON STREET
SUITE 203
MIDDLEBURG, VIRGINIA 20117
540.883.3173

WWW.MCOCPA.COM | FAX: 703.771.3082

MEMBERS
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

VIRGINIA SOCIETY OF
CERTIFIED PUBLIC ACCOUNTANTS


## REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS*

## INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Virginia Regional Transit
Purcellville, Virginia

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Virginia Regional Transit (VRT) (a nonprofit organization), which comprise the statement of financial position as of June 30, 2019, and the related statements of activities, and cash flows for September 19, 2019.

### Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered VRT's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of VRT's internal control. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

## REPORT IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

### Compliance and Other Matters

As part of obtaining reasonable assurance about whether VRT's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

### Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Leesburg, Virginia
September 19, 2019

Mitchell & Co., P.C.

# MITCHELL & CO., P.C.
CERTIFIED PUBLIC ACCOUNTANTS

JEFFREY D. MITCHELL, CPA
SANDRA M. TONDREAU, CPA
W. MATTHEW BURNS, CPA
AMANDA M. NOORDHOFF, CPA
KARA J. SANTMYER, CPA
TONJI M. LEISS, CPA

110 EAST MARKET STREET
SUITE 200
LEESBURG, VIRGINIA 20176
703.777.4900

108 W. WASHINGTON STREET
SUITE 203
MIDDLEBURG, VIRGINIA 20117
540.883.3173

WWW.MCOCPA.COM | FAX: 703.771.3082

MEMBERS
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

VIRGINIA SOCIETY OF
CERTIFIED PUBLIC ACCOUNTANTS


## REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

## INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Virginia Regional Transit
Purcellville, Virginia

### Report on Compliance for Each Major Federal Program

We have audited Virginia Regional Transit's (VRT) compliance with the types of compliance requirements described in the OMB Compliance supplement could have a direct and material effect on each of VRT's major federal programs for the year ended June 30, 2019. VRT's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

#### *Management's Responsibility*

Management is responsible for compliance with the requirements of laws, regulations, contracts, and grants applicable to its federal programs.

#### *Auditor's Responsibility*

Our responsibility is to express an opinion on compliance for each of VRT's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the Audit Requirements of Title 2 U.S. *Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about VRT's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of VRT's compliance.

#### *Opinion on Each Major Federal Program*

In our opinion, VRT complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2019.

## REPORT IN ACCORDANCE WITH UNIFORM GUIDANCE

### Report on Internal Control Over Compliance

Management of VRT is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered VRTs internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of VRT's internal control over compliance.

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not nor the other above referenced auditors identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Leesburg, Virginia
September 19, 2019

Mitchell & Co., P.C.

**VIRGINIA REGIONAL TRANSIT**

**SCHEDULE OF FINDINGS AND QUESTIONED COSTS**
**For The Year Ended June 30, 2019**

## Section I – Summary of Auditor's Results

*Financial Statements*:

| | | |
|---|---|---|
| Type of auditor's report issued on whether the financial statements were prepared in accordance with GAAP: | Unmodified | |
| Internal control over financial reporting | | |
| · Material weakness(es) identified: | ___ yes | ✓ no |
| · Significant deficiency(ies) identified: | ___ yes | ✓ no |
| Noncompliance material to financial statements noted: | ___ yes | ✓ no |

*Federal Awards*:

| | | |
|---|---|---|
| Internal control over major programs | | |
| · Material weakness(es) identified: | ___ yes | ✓ no |
| · Significant deficiency(ies) identified: | ___ yes | ✓ no |
| Type of auditor's report issued on compliance for major programs: | Unmodified | |
| Any audit findings disclosed that are required to be reported in accordance with Uniform Guidance section 510(a) of 2CFR.516(a): | ___ yes | ✓ no |

Identification of major programs:

| CFDA Number | Name of Federal Program Cluster |
|---|---|
| 20.509 | Federal Transit Administration |

| | | |
|---|---|---|
| Dollar threshold to distinguish between type A and type B programs: | $750,000 | |
| Auditee qualified as a low-risk auditee: | ___ yes | ✓ no |

## Section II – Financial Statement Findings

There are no current year questioned costs or prior year findings requiring follow-up.

