ELTON N. DEAN, SR.
CHAIRMAN

DANIEL HARRIS, JR.
VICE CHAIRMAN

ANDREW D. HALL
RONDA M. WALKER
JILES WILLIAMS, JR.

A COUNTY OLDER THAN THE STATE

MONTGOMERY COUNTY COMMISSION

P.O. BOX 1667
MONTGOMERY, ALABAMA 36102-1667

ESTABLISHED 1816

DONALD L. MIMS, CPA, MPA
ADMINISTRATOR

FLORENCE M. CAUTHEN
DEPUTY ADMINISTRATOR

(334) 832-1210
FAX (334) 832-2533

September 8, 2016

MEMORANDUM

TO: Montgomery County Commission

FROM: Donald L. Mims DLM
County Administrator

SUBJECT: Information pertaining to the September 12, 2016 Montgomery County Commission Regular Meeting

The Examiners of Public Accounts are completing their audit and have requested to have their Audit Exit Conference with the County Commission on Monday, September 12, 2016 at 3:30 p.m. **We will be conducting this meeting at Saint James United Methodist Church, 9045 Vaughn Road, Montgomery, AL, prior to the 4:00 p.m. information meeting**. This meeting with the auditors is not open to the public per state law. **The Formal Session will begin at 5:30 p.m.**

On August 1, 2016, Public Affairs Director DiDi Henry presented a Resolution Proclaiming September 22, 2016 as Character Day in Montgomery County and the Commission agreed to place this item on a future agenda. I have placed this item on the September 12, 2016 agenda.

Also, enclosed in your packet is a copy of the Unappropriated Balances for the Commissioners' In-House Miscellaneous Appropriations.

1. County Commission Information Session Schedule for September 12, 2016

Waived Rules Items to Consider for September 12, 2016

2. Consider Authorization of a $25,000 Budget Change Request to the Montgomery Association for Retarded Citizens for the Recycling Program at McInnis School, County Commission Appropriations **(If approved, this Budget Change would be funded from Donation Revenue) (Chairman Dean requested that the Commission consider this item)**

3. Consider Authorization of Budget Change Requests (4)
   (1) County Commission Appropriations – Request Numbers 84, 85 and 86
   (2) County Commission Office – Request Number 3
   (3) Finance Department – Request Number 1
   (4) Revenue Commissioner's Office – Request Number 1

Items to Consider for Monday, October 3, 2016 Montgomery County Commission Regular Meeting Agenda

4. Consider Authorization of Official Intent Resolution Relating to the Proposed Improvements to Montgomery County Courthouse Annex I, County Commission

5. Consider Authorization of Resolution Proclaiming October 7, 2016 as Manufacturing Day in Montgomery County, County Commission

6. Consider Authorization of Retail Beer (Off Premises Only) and Retail Table Wine (Off Premises Only) Licenses to Applicant DolGenCorp, LLC, for Dollar General Store 17394, located at 30 Johnny Shirley Road, Ramer, Alabama 36069, County Commission

7. Consider Payment of 2017 Membership Dues to the Association of County Administrators of Alabama (ACAA) for Administrator Donald L. Mims and Deputy Administrator Florence M. Cauthen, County Commission **(Dues are the same as last year)**

Personnel Actions

8. Consider Authorization of Position Fill Requests – Detention Facility (2)
   (1) Corrections Officer Trainee (CO0419)/Corrections Officer (CO0420), Position Number 088
   (2) Corrections Officer Trainee (CO0419)/Corrections Officer (CO0420), Position Number 90

General Information

9. Copies of Documents from Montgomery Area Non-traditional Equestrians (MANE):
   1. About MANE!
   2. Introduction to MANE
   3. List of Board of Directors for 2016
   4. 2016 Budget
   5. Financial Statements for Year Ending September 30, 2015
   6. Audit of 2013 and 2014 Financial Statements
   7. Internal Revenue Service Form 990

10. Copy of Summary Information for Proposed Constitutional Amendments to Appear on the 2016 General Election Ballot, provided by ACCA

11. Copy of Letter from Executive Director Karen B. Sellers with the Family Sunshine Center requesting Funding to Renovate the Shelter **(The Commission appropriated $31,700 in FY15 and FY16 to this Organization)**

12. Copy of Letter from City-County Personnel Board Chairman John F. Baker regarding Board Member Appointment

13. Copy of Letter from Founder/Executive Director Earnestine Woods with Have a Heart 4 Children requesting Funding for the Annual Holiday Event **(In 2015 and 2014, the County Commission approved Budget Change Requests in the amount of $3,000 each for this event)**

14. Copy of Schedule of Upcoming Bids/Contract Renewals for September, October and November 2016

15. Copy of Service of Process Fee (Sheriff Process Fee) Collection for September 2016

16. Copies of Revenue Reports for August 2016 from Tax and Audit Department

17. Copy of Population Report for August 2016 for the Mac Sim Butler Detention Facility

18. Copy of Population Report for August 2016 for the Youth Facility

If you have any questions, please contact me.

/tn

Attachments

COUNTY COMMISSION
INFORMATION SESSION SCHEDULE
FOR
SEPTEMBER 12, 2016

4:00 p.m.	Prayer led by Commissioner Williams and Administrator's Briefing regarding the Agenda and Scheduled Attendees
4:10 p.m.	President Kelly Wilson and Board Member Susie Wilson with Montgomery Area Non-traditional Equestrians (MANE) – Presentation regarding the Organization **(General Information Item 9)**
4:25 p.m.	Chairman George Noblin with the Board of Registrars – Presentation regarding Position Fill Request
4:35 p.m.	Finance Director Sherrill Thomas – Presentation regarding Budget Change Requests **(Waived Rules Item 3)**
4:45 p.m.	Chief Information and Technology Officer Lou Ialacci – Update regarding Information Systems Operations
4:55 p.m.	County Engineer George Speake – Update regarding Engineering Department Operations
5:30 p.m.	Formal Session of County Commission

Waived Rules Item Number 2 - Consider Authorization of a $25,000 Budget Change Request to the Montgomery Association for Retarded Citizens for the Recycling Program at McInnis School, County Commission Appropriations **(Chairman Dean requested that the Commission consider this item)**

This Budget Change Request will be presented at a later date

MONTGOMERY COUNTY COMMISSION
BUDGET CHANGE REQUEST

REQUEST NUMBER 84

DEPARTMENT: County Comm Appropria REVIEWED: S. Thomas 9/6/2016
DATE: 9/6/2016 Finance Director Date
REQUESTED BY: Donald L. Mims APPROVED:
Elected Official/Dept. Head Administrator Date

ACCOUNT NAME	ACCOUNT NUMBER	CURRENT BUDGET	INCREASE (DECREASE)	REVISED BUDGET
Sale of Property	001-40000.47315	0	(370,100)	(370,100)
Insurance Property Damage	001-40000.47311	(13,122)	(25,162)	(38,284)
Legal Service Retainer	001-51100.154	31,873	3,187	35,060
Legal Services	001-51100.305	0	55,000	55,000
Legal and Other Land Purchase exp	001-51100.512	0	4,688	4,688
Courthouse Telephone	001-51210.251	1,200	278	1,478
Courthouse Cable Service	001-51210.259	400	27	427
Reimbursement for Court Employee	001-51210.290	0	75,000	75,000
Domestic Court Telephone	001-51211.251	900	50	950
Circuit Clerk Social Security	001-51220.124	1,245	841	2,086
Circuit Clerk Cable Service	001-51220.259	900	308	1,208
Circuit Clerk Adm Expense	001-51220.499	880	(880)	0
District Clerk Telephone	001-51220.251	1,400	35	1,435
Court Reporters Life Insurance	001-51280.123	270	22	292
Court Reporters Workers Comp	001-51280.125	0	39	39
Court Reporters Social Security	001-51280.124	11,160	15	11,175
Court Reporters Retirement	001-51280.121	16,200	(600)	15,600
Court Administrator Telephone	001-51292.251	650	77	727
Revenue Comm. Legal Services	001-51500.305	6,000	37,000	43,000
Tax & Audit Legal Services	001-51800.305	0	7,700	7,700
Tax & Audit Contract Services	001-51800.304	176,939	(7,700)	169,239
Support Services MV Repair	001-51901.234	6,637	30	6,667
Support Services Water	001-51901.246	180,000	320,000	500,000
Support Services Bldg. Insurance	001-51901.271	93,738	10,250	103,988
Support Services Natural Gas	001-51901.245	40,000	(12,000)	28,000

3-1

MONTGOMERY COUNTY COMMISSION
BUDGET CHANGE REQUEST

REQUEST NUMBER 84

DEPARTMENT: County Comm Appropri REVIEWED: S. Thomas 9/6/2016
DATE: 9/6/2016 Finance Director Date
REQUESTED BY: Donald L. Mims APPROVED:
Elected Official/Dept. Head Administrator Date