## Section III – Federal Award Findings and Questioned Costs

There are no current year questioned costs or prior year findings requiring follow-up.

**VIRGINIA REGIONAL TRANSIT**

**GOVERNMENT GRANT FUNDED SCHEDULE OF FINANCIAL POSITION**
**June 30, 2019**

| | | |
|---|---|---|
| **ASSETS** | | |
| Current Assets | | |
| Cash deposits | $ | 94,107 |
| Grants receivable | | 319,209 |
| Other receivables | | 38,950 |
| Prepaid expenses/deposits/advances | | 17,691 |
| **Total current assets** | | 469,957 |
| Property, vehicles and equipment (net of accumulated depreciation of $6,129,035) | | 12,996,130 |
| **Total assets** | $ | 13,466,087 |
| **LIABILITIES AND NET ASSETS** | | |
| Current Liabilities | | |
| Accounts payable | $ | 77,165 |
| Accrued expenses | | 134,300 |
| **Total current liabilities** | | 211,465 |
| Net assets | | |
| Without donor restriction | | |
| Capital investment | | 12,996,130 |
| Undesignated | | 258,492 |
| **Total net assets** | | 13,254,622 |
| **Total liabilities and net assets** | $ | 13,466,087 |

**VIRGINIA REGIONAL TRANSIT**

**GOVERNMENT GRANT FUNDED SCHEDULE OF ACTIVITIES**
**For The Year Ended June 30, 2019**

| | Operating | Capital | **Totals** |
|---|---|---|---|
| **SUPPORT AND REVENUE** | | | |
| Public support | | | |
| Federal funds | $ 1,508,418 | 623,481 | **$ 2,131,899** |
| Virginia State funds | 675,534 | 124,697 | **800,231** |
| Loudoun County funds | 461,448 | 72,000 | **533,448** |
| Local government funds | 637,536 | - | **637,536** |
| Total public support | 3,282,936 | 820,178 | **4,103,114** |
| Revenue | | | |
| Passenger fares | 88,913 | - | **88,913** |
| Advertising service | 49,265 | - | **49,265** |
| Rental income | 45,310 | - | **45,310** |
| Gain on disposal of assets | 41,462 | - | **41,462** |
| Total revenue | 224,950 | - | **224,950** |
| **Total support and revenue** | 3,507,886 | 820,178 | **4,328,064** |
| **EXPENSES** | | | |
| Wages, payroll taxes and employee benefits | 2,052,113 | - | **2,052,113** |
| Other personnel costs | 26,578 | - | **26,578** |
| Vehicle operating costs | 403,077 | - | **403,077** |
| Communication services | 61,304 | - | **61,304** |
| Office expense | 78,737 | - | **78,737** |
| Occupancy and maintenance | 188,616 | - | **188,616** |
| Conferences and travel | 16,351 | - | **16,351** |
| Insurance | 189,315 | - | **189,315** |
| Advertising | 18,191 | - | **18,191** |
| Professional services | 43,806 | - | **43,806** |
| Commissions | 12,104 | - | **12,104** |
| Leased vehcile | 850 | - | **850** |
| Other fixed charges | 55,597 | - | **55,597** |
| Depreciation expense | - | 812,513 | **812,513** |
| **Total expenses** | 3,146,639 | 812,513 | **3,959,152** |
| **Changes in net assets** | $ 361,247 | $ 7,665 | **$ 368,912** |

INTERNAL REVENUE SERVICE
DISTRICT DIRECTOR
31 HOPKINS PLAZA
BALTIMORE, MD 21201

DEPARTMENT OF THE TREASURY

Date: AUG 12 1991

LOUDON COUNTY TRANSPORTATION
ASSOCIATION
P O BOX 2833
LEESBURG, VA 22075

Employer Identification Number:
62-1441965
Contact Person:
MISS D. BOWEN
Contact Telephone Number:
(301) 962-7756

Accounting Period Ending:
December 31
Foundation Status Classification:
509(a)(1)
Advance Ruling Period Begins:
August 20, 1990
Advance Ruling Period Ends:
December 31, 1994
Addendum Applies:
Yes

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably be expected to be a publicly supported organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, you will be treated as a publicly supported organization, and not as a private foundation, during an advance ruling period. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must submit to us information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, you will be classified as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, you will be classified as a private foundation for future periods. Also, if you are classified as a private foundation, you will be treated as a private foundation from the date of your inception for purposes of sections 507(d) and 4940.

Grantors and contributors may rely on the determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you submit the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until the Service makes a final determination of your foundation status.

LOUDON COUNTY TRANSPORTATION

If notice that you will no longer be treated as a publicly supported organization is published in the Internal Revenue Bulletin, grantors and contributors may not rely on this determination after the date of such publication. In addition, if you lose your status as a publicly supported organization and a grantor or contributor was responsible for, or was aware of, the act or failure to act, that resulted in your loss of such status, that person may not rely on this determination from the date of the act or failure to act. Also, if a grantor or contributor learned that the Service had given notice that you would be removed from classification as a publicly supported organization, then that person may not rely on this determination as of the date such knowledge was acquired.

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of $100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the private foundation excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment, or other Federal taxes, please let us know.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Contribution deductions are allowable to donors only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fundraising events may not necessarily qualify as deductible contributions, depending on the circumstances. See Revenue Ruling 67-246, published in Cumulative Bulletin 1967-2, on page 104, which sets forth guidelines regarding the deductibility, as charitable contributions, of payments made by taxpayers for admission to or other participation in fundraising activities for charity.

You are required to file Form 990, Return of Organization Exempt From Income Tax, only if your gross receipts each year are normally more than $25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file, simply attach the label provided, check the box in the head-

ing to indicate that your annual gross receipts are normally $25,000 or less, and sign the return.

If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of $10 a day is charged when a return is filed late, unless there is reasonable cause for the delay. However, the maximum penalty charged cannot exceed $5,000 or 5 percent of your gross receipts for the year, whichever is less. This penalty may also be charged if a return is not complete, so please be sure your return is complete before you file it.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

If we have indicated in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

Because this letter could help resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,

H. J. Lightcap

District Director

Enclosure(s):
Addendum
Form 872-C

# COUNTY OF MADISON

## FY2021 AGENCY FUNDING APPLICATION

**DEADLINE:** **January 13, 2020**

| **IDENTIFICATION** | |
|---|---|
| *Organization/Agency Name*: | Madison Community Cats, aka MAD Cats |
| *Street Name:* | Robinson Lane |
| *Mailing Address:* | 53 Robinson Lane, Syria VA 22743 |
| *Agency Contact:* | Laurie Counts |
| *Telephone Number:* | 540-738-0160, 540-229-1862 |
| *E-mail Address – Agency Contact* | madisoncommunitycats@gmail.com |
| *Agency's Web Address:* | www.madisoncommunitycats.org<br>facebook.com/madisoncommunitycats |
| *Federal Tax ID#:* | 83-2073006 |
| *Audit:* | ☐Yes X☐No |

| **PURPOSE/NARRATIVE** |
|---|
| *Missions and Goals:*<br><br>MAD Cats is dedicated to improving the lives of cats in our community by providing no/low cost spay and neuter services to cat owners and colony caretakers in rural Madison and Culpeper Counties, Virginia.<br><br>Our goals are to:<br>1. Stabilize the cat population by reducing the number of unwanted kittens born each year,<br>2. Encourage cat owners to spay/neuter and vaccinate their pets by providing no/low cost services, including trapping and transportation, |

3. Assist colony caretakers by providing monthly food delivery and winter shelters,
4. Foster orphans, litters and kittens from the community and our TNR projects. Work with local shelters and larger rescue organizations to transfer for adoption when kittens are healthy, socialized, spayed/neutered and vaccinated,

By achieving the goals listed above, we hope to reduce the number of cats and kittens surrendered to our local shelters and create a healthier cat community.

*Experience and Accomplishments:*

MAD Cats just completed our first year of operation, although we have been working in Madison and Culpeper counties previously as part of For the Cats' Sake. We formed our own organization in order to concentrate our efforts in Madison where there are no other cat rescues focusing on TNR, or Trap-Neuter-Return. In 2019, 219 cats and kittens went through our TNR program, 154 from Madison County. In 2020, MAD Cats intends to spend the majority of our resources, human and financial, in Madison County where our experience shows the need is greatest.

TNR is a globally recognized, humane approach to improving the lives of community cats and their owners/caretakers. Stray, feral or colony cats are trapped, spayed/neutered, vaccinated and returned to their owners/caregivers. Ear-tipping, while under anesthesia, easily identifies a cat as having gone through a TNR program.