ACCOUNT NAME	ACCOUNT NUMBER	CURRENT BUDGET	INCREASE (DECREASE)	REVISED BUDGET
Industrial Development Incentives	001-51955.446	72,000	156,037	228,037
Contingent-Other Misc Supplies	001-51988.219	500	43	543
Contingent-Employee Awards	001-51988.142	1,000	(43)	957
Sheriff College Incentive Program	001-52110.143	3,024	8,631	11,655
Sheriff Legal Services	001-52110.305	5,197	2,636	7,833
Sheriff Motor Vehicles	001-5110.551	627,748	40,666	668,414
Jail Legal Services	001-52200.305	0	420	420
Pauper Burial	001-56300.424	5,000	3,000	8,000
DHR Building Repairs	001-56600.231	0	2,908	2,908
Extension Service Natural Gas	001-58200.245	2,150	(200)	1,950
Extension Service Water	001-58200.246	800	200	1,000
Security Contract (Probate/Rev)	001-59310.186	77,000	(10,000)	67,000
In House Software Annual Main	001-59310.240	112,000	985	112,985
In House Contract Services	001-59310.304	97,500	5,500	103,000
In House Professional Services	001-59310.307	0	150,000	150,000
In House Bank/Trustee Fees	001-59103.329	15,000	15,000	30,000
Land Purchase (Terminal Road)	001-59310.511	244,500	18,001	262,501
Land Legal Fees (Terminal Road)	001-59103.512	25,600	1,854	27,454
Janitorial Services	001-59315.152	102,000	30,000	132,000
Courthouse Security Contract	001-59315.187	227,621	5,218	232,839
Transfer to Construction Fund	001-62100.62206	0	120,000	120,000
Fund Balance Restricted for DHR	001.34911		(2,908)	
Fund Balance	001.35900		(646,053)	(646,053)
TOTAL		2,175,910	0	2,178,818

JUSTIFICATION:

Year End budget realignment to cover overages and additional expenditures.

3-2

BUDGET FORM 5

MONTGOMERY COUNTY COMMISSION

BUDGET CHANGE REQUEST

REQUEST NUMBER 85

DEPARTMENT: County Comm Appropriation REVIEWED: S. Thomas 9/7/2016

DATE: 9/7/2016 Finance Director Date

REQUESTED BY: Donald L. Mims APPROVED:

Elected Official/Dept. Head Administrator Date

ACCOUNT NAME	ACCOUNT NUMBER	CURRENT BUDGET	INCREASE (DECREASE)	REVISED BUDGET
Weatherization Grant Revenue	125-40000.44788	0	(24,545)	(24,545)
Byrne Memorial-Grant Revenue	125-40000.44711	0	(15,300)	(15,300)
Byrne Memorial-Law Enforcement Equip	125-52715.592	0	15,300	15,300
Weatherization-LIWAP 16 Program Exp	125-56716.238	0	24,545	24,545
TOTAL		0	0	0

JUSTIFICATION:

Budget Change to cover Grant budgets.

3-3

MONTGOMERY COUNTY COMMISSION
BUDGET CHANGE REQUEST

REQUEST NUMBER 86

DEPARTMENT: County Comm Appropriati REVIEWED: S. Thomas 9/7/2016
DATE: 9/7/2016 Finance Director Date
REQUESTED BY: Donald L. Mims APPROVED:

ACCOUNT NAME	ACCOUNT NUMBER	CURRENT BUDGET	INCREASE (DECREASE)	REVISED BUDGET
Capital Improvement Fund				
Oil and Gas Revenue	116-40000.44197	(800,000)	(56,220)	(856,220)
Annex I DA Project- Architect Fees	116-51101.523	0	2,847	2,847
Annex I DA Project- Bldg Renovations	116-51101.524	0	74,793	74,793
Annex I DA Project- Equipment	116-51101.541	0	7,542	7,542
Jail Weatherization-Professional Fees	116-51104.307	0	1,700	1,700
Jail Weatherization-Architect Fees	116-51104.523	0	3,409	3,409
Jail Weatherization-Bldg Renovations	116-51104.524	0	227,248	227,248
Courthouse HVAC & Fire Alarm-Archt Fees	116-51125.523	0	5,311	5,311
Courthouse HVAC & Fire Alarm-Bldg.	116-51125.524	0	307,902	307,902
Annex I Sheriff Dispatch Project-Archt Fees	116-52150.523	0	77,580	77,580
Courthouse Security Software	116-57202.586	0	246,742	246,742
Courthouse Security Equipment	116-57202.591	0	30,000	30,000
Courthouse Projects	116-57202.529	1,917,159	(928,854)	988,305
Construction Fund				
Annex I Repair and Maintenance	206-51101.231	0	3,340	3,340
Jail Weatherization-Professional Fees	206-51104.304	0	3,000	3,000
Jail Weatherization-Architect Fees	206-51104.523	0	6,680	6,680
Jail Weatherization-Bldg Renovations	206-51104.524	0	445,329	445,329
Annex III Parking Modifications-Adv	206-51107.253	0	1,689	1,689
Annex III Parking Modifications-Archt. Fees	206-51107.523	0	12,813	12,813
County Signage project-Architect Fees	206-51111.523	0	1,920	1,920
Parking Deck Impr-Architect Fees	206-51112.523	0	5,430	5,430
Courthouse HVAC & Fire Alarm-Archt Fees	206-51125.523	0	13,364	13,364
Courthouse HVAC & Fire Alarm-Bldg.	206-51125.524	0	774,698	774,698
Annex III Probate Renovation-Archt. Fees	206-51301.523	0	1,342	1,342
Annex III Probate Renovation-Bldg Reno	206-51301.524	0	17,646	17,646
Jail Window Repair	206-52200.231	0	4,280	4,280
Jail Kitchen Project-Architect Fees	206-52200.523	0	7,194	7,194
Jail Kitchen Project-Construction	206-52200.524	0	352,389	352,389
Youth Facility Project-Architect Fees	206-52602.523	0	3,457	3,457
Construction Projects	206-51107.524	1,091,126	(1,091,126)	0
Fund Balance	206.35900		(563,445)	(563,445)
	TOTAL	2,208,285	0	2,208,285

JUSTIFICATION:

Budget Change to cover construction project budgets.

BUDGET FORM 5

MONTGOMERY COUNTY COMMISSION

BUDGET CHANGE REQUEST

REQUEST NUMBER 3

DEPARTMENT:	County Commission	REVIEWED:	S. Thomas	9/6/2016
DATE:	9/6/2016	Finance Director		Date
REQUESTED BY:	Donald L. Mims	APPROVED:		
Elected Official/Dept. Head		Administrator		Date

ACCOUNT NAME	ACCOUNT NUMBER	CURRENT BUDGET	INCREASE (DECREASE)	REVISED BUDGET
Overtime	001-51100.113	0	449	449
Telephone	001-51100.251	2,900	250	3,150
Registration and training	001-51100.265	36,500	1,000	37,500
Dues	001-51100.303	21,125	19	21,144
Advertising	001-51100.253	1,800	(760)	1,040
Cellular Service	001-51100.255	5,300	(1,000)	4,300
Digital Cable	001-51100.259	550	42	592
	TOTAL	68,175	0	68,175

JUSTIFICATION:

To realign the County Commission budget to cover overages and additional expense.

BUDGET FORM 5

MONTGOMERY COUNTY COMMISSION

BUDGET CHANGE REQUEST

REQUEST NUMBER 1

DEPARTMENT:	Finance	REVIEWED:	S. Thomas	9/6/2016
	9/6/2016	Finance Director		Date
REQUESTED BY:	Sherrill Thomas	APPROVED:		
Elected Official/Dept. Head	Finance Director	Administrator		Date

ACCOUNT NAME	ACCOUNT NUMBER	CURRENT BUDGET	INCREASE (DECREASE)	REVISED BUDGET
Dues	001-51110.303	1,000	20	1,020
Telephone	001-51110.251	700	50	750
Office Supplies	001-51110.211	7,000	(70)	6,930
	TOTAL	8,700	0	8,700

JUSTIFICATION:

To realign the budget to cover increased professional dues and telephone.

3-6

BUDGET FORM 5

MONTGOMERY COUNTY COMMISSION

BUDGET CHANGE REQUEST

REQUEST NUMBER 1

DEPARTMENT:	Revenue Commissioner	REVIEWED:	S. Thomas	8/31/2016
DATE:	8/31/2016	Finance Director		Date
REQUESTED BY:	Janet Buskey	APPROVED:		
Elected Official/Dept. Head		Administrator		Date

ACCOUNT NAME	ACCOUNT NUMBER	CURRENT BUDGET	INCREASE (DECREASE)	REVISED BUDGET
Printing and Bookbinding	001-51500-309	2,000	(2,000)	0
Copy Machine Rental	001-51500-223	5,000	500	5,500
Digital Cable Service	001-51500.259	300	143	443
Telephone	001-51500.251	10,000	1,357	11,357
TOTAL		17,300	0	17,300

JUSTIFICATION:

To realign the budget to cover overages.