Some of our accomplishments:

1. 253 cats spayed/neutered/vaccinated, (219 in 2019).
2. 71 distinct owners/caregivers assisted, 47 from Madison County.
3. 52 kittens went through our foster care program this year.
4. 4 colonies in Madison County are provided monthly deliveries of food.
5. 24 winter shelters provided to owners and caregivers for outdoor cats and colony use.
6. $14,308 spent on Spay/Neuter.
7. $3,600 spent caring for foster kittens and assisting community members with emergency vet expenses and routine care they could not afford.
8. $17 k plus income from fundraising including sale of cat socks at local events, major fundraiser, Give Local Piedmont in May 2019, and donation boxes placed throughout Madison County.
9. $6,250 in grants from non-profit animal rescue foundations

*Benefits of Funding:*

MAD Cats has created a budget for FY2020 (attached to this application) which projects that we will be able to Spay and Neuter approximately 200 cats from Madison County this year. We will accomplish this goal by setting up clinic dates each month through Charlottesville-Albemarle SPCA and transporting 12-15 cats per trip. We also use Madison-Greene Humane Society, Dr.

Hayes, when we take 2-4 cats needing S/N in between trips to Charlottesville.
Because we are partnering with the Culpeper Humane Society for Culpeper County TNR, we are freed from transporting cats from Culpeper and can focus our efforts more on Madison County. This year we are hoping to partner with the Madison County Animal Shelter to provide S/N services on a regularly scheduled basis to community members who need assistance with their owned, stray, or colony cats.
Offering S/N and transportation to the community at no cost, could potentially reduce the number of cats/kittens surrendered to the shelter. We often find that colony caregivers and even pet owners are unable to afford the prices charged by private vets. They may also have problems with transportation, or even need something as simple as a cat carrier. Un-neutered animals frequently have annoying habits that are greatly diminished with neutering. When owners are relieved of the expense of Spay/Neuter and vaccinations, they may be willing to keep their cats. This is especially true in the case of colonies when caregivers are offered assistance with feeding and removing adoptable kittens from the group. Colony sizes diminish over time especially when newcomers are quickly identified and sterilized.

*Intention of Use:*

*Intention of Use:*

Funding received from Madison County would be used solely for the purpose of TNR and providing spay/neuter services to county residents.

Our funding request is a range: The cost of S/N and vaccinations at CASPCA is currently $60 per cat.

Grant $2,500 = 41 cats spayed, neutered and vaccinated
Grant $5,000 = 83 cats spayed, neutered and vaccinated

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>*X General Community/Civic*<br>☐ *Human Services*<br>☐ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 2,500 - $5,000 |

Signature: *Laurie Counts* Title: Treasurer

Printed Name: Laurie Counts, Treasurer Date: 1/8/2020

# Madison Community Cats

## Outside Agency Request

- MAD Cats is a 501(3)c, all volunteer, organization serving Madison and Culpeper Counties.
- Our Mission is to reduce cat over-population by operating a low/no cost spay and neuter program, Trap/Neuter/Return (TNR).
- Our TNR program is globally recognized as the most effective method for controlling cat populations.*

*Research shows that euthanizing large numbers of feral/community cats tends to make the population increase. TNR stabilizes the population. Eventually the stabilized population decreases.

# Madison Community Cats

## Outside Agency Request

**What We Do:**

- MAD Cat volunteers trap and transport using their own equipment and vehicles.
- In 2019 we spayed/neutered/vaccinated 219 cats:
  - 154 (70%) were from Madison County.
  - We provide cat food to five colony caretakers every two weeks and winter shelters as needed.
  - On request we assist cat owners with vet expenses that are beyond their means to provide.

# Madison Community Cats

## Outside Agency Request

**Benefits:**

- Fewer cats surrendered to shelter
    - Euthanasia rate reduced
- Fewer litters of unwanted kittens
- Healthier cat population
- Colony caretakers and Cat owners supported
- Fewer complaints to the County

# MADISON COMMUNITY CATS Operating Budget FY2020

| SUMMARY | | Projected Annual Total |
|---|---|---|
| | **Income** | $40,500 |
| | **Expenses** | $29,395 |
| | **Difference** | $11,105 |
| **INCOME** | | |
| | **Fundraising** | **$20,000** |
| | Annual Festivals & Events | $7,500 |
| | Breweries/Wineries/Misc | $3,500 |
| | Donation Cans | $5,500 |
| | Give Local Piedmont | $3,500 |
| | **Donations** | $8,500 |
| | Facebook | $2,000 |
| | Individual Contributions | $2,500 |
| | Spay/Neuter | $4,000 |
| | **Grants** | **$12,000** |
| | Jessica Beath Foundation | $5,000 |
| | On Shore Foundation | $1,000 |
| | Other Sources | $6,000 |
| **EXPENSES** | | |
| | **Administrative** | $1,495 |
| | Marketing(Constant Contact) | $240 |
| | Marketing Supplies | $300 |
| | Membership | $150 |
| | Postage | $80 |
| | Printing | $300 |
| | State Corporation Commission | $25 |
| | Web Maintainance Fees | $400 |
| | **Colony Cats** | **$1,890** |
| | Food | $1,890 |
| | **Fundraising Expenses** | **$3,000** |
| | Socks | $3,000 |
| | **Spay/Neuter** | **$18,360** |
| | Anicira Veterinary Center | $0 |
| | CASPCA | $14,400 |
| | CHS Alliance | $2,160 |
| | Madison Companion | $0 |
| | Madison-Green Humane | $1,800 |
| | **TNR Equipment** | **$600** |
| | **Vet Supplies, Test Kits, Vaccines** | **$450** |
| | **Veterinary Expenses** | **$3,600** |
| | Culpeper Animal Hospital | $3,600 |

# Category Summary 2019

Date Range: Custom Dates (1/1/2019 – 12/31/2019)
Accounts: MADCats
Categories: Adjustment, Administrative, and 84 more
Tags: All Tags

Type: Custom

☑ Show Memo/Notes

## ▼ Money In $32,528.64

| | |
|---|---|
| **Adjustment** | **$2.70** |
| **Fundraising** | **$18,790.17** |
| **Annual Festivals & Events** | **$7,360.50** |
| **Breweries/Wineries/Misc** | **$3,051.00** |
| **Donation Cans** | **$5,446.00** |
| **Give Local Piedmont** | **$2,932.67** |
| **Income** | **$13,735.77** |
| **Donations** | **$7,485.77** |
| **Facebook** | **$1,652.00** |
| **Individual Contributions** | **$2,217.77** |
| **Spay/Neuter** | **$3,616.00** |
| **Grants** | **$6,250.00** |
| **Jessica Beath** | **$5,250.00** |
| **On Shore Foundation** | **$1,000.00** |

## ▼ Money Out -$25,119.93

| | |
|---|---|
| **Administrative** | **-$935.54** |
| **Marketing Supplies** | **-$476.32** |
| **Printing and Reproduction (Business)** | **-$150.00** |
| **State Corporation Commission** | **-$25.00** |
| **WebMaintainanceFees** | **-$284.22** |
| **Colony Cats** | **-$1,142.81** |
| **Food** | **-$1,142.81** |
| **Fundraising Expenses** | **-$2,961.66** |
| **Socks** | **-$2,961.66** |
| **Spay/Neuter** | **-$15,227.65** |
| **Anicira** | **-$1,469.00** |

| | |
|---|---|
| **CASPCA** | **-$2,660.00** |
| **CHS** | **-$375.00** |
| **Madison Companion** | **-$9,727.65** |
| **Madison-Green** | **-$996.00** |
| **TNR-Equipment** | **-$799.40** |
| **Vet Supplies, Test Kits, Vaccines** | **-$433.54** |
| **Veterinary Expenses** | **-$3,619.33** |
| **Culpeper Animal Hospital** | **-$3,619.33** |

| | |
|---|---|
| Money In: | $32,528.64 |
| Money Out: | -$25,119.93 |
| Net Total: | $7,408.71 |

Form **990-N**

# Electronic Notice (e-Postcard)

**for Tax-Exempt Organization not Required to File Form 990 or 990-EZ**

OMB No. 1545-2085

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

**A** For the **2018** Calendar year, or tax year beginning **2018-01-01** and ending **2018-12-31**

**B** Check if available
- ☐ **Terminated for Business**
- ☑ **Gross receipts are normally $50,000 or less**

**C** Name of Organization: **MADISON COMMUNITY CATS**
**53 Robinson Lane, Syria, VA,**
**US, 22743**

**D** Employee Identification Number **83-2073006**

**E** Website:

**F** Name of Principal Officer: **Gary Misch**
**53 Robinson Lane, Syria, VA,**
**US, 22743**

Information Copy. Do not send to IRS.