Tammy Nix

From: Clinton D. Graves <cgraves@gilpingivhan.com>
Sent: Wednesday, September 07, 2016 9:34 AM
To: Donald Mims
Cc: Tammy Nix; Bonnie Hinson
Subject: Official Intent Resolution re Annex 1 Improvements
Attachments: Official Intent Resolution (Annex One Renovation Project) (00930440-2x9D9C7).doc

Donnie,

Pursuant to our conversation, attached for your review is a draft official intent resolution relating to the proposed improvements to Annex 1. The dates on the front page of the resolution have been left blank. Please let me know if you have any questions or comments.

Thanks,

Clint

Clinton D. Graves
Gilpin Givhan, PC
Lakeview Center, Suite 300
2660 EastChase Lane
Montgomery, Alabama 36117
Telephone: (334) 244-1111
Direct Dial (334) 409-2232
Fax: (334) 244-1969
E-mail: cgraves@gilpingivhan.com
Web: www.gilpingivhan.com

GILPIN GIVHAN

4-1

I, the undersigned County Administrator of Montgomery County, Alabama, hereby certify that the attached pages numbered consecutively from 1 to 2, inclusive, constitute a true, correct, and complete copy of a resolution and order adopted by the Montgomery County Commission at a regular meeting of said County Commission held on September ___, 2016, as the same appears in the records of said County Commission, and that said resolution and order has not been rescinded, repealed, or amended in any respect and is still in full force and effect.

WITNESS my signature, as County Administrator of Montgomery County, Alabama, under its seal, this ___ day of September, 2016.

_____

County Administrator of
Montgomery County, Alabama

[S E A L]

BE IT RESOLVED AND ORDERED by the Montgomery County Commission as follows:

Section 1. **Findings.** The Montgomery County Commission (the "Commission"), which is the governing body of Montgomery County, Alabama (the "County"), has found and ascertained and does hereby declare as follows:

(a) The Commission has projected significant capital expenditures relating to various capital improvements and equipment to be acquired, constructed, and equipped with respect to certain renovations and improvements to the Sherriff's Office and such other renovations and improvements to the 1st floor of the Annex One building located within the County as deemed necessary by the Commission (collectively, the "Annex One Renovation Project");

(b) The Commission has determined that (i) the Commission will be required to make substantial capital expenditures with respect to the Annex One Renovation Project, and (ii) the Commission intends to pay such capital expenditures for the Annex One Renovation Project with tax-exempt indebtedness;

(c) The Commission has determined that it is desirable and in the best interest of the citizens and taxpayers of the County for tax-exempt warrants to be issued by the Commission or to cause such warrants to be issued by a public building authority or such other public entity on behalf of the Commission in the approximate aggregate amount not to exceed $3,000,000, in one or more series (the "Warrants"), for the purposes of (i) funding the Annex One Renovation Project, and (ii) paying the issuance expenses of the Warrants;

(d) The Commission reasonably expects to issue the Warrants, or cause a public building authority or such other public entity acting on the Commission's behalf to issue the Warrants, in an amount not in excess of $3,000,000 to provide funds for the above referenced purposes and hereby declares its official intent to reimburse prior expenditures relating to the above referenced purposes with proceeds from the issuance of the Warrants pursuant to Treasury Regulation Section 1.150-2.

Section 2. **Official Intent Declaration.** This declaration is made solely for the purpose of establishing compliance with the requirements of Treasury Regulation Section 1.150-2 and does not bind the Commission to make any expenditure, incur any indebtedness, or proceed with the Annex One Renovation Project.

Section 3. **Reimbursement of Prior Expenditures.** The Commission hereby acknowledges that certain costs related to the Annex One Renovation Project are expected to be paid by the County prior to the issuance of the Warrants (including costs heretofore incurred within sixty (60) days prior to the adoption of this resolution). To the extent that any such expenditures are or have been incurred and paid prior to the issuance of the Warrants, the Commission hereby states that it reasonably expects to apply a portion of the proceeds of the Warrants to reimburse the Commission for the moneys expended for the initial payment of such expenditures for the Annex One Renovation Project.

Section 4. **Effective Date.** This resolution shall be effective immediately.

Commissioner _____ thereupon moved that said resolution be adopted, which motion was seconded by _____, and, upon the said motion being put to vote, he following vote was recorded:

YEAS: **NAYS**:

The Chairman thereupon declared that said resolution had been duly adopted.

* * * *

There being no further business to come before the meeting, the same was adjourned.

_____
Chairman of the
Montgomery County Commission

_____
County Administrator of the
Montgomery County Commission

Office of Public Affairs
Montgomery County Commission
P.O. Box 1667
Montgomery, Alabama 36102
334.832.1270

September 7, 2016

M E M O R A N D U M

To: Montgomery County Commission

From: DiDi Henry, public affairs director

RE: Manufacturing Day Resolution

Chairman Dean has been asked to support a resolution proclaiming October 7, 2016, as ***Manufacturing Day in Montgomery County***, to coincide with this national day of recognizing and highlighting the role that manufacturing plays in our community. Furthermore, it serves as an opportunity for manufacturers to highlight their work and their workers and to energize a future pipeline of skilled workers

I am requesting that this item be placed on the October 3, 2016, agenda. Thank you.

Montgomery County Commission

A County Older Than The State

Established 1816
Montgomery, Alabama

Resolution

WHEREAS; National Manufacturing Day in an annual event celebrated on the first Friday in October, with this year being October 7, 2016; and

WHEREAS, National Manufacturing Day is an opportunity for manufacturers to highlight their work and their workers and to energize a future pipeline of skilled workers; and

WHEREAS, National Manufacturing Day is designed to amplify the voice of individual manufacturers and coordinate a collective chorus of manufacturers with common concerns and challenges; and

WHEREAS, this celebration empowers manufacturers to come together to address their collective challenges so they can help their communities and future generations thrive; and

WHEREAS, Montgomery County, Alabama, is currently home to 525 manufacturing businesses which employee 18,101 individuals, with salaries totaling $965.1 million annually,

NOW, THEREFORE, BE IT RESOLVED, that the Montgomery County Commission does hereby proclaim Friday, October 7, 2016, as ***National Manufacturing Day*** in Montgomery County, Alabama, and salute the many manufacturing companies and their employees who contribute so much to the economy, the business work force and the quality of life of Montgomery County, Alabama.

We hereby certify that the above Resolution was adopted by the Montgomery County Commission on this, the 3rd day of October, 2016.

5-2

DERRICK CUNNINGHAM

SHERIFF OF MONTGOMERY COUNTY

KEVIN J. MURPHY
CHIEF DEPUTY

COLONEL WANDA J. ROBINSON
DIRECTOR OF DETENTION

August 25, 2016

MEMORANDUM

TO : Mr. Donnie Mims
County Administrator

FROM : Sheriff Derrick Cunningham
Montgomery County Sheriff's Office

SUBJECT : Dollar General
Request for Retail Beer & Table Wine (Off Premise)

After investigating the Dollar General located at 30 Johnny Shirley Road, Ramer, Alabama, I have no objection to them obtaining a retail beer and table wine (off premise) license.

If you have any questions, please do not hesitate to contact me or my assistant.

DC/crv

encls.

6-1

SHERIFF'S OFFICE
POST OFFICE BOX 4219
MONTGOMERY, ALABAMA 36103-4219
OFFICE 334.832.4980
FAX 334.832.7113

WWW.MONTGOMERYSHERIFF.COM

DETENTION FACILITY
225 SOUTH MCDONOUGH STREET
MONTGOMERY, ALABAMA 36104
OFFICE 334.832.1386
FAX 334.265.0990

STATE OF ALABAMA
ALCOHOLIC BEVERAGE CONTROL BOARD
ALCOHOL LICENSE APPLICATION
Confirmation Number: 20160729155504926

Type License: 050 - RETAIL BEER (OFF PREMISES ONLY) **State:** $150.00 **County:** $75.00

Type License: 070 - RETAIL TABLE WINE (OFF PREMISES ONLY) **State:** $150.00 **County:** $75.00

Trade Name: DOLLAR GENERAL STORE 17394 **Filing Fee:** $100.00

Applicant: DOLGENCORP LLC **Transfer Fee:**

Location Address: 30 JOHNNY SHIRLEY ROAD RAMER, AL 36069

Mailing Address: 100 MISSION RIDGE GOODLETTSVILLE, TN 37072

County: MONTGOMERY **Tobacco sales:** YES **Tobacco Vending Machines:** 0

Type Ownership: LLC

Book, Page, or Document info: A73 PAGE 173

Date Incorporated: 12/21/1973 **State incorporated:** KY **County Incorporated:** FRANKLIN

Date of Authority: 10/21/2008 **Alabama State Sales Tax ID:** R006106389

Name:	Title:	Date and Place of Birth:	Residence Address:
JAMES W THORPE 111066256 - TN	MANAGER	01/30/1959 FALL RIVER MASS	1120 CHLOE DR GALLATIN, TN 37066
LAWRENCE JOSEPH GATTA 118386892 - TN	DOLGEN LLC MGR	03/22/1960 NILES, OHIO	544 WINDSTONE BLVD BRENTWOOD, TN 37027