**Privacy Act and Paperwork Reduction Act Notice:** We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times is 15 minutes.

**Note: This image is provided for your records only. Do Not mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.**

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: DEC 04 2018

MADISON COMMUNITY CATS
53 ROBINSON LANE
SYRIA, VA 22743-0000

Employer Identification Number:
83-2073006
DLN:
26053717003558
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
509(a)(2)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
October 29, 2018
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947

# COUNTY OF MADISON

## FY2020 AGENCY FUNDING APPLICATION

**DEADLINE:** January 11, 2019

| IDENTIFICATION | |
|---|---|
| *Organization/Agency Name:* Madison Learning Center, Inc. | |
| *Street Name:* 634 S. Main St | |
| *Mailing Address:* PO Box 665, Madison 22727 | |
| *Agency Contact:* Frances Lacy | |
| *Telephone Number:* 540-718-0053 | |
| *E-mail Address – Agency Contact* fjklacy990gmail.com | |
| *Agency's Web Address:* madisonlearningcenterchildcare.org | |
| *Federal Tax ID#:* 84-2128523 | |
| *Audit:* | ☐ Yes ☒ No |

| PURPOSE/NARRATIVE |
|---|
| *Missions and Goals:* See attached |
| *Experience and Accomplishments:* See attached |
| *Benefits of Funding:* See attached |

| |
|---|
| *Intention of Use:*<br>See attached |

| **FUNDING** | |
|---|---|
| *Category of Funding* | ☐ *Public Safety*<br>☐ *Health*<br>☐ *Arts/Culture*<br>☒ *General Community/Civic*<br>☐ *Human Services*<br>☒ *Education*<br>☐ *Environment*<br>☐ *Recreation* |
| *Funding Request:* | $ 30,000⁻ |

Signature: Frances Lacy Title: Madison Learning Center Board Chair

Printed Name: Frances Lacy Date: Jan 10, 2020

The 2020 mission and goal of Madison Learning Center is to continue to provide quality, affordable education and child care for families in Madison and surrounding counties. There is an ongoing need for licensed child care in Madison County. MLC is the only licensed child care center in the county. In order for families to be employed they need to have a safe and affordable place to take their children. Along with child care MLC provides an age appropriate curriculum. Many studies have proven the benefits of early childhood education. A recent research titled "The Lifecycle Benefits of an Influential Early Childhood Program" by James J. Heckman, an economic professor at the University of Chicago shows that high quality birth-to-five programs for disadvantaged children can deliver a 13% per year return on investment. The investment in quality care for children benefits all children and their families. Along with the programs offered at the Primary School and Head Start, Madison Learning Center provides the quality early childhood education that is very important for all children to have before they enter Kindergarten.

The awarding of funds from the county would assist MLC by establishing a Capital Improvement Fund, and a Fund for tuition assistance. By having these funds Madison Learning Center will be able to focus the income that is received into staff salaries and programs for the children.

The building that houses MLC was completed in 1997, and is consequently facing some major repairs and replacements. There are 8 HVAC units and 6 are original to the building. The roof is in need of attention, and possible replacement. The tile floor in one room needs to be replaced, and there are three windows that need to have glass replaced. To stay in compliance with the state regulations and provide a safe place for the children to play, the playground is in need of more pea gravel, and maintenance or replacement is needed on the current playground equipment.

MLC is absorbing on average $ 250 a week by helping families on the Tuition Assistance Program offered by MLC. A fund for tuition assistance would enable the moneys currently being absorbed to be put into income for MLC. There are many families in need of child care that fall "in the crack" of making to much income to receive social services assistance for child care, and not making enough money to afford child care. A fund for tuition assistance would enable MLC to provide more families with quality child care.