Has applicant complied with financial responsibility ABC RR 20-X-5-.14? YES
Does ABC have any actions pending against the current licensee? NO
Has anyone, including manager or applicant, had a Federal/State permit or license suspended or revoked? NO
Has a liquor, wine, malt or brewed license for these premises ever been denied, suspended, or revoked? NO
Are the applicant(s) named above, the only person(s), in any manner interested in the business sought to be licensed? YES
Are any of the applicants, whether individual, member of a partnership or association, or officers and directors of a corporation itself, in any manner monetarily interested, either directly or indirectly, in the profits of any other class of business regulated under authority of this act? NO
Does applicant own or control, directly or indirectly, hold lien against any real or personal property which is rented, leased or used in the conduct of business by the holder of any vinous, malt or brewed beverage, or distilled liquors permit or license issued under authority of this act? NO
Is applicant receiving, either directly or indirectly, any loan, credit, money, or the equivalent thereof from or through a subsidiary or affiliate or other licensee, or from any firm, association or corporation operating under or regulated by the authority of this act? NO

Contact Person: TRACY GRUBISIC
Business Phone: 615-855-4000
Fax: 877-364-4130

Home Phone: 615-855-4000
Cell Phone:
E-mail: TAX-BEERANDWINE@DOLLARGENERAL.COM

PREVIOUS LICENSE INFORMATION:
Trade Name:
Applicant:

Previous License Number(s)
License 1:
License 2:

6-2

STATE OF ALABAMA
ALCOHOLIC BEVERAGE CONTROL BOARD
ALCOHOL LICENSE APPLICATION
Confirmation Number: 20160729155504926

If applicant is leasing the property, is a copy of the lease agreement attached? YES
Name of Property owner/lessor and phone number: THE BROADWAY GROUP LLC 256-533-7287
What is lessors primary business? PROPERTY MGMT
Is lessor involved in any way with the alcoholic beverage business? NO
Is there any further interest, or connection with, the licensee's business by the lessor? NO

Does the premise have a fully equipped kitchen? NO
Is the business used to habitually and principally provide food to the public? NO
Does the establishment have restroom facilities? YES
Is the premise equipped with services and facilities for on premises consumption of alcoholic beverages? NO

Will the business be operated primarily as a package store? NO
Building Dimensions Square Footage: 9100 Display Square Footage:
Building seating capacity: 00000 Does Licensed premises include a patio area? NO
License Structure: ONE STORY License covers: ENTIRE STRUCTURE
Location is within: COUNTY Police protection: COUNTY

Has any person(s) with any interest, including manager, whether as sole applicant, officer, member, or partner been charged (whether convicted or not) of any law violation(s)?

Name:	Violation & Date:	Arresting Agency:	Disposition:

6-3

Store #17394

STATE OF ALABAMA
ALCOHOLIC BEVERAGE CONTROL BOARD
ALCOHOL LICENSE APPLICATION
Confirmation Number: 20160729155504926

Initial each	Signature page
LG	In reference to law violations, I attest to the truthfulness of the responses given within the application.
LG	In reference to the Lease/property ownership, I attest to the truthfulness of the responses given within the application.
LG	In reference to ACT No. 80-529, I understand that if my application is denied or discontinued, I will not be refunded the filing fee required by this application.
	In reference to Special Retail or Special Events retail license, I agree to comply with all applicable laws and regulations concerning this class of license, and to observe the special terms and conditions as indicated within the application.
	In reference to the Club Application information, I attest to the truthfulness of the responses given within the application.
	In reference to the transfer of license/location, I attest to the truthfulness of the information listed on the attached transfer agreement.
LG	In accordance with Alabama Rules & Regulations 20-X-5-.01(4), any social security number disclosed under this regulation shall be used for the purpose of investigation or verification by the ABC Board and shall not be a matter of public record.
LG	The undersigned agree, if a license is issued as herein applied for, to comply at all times with and to fully observe all the provisions of the Alabama Alcoholic Beverage Control Act, as appears in Code of Alabama, Title 28, and all laws of the State of Alabama relative to the handling of alcoholic beverages. The undersigned, if issued a license as herein requested, further agrees to obey all rules and regulations promulgated by the board relative to all alcoholic beverages received in this State. The undersigned, if issued a license as herein requested, also agrees to allow and hereby invites duly authorized agents of the Alabama Alcoholic Beverage Control Board and any duly commissioned law enforcement officer of the State, County or Municipality in which the license premises are located to enter and search without a warrant the licensed premises or any building owned or occupied by him or her in connection with said licensed premises. The undersigned hereby understands that he or she violate any provisions of the aforementioned laws his or her license shall be subject to revocation and no license can be again issued to said licensee for a period of one year. The undersigned further understands and agrees that no changes in the manner of operation and no deletion or discontinuance of any services or facilities as described in this application will be allowed without written approval of the proper governing body and the Alabama Alcoholic Beverage Control Board.
LG	I hereby swear and affirm that I have read the application and all statements therein and facts set forth are true and correct, and that the applicant is the only person interested in the business for which the license is required.

Applicant Name (print): Larry Gatta

Signature of Applicant: Larry Gatta

Notary Name (print): KATHY L. SCHULTZ

Notary Signature: Kathy L. Schultz

KATHY L. SCHULTZ STATE OF TENNESSEE NOTARY PUBLIC SUMNER County

Commission expires: 4-17-18

Application Taken: **App. Inv. Completed:** **Forwarded to District Office:**
Submitted to Local Government: **Received from Local Government:**
Received in District Office: **Reviewed by Supervisor:** **Forwarded to Central Office:**

6-4

ACAA MEMBERSHIP APPLICATION & RENEWAL FORM

For 2017 Membership Year

(January 1 - December 31, 2017)

County: Montgomery County Website: www.mc-ala.org

Address/City/Zip: 101 S. Lawrence St., P.O. Box 1667, Montgomery, AL 36102-1667

Telephone: 334-832-1210 Fax: 334-832-2533

In order to continue to receive all Association of County Administrators of Alabama (ACAA) mailings, persons must be current ACAA members. Please add the names below of all eligible members from your county, along with their titles and email addresses, who wish to join ACAA. Eligible members include county commission Administrators; Assistant Administrators; and any other persons, by whatever title designated, who performs the duties of Administrators or Assistant Administrators to the various governing bodies of the State of Alabama. Renewal of membership in ACAA for 2017 is due by November 30, 2016. Direct any questions regarding ACAA renewal to Paulette Williams at 334-263-7594.

Name: Donald L. Mims Title: Administrator Email: donaldmims@mc-ala.org

Name: Florence M. Cauthen Title: Deputy Administrator Email: florencecauthen@mc-ala.org

Name:_____ Title:_____ Email:_____

Name:_____ Title:_____ Email:_____
(use additional paper, if needed)

Total Amount Enclosed: $_____ ($150 Administrator + $75 each Asst. Admin. and Others)

Payment Due Upon Receipt

Please make check **payable to ACAA** and mail to:

ACAA - P.O. Box 5040 - MONTGOMERY, AL 36103

Requisition for Montgomery City County Personnel

For Recruitment, Referral of Eligible Lists, and Special Appointments

Status: Routed to County Commission

Date Requisition Created: 9/7/2016 1:28:45 PM

Requisition ID: 1190

Requisition Properties

Start Date 9/7/2016

Desired Hire Date 9/26/2016

PositionNumber

Recruitment Number

Position Type
Open Competitive

Prefer Position(s) to be Filled By
Open Competitive

Department and Class Information

Department Name
Detention Facility

SelBudget
50 - DETENTION FACILITY

Job Class Code and Title
CO0419 - Corrections Offic

Override Dept Name
Select Department

Certify Register from Alternate Job Class
CO0420 - Corrections Officer

List Requirements

You must provide a number from 1 to 99 for the number of vacancies.

# Vac	Jurisdictions	Emp. Status
1	Montgomery County	Full-Time

Notes
Position #088 - Replacement of Shykeshia Brown

View Details

Requisition Supporting Information

Proposed Effective Date of Hire

Pay Grade

County Payroll Number

Notes

COUNTY USE ONLY Manpower Data Entered By

COUNTY USE ONLY Manpower Data Entered On

8-1

Requisition for Montgomery City County Personnel

For Recruitment, Referral of Eligible Lists, and Special Appointments

Status: Routed to County Commission **Date Requisition Created:** 9/1/2016 12:58:21 PM
Requisition ID: 1184

Requisition Properties

Start Date 9/1/2016

Desired Hire Date 9/12/2016

PositionNumber

Recruitment Number

Position Type: Open Competitive

Prefer Position(s) to be Filled By: Open Competitive

Department and Class Information

Department Name: Detention Facility

SelBudget: 50 - DETENTION FACILITY

Job Class Code and Title: CO0419 - Corrections Offic

Override Dept Name: Select Department

Certify Register from Alternate Job Class: CO0420 - Corrections Officer

List Requirements

You must provide a number from 1 to 99 for the number of vacancies.

# Vac	Jurisdictions	Emp. Status
1	Montgomery County	Full-Time

Notes

Position #090 - Replacement of Kareemah Britton

View Details

Requisition Supporting Information

Proposed Effective Date of Hire

Pay Grade

County Payroll Number

Notes

COUNTY USE ONLY Manpower Data Entered By

COUNTY USE ONLY Manpower Data Entered On

8-2

Tammy Nix

From: Kelly Wilson <harlequinfarm@earthlink.net>
Sent: Thursday, September 08, 2016 10:21 AM
To: Donald Mims
Cc: Harlequin Farm; Andrew Hall; Susie Wilson
Subject: MANE Requested Documents
Attachments: Board of Directors 2016 (1).docx; ATT00001.htm; Fed Return 990 MANE.pdf; ATT00002.htm; 2014 MANE audit.pdf; ATT00003.htm; MANE Budget 2016.pdf; ATT00004.htm; 2014-2015 balance and income statement.PDF; ATT00005.htm

Hello Donnie,
I very much enjoyed speaking with you yesterday about the opportunity to share MANE with the County Commission on Monday September 12th at 4:00 at St. James Church on Vaughn Rd. The information you requested is attached. Please let me know if there is anything else I can do. Thank you for your interest in and support of this wonderful program.

Sincerely,
Kelly Wilson
President
Montgomery Area Non-traditional Equestrians Board of Directors

9-1

About MANE!

1. MANE offers therapeutic riding lessons to children, adults, and veterans starting at age 4, with no upper age limit.

2. MANE has held a 501(c)3 status since 1994 and operates solely off of fundraisers, grants, and donations.

3. MANE owns all of its' own horses. The vast majority of these horses were donated to the program, but it takes a very special horse to become a MANE horse. Only about 5-10% of the screened horses make it into the program.

4. MANE has three full time staff members, and one part time instructor. All four instructors are certified by the Professional Association of Therapeutic Horsemanship International to teach therapeutic riding lessons.

5. The MANE facility was built in 2008 and features offices, a class room, kitchen for staff, and meeting room. Attached is a fully handicapped accessible 15-stall barn and a covered riding arena.

6. Classes are held in sessions of 10 weeks with one lesson each week. MANE holds classes Monday through Friday, from 9am to 5pm.

7. MANE hosts 4 weeks of summer camp each July. Children with and without disabilities are invited to attend weeks 1 through 3; the 4th week of camp is for adults.

8. Volunteers are the glue that holds the program together. It can take up to three volunteers just to ride one student. There are a myriad of meaningful volunteer opportunities at MANE, and no horse experience is necessary.

9. Students at local high schools and college develop immerging professional skills for careers in education, counseling, nursing, occupational therapy, physical therapy, audiology, speech pathology, mental health, therapeutic recreation, and special education through hands-on field experience at MANE.

10. Individuals and organizations such as Eagle Scout projects, churches, schools, and office team building groups can complete volunteer workdays or projects at MANE.

INTRODUCTION TO MANE

DESCRIPTION OF MANE

MANE is a non-profit organization formed in 1994 that provides safe and effective therapeutic horseback riding opportunities to Montgomery area children and adults who have physical, cognitive, and developmental disabilities. MANE holds 501(C) corporation status and its instructors are certified through the Professional Association for Therapeutic Horsemanship International (PATH Intl.). PATH Intl. is a regulatory agency that assures stringent standards for quality therapeutic horseback riding through instructor certification, site accreditation, and program monitoring. PATH Intl. certified instructors are also certified Special Olympic coaches.

PROGRAM SUMMARY

Montgomery Area Nontraditional Equestrians (MANE) is situated on a 44-acre property in East Montgomery featuring both enclosed and open riding arenas and expansive indoor and outdoor recreation areas. The site is a solely MANE-operated and occupied facility, which was designed to promote efficient maintenance man-hour management, house horses, provide functional instructional arenas, classrooms, offices, and paddocks while eliminating weather related concerns. MANE can also accommodate Special Olympics horse shows.

While the primary interventional medium of the program is therapeutic riding, MANE has grown to include health and wellness initiatives for the mind, body, and soul of our clients and their families, as well as the volunteers who serve them. To this end, MANE's "Field of Dreams" sensory integration trail has been conceptualized and implemented. The trail is accessible to people with

disabilities and their families by horse, utility vehicle, and wheelchair or on foot. The MANE "Field of Dreams" represents the largest and most elaborate therapeutic riding sensory integration trail of its kind in the United States today, and many other programs have emulated this model.

A paid Program Director, Equine Director, Volunteer Coordinator and part time instructor, all of whom are certified by PATH Int.l, enable MANE to serve adults and children with disabilities through a safe and comprehensive therapeutic riding program. The MANE program runs an exceptionally lean operation and adheres conscientiously to a "work smart" philosophy. With an administrative overhead of 6% and fundraising overhead of 3%, MANE represents an outstanding value for donors. Logging more than 10,000 volunteer hours annually, MANE has become a hub of community service providing thousands of individual sessions to program participants and their families each year.

EVIDENCE OF NEED FOR MANE

References to the physical and emotional benefits of horseback riding date back to writings in the 1600's. However, when Liz Hartel of Denmark won the silver medal for dressage at the 1952 Helsinki Olympic Games - despite having paralysis from polio - both medical and equine professionals took active notice. Soon afterwards, therapeutic riding was successfully utilized as a rehabilitative tool in England. The first centers for therapeutic riding in North America began operation in the 1960's. Today, there are more than 900 PATH Intl.-affiliated centers in the U.S. and Canada. MANE is the only PATH Intl.-certified organization in the Tri County region of Alabama. Therapeutic horseback riding provides extremely important and effective intervention for people with physical, cognitive and psychological disabilities. The horse's movement and the warmth of the animal's body provide a foundation for the

physical benefits for individuals who have muscle and movement disorders. When a rider straddles the back of a horse, the warmth of the animal's body, combined with the three-dimensional rhythmical movement of the horse, helps to normalize muscle tone in the rider's hips and legs. As the muscle tone becomes more normalized in the lower part of the body, the balanced reciprocal movement of the horse can provide a format for more normal anti-gravity and equilibrium responses from the rider. These responses, in turn, help to normalize muscle tone in the upper part of the body. The instructor uses therapeutic horseback riding activities to take advantage of this more normalized tone and uses the more functional anti-gravity responses to facilitate the development of more normal movements of the rider. The benefits the rider gains from the experience go beyond normal muscle tone and improved movement. Therapeutic horseback riding also helps the individual improve balance, range of motion, and muscle control, as well as develop more efficient motor planning while strengthening muscles, joints, and tendons. The activities involved in therapeutic horseback riding have also been known to improve respiration, circulation, appetite and digestion.

Benefits intrinsic to therapeutic horseback riding have also been noted for individuals who have visual or hearing impairments, learning disabilities, autism, or cognitive deficits. Cognitively or emotionally challenged riders experience improved concentration, patience, self-discipline, motivation and interpersonal skills. These improved skills facilitate spontaneous use of language and psychosocial responses, and, in so doing, provide a stronger foundation upon which traditional therapies can be more effectively implemented. The responses that a rider can elicit from a horse add some measure of personal control to the life of a person who is not able to participate in various normally occurring daily activities. The resulting control that the individual has gained helps build self-esteem and self-confidence. PATH Intl.-accredited centers throughout the U.S. and Canada, including MANE, are helping individuals with cerebral palsy, learning disabilities, hearing and visual impairment, traumatic

brain injury, Down syndrome, multiple sclerosis, autism, spina bifida, epilepsy, mental retardation, and stroke patients. Those with emotional and behavioral problems as well as victims of domestic violence can overcome challenges and lead richer, fuller lives as a result of participating in a quality therapeutic riding program.

MANE began with limited services provided by a volunteer-only staff prior to 1994. Shortly thereafter, MANE became a nonprofit organization, and successfully achieved national recognition as a PATH Intl. Premier accredited center. Since that time, the MANE program has grown significantly. Although there are over 900 PATH Intl. centers located across the United States and Canada, only 22 of these certified therapeutic riding centers exist in PATH Intl. Region V (Alabama, Florida, Georgia, Mississippi, and Tennessee). Alabama has only 5 PATH Intl. Premier accredited sites in the entire state. MANE is the only PATH Intl. certified Premier Center in the Tri-County region. Centers providing hippotherapy (rehabilitation by an occupational or physical therapist, or speech language pathologist, using the horse as a therapy tool) on a continuing basis in our geographic region are rare.