Madison Learning Center has received donations from many individuals, as well as from Skyline CAP, Mt Zion United Methodist Men, Rapidan Baptist Church, and Madison Presbyterian Church Women. Skyline CAP has pledged $20,000 a year. The only direct income Madison Learning Center receives is from the weekly tuition from each family and the tuition paid by subsidy payments families qualify for through Department of Social Services.

Madison Learning Center (MLC) was created in August of 2014 under the umbrella of the non-profit Madison Emergency Services Association, Inc. (MESA). MLC opened using the non-profit status and EIN of MESA in the operation of the Virginia Department of Social Services licensed child care center known as "Madison Learning Center", operated by Madison Emergency Services Association.

In December of 2019 MLC received its own incorporation, EIN, new license from the Virginia Department of Social Services, and federal non-profit status. The center is now operating and licensed as Madison Learning Center, Inc. The daily activities of MLC are managed by the Director, which in turn are governed by the MLC Board.

All programs are conducted on a non-discriminatory basis with regard to race, color, religion, national origin, sex, or disability. The mission of Madison Learning Center is to provide a year round safe and educational environment for children from 4 weeks of age to 11 years of age, following the regulations set forth by the Virginia Department of Social Services Licensing regulations, and the best standards of early childhood education and before and after school care.

The enrollment economically reflects the population of Madison County. Depending on the current enrollment, up to fifty percent of the families have qualified for free or reduced classification under the CACFP USDA program, in which MLC participates. An average of 26 percent of the children receive tuition assistance through local Department of Social Services from Madison and surrounding counties. The DSS assistance is provided for families that qualify financially as well as children in foster care. An average of 10 percent of the children receive tuition assistance through a Tuition Assistance program sponsored by MLC.

Madison Learning Center, Inc. received notification by mail of their 501(c) (3) status at the end of December 2019. The 990 form has not yet been submitted. Madison Learning Center, Inc. began operation on December 2, 2019. Prior to that date Madison Learning Center was operating under the umbrella, and non profit status, of Madison Emergency Services Association, our license to operate as a child care center read Madison Learning Center operated by Madison Emergency Services Association.

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: DEC 12 2019

MADISON LEARNING CENTER
INCORPORATED
C/O MLC
PO BOX 665 634 S MAIN ST
MADISON, VA 22727-0665

Employer Identification Number:
84-2128523
DLN:
29053212332019
Contact Person:
MARIA S TRITCH ID# 31549
Contact Telephone Number:
(877) 829-5500

Accounting Period Ending:
December 31
Public Charity Status:
509(a)(2)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
July 12, 2019
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

MADISON LEARNING CENTER

Sincerely,

Director, Exempt Organizations
Rulings and Agreements

## Madison Learning Center

| Statement of Revenues and Expenses | | | | | |
|---|---|---|---|---|---|
| **Revenues** | | | | | |
| | **Types of revenue or expense** | **Prior tax years** | | **Current tax year** | |
| | **From:** | 1/1/2018 | 1/1/2019 | 1/1/2020 | **Total** |
| | **To:** | 12/31/2018 | 12/31/2019 | 12/31/2020 | |
| 1 | Gifts, grants, and contributions received | 8361 | 13500 | 25000 | 46861 |
| 2 | Admissions (Tuition) | 462418 | 478500 | 502425 | 1443343 |
| 3 | Any revenue not otherwise listed above or in lines 5-8 below | | | | |
| 4 | Total of lines 1-3 | 470779 | 492000 | 527425 | 1490204 |
| 5 | Net gain or loss on sale of capital assets | | | | |
| 6 | Unusual grants | | | | |
| 7 | Total Revenue-lines 4-6 | 470779 | 492000 | 527425 | 1490204 |
| | | | | | |
| **Expenses** | | | | | |
| 8 | Fundraising expenses | 606 | 1000 | 1000 | 2606 |
| 9 | Salaries and wages | 383186 | 390000 | 401700 | 1174886 |
| 10 | Interest expense | | | | |
| 11 | Occupancy (rent, utilities, etc.) | 18958 | 20000 | 20600 | 59558 |
| 12 | Professional fees | 2880 | 3000 | 3000 | 8880 |
| 13 | Expenses not otherwise classified | 86204 | 78550 | 79150 | 243904 |
| 14 | Total Expenses-lines 8-13 | 491834 | 492550 | 505450 | 1489834 |