MANE has broadened the scope of its services over the past decade, and seeks to offer its unique program opportunity to more economically challenged children. The state of the art "Field of Dreams" sensory integration trail is a wellness initiative designed to serve special needs youth through elderly sectors of the Tri-County population. This trail, supported previously by The Montgomery Junior League as well as other nationally recognized funding sources such as the Christopher and Dana Reeves Paralysis Foundation (CRPF) and the Centers for Disease Control (CDC) represents a unique community resource.

MANE participates in Special Olympics and has garnered state and regional gold medals with amazing regularity. MANE's riders have medaled despite being located in a rural, often economically and resource-scarce area of the south in the heart of the black belt. Virtually ALL Special Olympics participation by MANE is funded by community donation and support.

The MANE project positively impacts Montgomery and the surrounding Tri-County area in the following areas:

Children and Youth	**Health and Well Being**
Low Income Families	**Youth at Risk/Domestic Violence Victims**
Life Skills Development	**Early Intervention**
Education	**Spinal Cord Injury**
Elderly	

Children and Youth: Early Intervention, Easter Seals, and the home school community, as well as many other agencies and clinics, refer pediatric clients to MANE. Many of the families MANE serves are struggling with mounting medical expenses for their special needs child, and do not have necessary discretionary income for program tuition. Area schools are often unable to provide funding for student participation as an alternative adaptive physical education placement, even within the scope of the child's IEP (Individual Education Plan).

The MANE program has underwritten participation for part or all of many groups of at-risk youth. Several programs have been developed and implemented that serve children from the Montgomery County Schools. The Transitions program, which focuses on Montgomery County Schools' special education students preparing to leave the public school system and enter the work force, is one of the groups whose participation has been solely supported by MANE. Transition students are routinely placed in various pre-employment internships to facilitate their transition out of the educational setting and into meaningful employment venues. Three special education classes (Flowers Elementary, Vaughn Road Elementary and Head School) have brought students on a weekly basis to participate in the MANE program. To date, Montgomery County School System has not been able to pay any tuition for these students, and MANE routinely absorbs all of these program costs. MANE has also served children from Adullum House (children of incarcerated mothers), Second Chance, Boys and Girls Club and Brantwood at no charge.

Health And Well Being Of Population With Disabilities: MANE strives to serve the community of children and adults with physical, cognitive and developmental disabilities through equine facilitated activities that result in improved balance, range of motion, and muscle control; more efficient motor planning while strengthening muscles, joints, and tendons; and improved respiration, circulation, appetite and digestion; as well as improved concentration, patience, self-discipline, motivation, interpersonal skills, self-esteem, and self-confidence. MANE's programs also help to provide a stronger foundation upon which traditional therapies can be more effectively implemented. Every time an individual participates in MANE, his/her whole family benefits emotionally.

Low Income Families: The Tri County region of Alabama is rural, and our clients are often from low-income families, many of whom already struggle with the overwhelming economic challenges of raising a child with special

needs. 50% of MANE's riders are minorities and less than 20% of MANE's current clients are able to pay full tuition. At MANE no child is turned away from the program due to inability to pay, but there is a waiting list. MANE charges $300.00 per client for each 10-week session. MANE tuition revenue provides only 12% of program costs. Monies for tuition differentials are generated each year by national, state, and local grant awards as well as private, civic, and corporate contributions.

Youth At Risk/Domestic Violence Victims: In rehabilitation of abused children, animals provide non-judgmental, non-threatening outlets for physical contact. MANE can assist such individuals by providing valuable experiences with horses to teach respect, instill self-worth, and help develop trust and a sense of responsibility. Using the Crossroads Group Homes in Greenville, South Carolina as a model, therapeutic riding programs have facilitated emotional healing and growth, physical health and restored independent living skills, healthy attachments, and social/recreational functioning through animal assisted therapy. Clinical Director of Crossroads, Laurie Rovin, says, "Getting on a big animal like a horse helps the kids work through their fear. This is also a really pleasurable way to help them learn about anger management." She has often seen students with low self-esteem and poor hygiene habits begin to care about their own appearance after grooming horses. MANE provides an environment that fosters the concept that every living thing has value and worth, affords experiences that teach respect and builds the capacities of others for nurturance and humane behavior. MANE has expanded services to include children from the Family Sunshine Center, Boys and Girls Clubs, Brantwood, Second Chance, FEWS, and Adullum House Programs for youth at risk.

Life Skills Development: A rich variety of life skills for clients and volunteers are practiced and developed through participation in MANE's programs. Virtually every activity that is part of the MANE curriculum addresses life skill competencies. The horse has a role as healer - both for those who are weary of life's stresses and for those who have handicaps to

overcome. In some remarkable way, whatever quality or ability an individual may lack - confidence, serenity, courage, or coordination, the horse helps to evoke that quality. A continued source of inspiration as well as a great motivator, the equine experience awakens human aspects of perception through its pace, rhythm, dignity, and power.

Early Intervention: Because of MANE's unique involvement with the Early Intervention Program for the State of Alabama and NSSLHA (National Student Speech-Language-Hearing Association) students at Auburn University and AUM's Speech and Hearing clinics, very young children with hearing loss and speech difficulties are benefiting from MANE's programs. For riders 5 years of age and younger, much emphasis is placed on speech and language activities as well as the development of motor, self-help, and self-awareness skills.

Sitting astride a horse, positions the child in an ideal posture for control of the diaphragm and trunk muscles that are used for speech production. Rhythmic activities have been found to reduce spasticity and provide a favorable medium for improving articulation. Using riding-related words containing the target sounds while actually mounted on the horse is extremely motivating and immediately rewarding. Children with poor vocal quality can be encouraged to breathe deeply and speak audibly while coupling verbal commands with motor commands to the horse. The horse's rhythmic movement input facilitates the necessary deep, steady breathing. Children who stutter almost never do so when they are relaxed as when singing or talking to pets. MANE can help stabilize fluent speech by providing a relaxed environment for practicing the techniques of smooth, easy speech. Horses can also be captivating enough to provide an impetus for speech in children with delayed language skills. MANE represents a natural laboratory for spontaneous language development, which is crucial when teaching functional use of language. The child can be motivated to attempt to "command" the horse's attention when using words such as walk, easy or whoa.

And besides, for preschoolers horses are such fun! Riding is the ultimate therapeutic motivational tool...just ask any of MANE's preschool moms!

Education: MANE continues to focus on education for children within a broad range of social skills and emotional maturity. Many riders are able to engage in physically demanding exercises while on horseback such as dropping a ball in a hoop or guiding a horse through an "obstacle course". MANE's instructors have successfully taught independent riding skills to many children with cerebral palsy, mental retardation, autism, hearing impairment, and other disabilities. Some clients progress to riding completely independently (without side walkers or a horse handler) over the period of a 10-week session. Since goals are developed individually for each client, lessons may also underscore the strengthening of fundamental skills such as counting, identifying letters and colors, spelling, geography, or communication as well as developing memory. Instructors use games on horseback, signs, colored reins and other methods/tools to achieve educational objectives. Teachers of special education classes that have participated in the MANE program rave about the benefits that transfer from arena to classroom!

MANE also provides much needed community outreach to Montgomery's higher education programs. Students at local colleges develop emerging professional skills through interaction with MANE's clients, internships, and unique research opportunities. Increasing MANE's service provision capabilities impacts more than just the clients served and their families. Expanding the scope of services that MANE is able to provide, significantly and positively impacts the community of higher education in the Montgomery metroplex area. As more funds are made available to MANE, adults and children with disabilities will certainly benefit, but as a byproduct, so will those pre-professionals enrolled in our many area colleges and universities who are preparing to serve this population. The opportunity to interact with the clients involved in the MANE program provides hands-on field experience for students with career focus in areas of education, counseling, nursing, occupational therapy, audiology, speech

pathology, mental health, physical therapy, therapeutic recreation, and special education. Hundreds of Tri-county area students with career interests in these fields are pursuing undergraduate or graduate degrees at nearby public and private institutions of higher learning. At a time when Alabama's budget constraints are heavily impacting higher education's ability to offer program expansion, MANE can offer training opportunities to enrich experiences for students at local colleges and universities, insuring quality professional training to students who will serve populations with special needs.

Over the past two decades a strong movement towards the use of global treatment interventions has developed. Rehabilitative efforts that provide a greater degree of motoric, sensory, and experiential stimulation have proven to be most effective. Therapeutic riding provides input simultaneously to the entire human physiology, and has direct application to rehabilitation programs for many special needs patients. It often produces positive clinical results where more traditional tools for remediation have fallen short. PATH Intl. is currently amassing research data regarding the multidimensional merits of equine therapy for a wide range of disabilities. Investigations of such interventional programs have been impressive to date, but more work needs to be done. Research focusing on the use of equine therapy as an effective treatment tool can provide challenge for academic excellence as well as insight into a valuable interventional strategy. In an effort to serve the global community of those with disabilities, MANE is actively pursuing funding support for much needed research to quantify the efficacy of various models of therapeutic riding.

In addition to providing students at area colleges and universities with the chance to develop emerging professional skills through hands-on experience and supervised internships, unique directed and independent research opportunities are also available. Both public and private higher education facilities throughout Alabama have established liaisons with MANE to develop avenues for students in volunteering and community service, clinical internships, and research programs. Such opportunities greatly enhance regional

educational and allied health pre-professional programs and are a particularly effective strategy to provide long term benefits for those with disabilities. MANE provided hands-on opportunities to post secondary and graduate students from Troy University, Auburn University, Alabama State University, South University, Faulkner University, Auburn University Montgomery, and Huntingdon College. MANE hosted a physical therapy student from London, England, a Master level PATH Intl. instructor from Canada, as well as two interns from Mexico and one from Australia. MANE offers an outstanding community based effort to provide meaningful service learning opportunities to Tri County Junior High and High School students from all walks of life. These students all gain valuable hands-on experience interacting with the disabled through therapeutic riding.

Spinal Cord Injury/Wheelchair Bound Patients: MANE has served several adult patients with spinal cord injury in the past, and received a grant from the Christopher Reeves Foundation to purchase hydraulic lift equipment needed to increase this caseload. Although the MANE program has a wheelchair accessible mounting ramp built to PATH Intl. specifications, providing mounting assistance to larger adults has proved problematic, and weight limits for program eligibility had to be imposed. Purchase of lift equipment for the purpose of facilitating mounting for clients over 60 lbs. has enabled MANE to broaden its scope of services to include more adult spinal cord injury patients. The Tri-County area is served by a large HealthSouth Rehabilitative Hospital. Hundreds of accident victims and spinal cord injury patients stand to benefit from MANE's expanded capabilities.

The Elderly: MANE plans to initiate carriage-driving opportunities to meet the therapeutic needs of those unable to sit astride a horse. Carriage driving will become a viable program option. The Jr. League of Montgomery purchased a new, specially designed Thornlea hydraulic carriage for this project. Carriage driving, while beneficial for all individuals with disabilities, will primarily focus on

and benefit those with severe physical disability as well as elderly Tri County citizens.

SENSORY INTEGRATION - THE MANE "FIELD OF DREAMS" PROJECT

MANE received grants from the Montgomery Working Woman's Association, The Junior League of Montgomery, The Montgomery Rotary Charity Foundation, and the Christopher and Dana Reeve Foundation in conjunction with the Centers for Disease Control (CDC) enabling the program to create its "Field of Dreams" Sensory Integration Trail. The trail itself spans more than 3 acres, and is accessible by foot, wheelchair, horseback riding, carriage, and off road utility cart. Eight activity stations were strategically placed along a figure eight shaped road of crushed limestone aggregate. The stations are more than 10 feet high. Each station features activities carefully designed to promote and enhance sensory learning while participants are engaged in therapeutic riding or carriage driving, and family members may accompany their riders on the trail if desired to add a recreational dimension. Stations feature activities to integrate and enrich sight, smell, hearing, taste, and touch, as well as providing opportunities to enhance gravitational security, balance, grasp release, proprioceptive input, etc.

What is sensory integration? The human senses work together, each interacting with the other to form a sense of who we are physically, where we are, and what is going on around us. Sensory integration is the critical function of the brain that is responsible for producing this composite picture. It is the organization of sensory information for on-going use. Sensory experiences include touch, movement, body awareness, sight, sound, and the pull of gravity. The process of the brain organizing and interpreting this information is called sensory integration. For most children, sensory integration develops in the course of ordinary childhood activities. Motor planning ability is a natural outcome of the process, as is the ability to adapt to incoming sensations.

But for some children, sensory integration does not develop as efficiently as it should. When the process is disordered, a number of problems in learning, development, or behavior may become evident. Some children, although bright, have difficulty using a pencil, playing with toys, or doing self-care tasks, like dressing. A child may be so fearful of movement that ordinary swings, slides, or jungle gyms generate fear and insecurity. Conversely, a child whose problems lie at the opposite extreme can be uninhibited and overly active, often falling and running headlong into dangerous situations. In each of these cases, a sensory integrative problem may be an underlying factor. Its far-reaching effects can interfere with academic learning, social skills, even self-esteem.

Independent studies show that a sensory integrative dysfunction can be found in up to 70% of children who are considered learning disabled by schools. Sensory integrative problems are not confined to children with learning disabilities, however. They include all age groups as well as all intellectual levels and socioeconomic groups and frequently affect those with premature birth, Autism and other developmental disorders, Learning Disabilities, delinquency and substance abuse, stress related disorders, brain injury, and many other disabilities. Virtually every client participating in the MANE program has some degree of sensory integration dysfunction. MANE clients using the "Field of Dreams" sensory integration trail are guided through activities that challenge their ability to respond appropriately to sensory input by making a successful, organized response while mounted.

One important aspect of therapy that uses a sensory integrative approach is that the motivation of the child plays a crucial role in the selection of the activities. Most children tend to seek out activities that provide sensory experiences most beneficial to them at that point in development. It is this active involvement and exploration that enables the child to become a more mature, efficient organizer of sensory information, and therapeutic riding is ideally suited to its successful implementation.

Located in the center of the trail, a covered arena generously donated by local Rotary Clubs provides shelter/shade for medically fragile children, minimizes the impact of inclement weather, and provides an area to help riders focus on special riding skills. The bridge across the pond, picnic area and butterfly garden are also assets of the trail. MANE offers its program participants the most unique and elaborate sensory integration trail in the therapeutic riding industry... and the most fun!

NEEDS ASSESSMENT

According to the Census Bureau's American Community Service (ACS) and provided by the Alabama Center for Business and Economic Research, the most recent data for the five-year period of 2008-2012 looked at those 5 years of age or older (civilian, non-institutionalized) with various sensory, physical, mental, self-care or employment disabilities and the numbers are as follows:

- 8,035 persons counted in Autauga County
- 11,008 persons counted in Elmore
- 2,351 persons counted in Lowndes County
- 4,203 persons counted in Macon County,
- 35,566 persons counted in Montgomery County,
- These figures indicate that in Autuaga, Elmore, Lowndes, Macon and Montgomery counties, there are more than 61,163 people with disabilities, and a large percentage of these individuals would benefit from participation in MANE's programs.

However, the MANE program serves an even broader range of clients. Children as young as 18 months (now served through Early Intervention liaisons), those institutionalized for severe mental or physical disabilities (our Father Walters and Milton Road Home clients), as well as clients at risk for emotional disability resulting from domestic violence or abuse (children from the Sunshine Center

and Brantwood), have been served at MANE but not included in the Census data. Hundreds of children and those with disabilities who are not included in the Fact Finder demographic analysis stand to benefit from the services provided at MANE in addition to the other populations described above. MANE is uniquely positioned to play an important role in service to regional special education, disability, and rehabilitative programs in our rural state.

OUTCOME MEASURE / PROGRAM ASSESSMENT

Numerous studies have addressed the benefits of therapeutic riding for a wide range of disabilities. MANE has several measures to assess program effectiveness, including individual progress reports, lesson plans, and measureable outcomes in use as part of grant reporting, as well as survey assessments for participants, parents, caregivers, and volunteers. As previous recipients of The State of Alabama Children's Trust Fund monies, program outcome measures used for this and other grant indicate greater than 90% success rate for our riders! Results of our survey of Program Services indicate greater than 95% satisfaction rate for participants and their families.

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Montgomery Area Nontraditional Equestrians (MANE)
2016 Budget

		2016 Budget
Revenue and Support		
Income		
5100-00	Client Fees/Tuitions	18.000
5400-00	Contributions/Donations	30.000
5405-00	Contributions/Direct Mail	3.000
5410-00	In Kind Donations	-
5490-00	Horse Trial Fee	150
5500-00	Horse Sponsorship	1.500
5910-00	Workshop / Certification Income	-
5990-00	Miscellaneous	700
5960-00	Interest Income	500
Total Income:		$ 53,850
Campaign Income		
5335-00	Paving the Way ... for Hope	-
5340-00	Course of Hope Dinner & Auction	-
5360-00	Golf Tournament Sponsor	-
5370-00	Special Event Fundraiser	30.000
5380-00	Huntingdon Tuition	
Total Campaign Income:		$ 30,000
Grants		
5601-00	Miscellaneous Grants	2.500
5609-00	Alabama Power	
5610-00	CACF	
5620-00	Children's Trust Fund	-
5630-00	Christopher Reeves Foundation	-
5650-00	Jr. League	
5670-00	United Way Grant	20.000
5685-00	ALFA Foundation Restricted	
5680-00	Working Women's (restricted SIT)	
Total Grants:		$ 22,500
Total Revenue and Support:		$ 106,350
Expenses		
Marketing		
6020-00	External Marketing/Newsletter	2.300
6040-00	Website	720
Total Marketing:		$ 3,020
Insurance		
6171-00	Insurance-Package	11.000
6172-00	Directors & Officers Policy	
Total Insurance:		$ 11,000
Office		
6202-00	Office Supplies	2.000
6203-00	Office Equipment	3.000
6204-00	Website Fees	-
6206-00	Bank Service Charges	50
6208-00	Printing and Reproduction	
6209-00	Postage and Delivery	1.800
6220-00	Dues and Subscriptions	45
6230-00	Automobile Expense	1.200
6250-00	Property Taxes	2.000
6299-00	Miscellaneous	100
Total Office:		$ 10,195
Professional Fees		
6310-00	Accounting Fees	3,000
6320-00	Legal Fees	2.000
6330-00	Consulting	1,000
Total Professional Fees:		$ 6,000
Utilities		
6401-00	Gas and Electric	6.300
6402-00	Water	750
6403-00	Trash	800
6404-00	Telephone/Internet	3,500
Total Utilities:		$ 11,350
Payroll & Contract Labor		
6501-00	Salary Expense	105.620
6502-00	Contract Labor-Program Expense	7.000
6503-00	Contract Labor-Maintenance Expense	-
6504-00	Payroll Taxes	8.450
6505-00	Employee Bonuses	850
6506-00	Employee Benefits	11.166
Total Payroll & Contract Labor:		$ 133,087
Program Expense		
6610-00	Instructor Licenses/Permits	240
6620-00	Instructional Materials	50

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Montgomery Area Nontraditional Equestrians (MANE)
2016 Budget

		2016 Budget
6621-00	Therapeutic Equipment	50
6622-00	Program Supplies	750
6623-00	Camp Supplies	500
6624-00	Sensory Integration Trail	400
6626-00	Awards/Engraving	250
6630-00	PATH Center Certification	1.235
6631-00	Continuing Education Conference	1.500
6632-00	CPR Certifications	125
6635-00	Workshop / Certification Expense	5.000
6650-00	Snacks/Drinks	25
6660-00	Riding Gear/Clothing/Tack	350
6670-00	Background Checks	60
6690-00	First Aid	70
6693-00	Volunteer Appreciation	500
6699-00	Program Expense - Other	500
	Total Program Expense:	$ 11,605
Grant Expense		
6701-00	Grant Expense-Miscellaneous	25
6730-00	Reeve Foundation Expense	2.358
	Total Grant Expense:	$ 2,383
Barn Expense		
6810-00	Pasture Equipment	500
6811-00	Pasture Maintenance	600
6820-00	Stall Equipment	200
6830-00	Barn Repairs	500
6840-00	Barn Tools	350
6899-00	Barn Expense - Other	200
	Total Barn Expense:	$ 2,350
Repairs		
6910-00	Grounds/Fencing	2.000
6915-00	Equipment Fuel	1.200
6920-00	Office/Building Repairs	2.250
6930-00	Office Equipment Repairs	
6940-00	Pasture Equipment Repairs	1.500
6950-00	Pest Control	1.200
	Total Repairs:	$ 8,150
Horse Expense		
7110-00	Feed	3.000
7120-00	Farrier Services	4.000
7130-00	Hay	1.500
7140-00	Vet	2.000
7150-00	Vet Supplies	1.000
7160-00	Bedding/Shavings	2.000
7170-00	Horse Supplies	2.500
7180-00	Horse Equipment	
7199-00	Miscellaneous	
	Total Horse Expense:	$ 16,000
Travel & Entertainment		
7200-00	Travel & Entertainment	
7210-00	Accomodations	
7220-00	Meals	500
7230-00	Airline and/or Car Rental	
7240-00	Conference	
7299-00	Travel & Entertainment - Other	
	Total Travel & Entertainment:	$ 500
Campaign/Fund Raising Expense		
7330-00	Course of Hope Dinner & Auction	
7332-00	Fund Raising Expenses - Other	7.500
	Total Campaign/Fund Raising Expense:	$ 7,500
Other Income/Expenses		
7510-000	Interest Expense	6.002
	Total Campaign/Fund Raising Expense:	$ 6,002
	Total Expenses:	$ 229,142
	Net Operating Income (Loss)	$ (122,792)
2632-000	Construction Loan Principal Payments	28,029
	Net Cash Flow	$ (150,821)
	Deficit to be supplemented by	150,821

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Income Statement
For The 12 Periods Ended 9/30/2015

Montgomery Area Nontraditional Equestrians (MAN)

		Year to Date	ORIGINAL YTD Budget	Variance	Variance %
Revenue and Support					
Income					
5100-00	Client Fees/Tuitions	$ 20,530	$ 15,000	$ 5,530	36.87
5400-00	Contributions/Donations	37,655	24,500	13,155	53.69
5405-00	Contributions/Direct Mail	2,000	5,000	(3,000)	(60.00)
5410-00	In Kind Donations	10,300	0	10,300	0.00
5490-00	Horse Trial Fee	150	250	(100)	(40.00)
5500-00	Horse Sponsorship	8,500	1,500	7,000	466.67
5910-00	Workshop / Certification Income	0	5,000	(5,000)	(100.00)
5960-00	Interest Income	337	500	(163)	(32.60)
5990-00	Miscellaneous Income	586	700	(114)	(16.29)
	Total Income:	80,058	52,450	27,608	52.64
Campaign Income					
5335-00	Paving the Way ... for Hope	0	250	(250)	(100.00)
5340-00	Course of Hope Dinner & Auction	167,441	125,000	42,441	33.95
5360-00	Golf Tournament Sponsor	135,000	100,000	35,000	35.00
5370-00	Special Event Fundraiser	34,018	45,000	(10,982)	(24.40)
5380-00	Huntingdon Tuition	0	8,000	(8,000)	(100.00)
	Total Campaign Income:	336,459	278,250	58,209	20.92
Grants					
5601-00	Miscellaneous Grants	14,684	2,500	12,184	487.36
5620-00	Children's Trust Fund	14,569	0	14,569	0.00
5630-00	Christopher Reeves Foundation	4,683	0	4,683	0.00
5670-00	United Way Grant	18,350	25,081	(6,731)	(26.84)
	Total Grants:	52,286	27,581	24,705	89.57
	Total Revenue and Supp	468,803	358,281	110,522	30.85
	Gross Profit:	468,803	358,281	110,522	30.85
Expenses					
Marketing					
6020-00	External Marketing	2,485	2,300	(185)	(8.04)
6040-00	Website	790	720	(70)	(9.72)
	Total Marketing:	3,275	3,020	(255)	(8.44)
Insurance					
6171-00	Insurance - Package	10,451	11,000	549	4.99
	Total Insurance:	10,451	11,000	549	4.99
Office					
6202-00	Office Supplies	2,358	1,500	(858)	(57.20)
6203-00	Office Equipment	2,337	3,000	663	22.10
6206-00	Bank Service Charges	48	120	72	60.00
6209-00	Postage and Delivery	1,862	1,800	(62)	(3.44)
6220-00	Dues and Subscriptions	145	45	(100)	(222.22)
6230-00	Automobile Expense	2,470	1,200	(1,270)	(105.83)
6250-00	Property Taxes	0	2,000	2,000	100.00
6299-00	Miscellaneous	0	100	100	100.00
	Total Office:	9,220	9,765	545	5.58
Professional Fees					
6310-00	Accounting Fees	8,500	3,000	(5,500)	(183.33)
6320-00	Legal Fees	1,720	0	(1,720)	0.00
6330-00	Consulting	2,250	0	(2,250)	0.00
	Total Professional Fees:	12,470	3,000	(9,470)	(315.67)
Utilities					
6401-00	Gas and Electric	6,395	6,300	(95)	(1.51)

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		Year to Date	ORIGINAL YTD Budget	Variance	Variance %
Utilities	(Continued)				
6402-00	Water	$ 907	$ 600	$ (307)	(51.17)
6403-00	Trash	890	800	(90)	(11.25)
6404-00	Telephone/Internet	3,669	3,300	(369)	(11.18)
Total Utilities:		11,861	11,000	(861)	(7.83)
Payroll & Contract Labor					
6501-00	Salary Expense	72,884	103,110	30,226	29.31
6502-00	Contract Labor-Program Expense	16,558	3,200	(13,358)	(417.44)
6504-00	Payroll Taxes	6,693	8,089	1,396	17.26
6505-00	Employee Bonuses	487	850	363	42.71
6506-00	Employee Benefits	10,392	8,060	(2,332)	(28.93)
Total Payroll & Contract Labor:		107,014	123,309	16,295	13.21
Program Expense					
6610-00	Instructor Licenses/Permits	80	220	140	63.64
6620-00	Instructional Materials	109	50	(59)	(118.00)
6621-00	Therapeutic Equipment	0	50	50	100.00
6622-00	Program Supplies	646	750	104	13.87
6623-00	Camp Supplies	519	400	(119)	(29.75)
6624-00	Sensory Integration Trail	294	400	106	26.50
6626-00	Awards and Engraving	230	250	20	8.00
6630-00	PATH Center Certification	1,235	1,050	(185)	(17.62)
6631-00	Continuing Education Conference	597	1,500	903	60.20
6632-00	CPR Certifications	425	300	(125)	(41.67)
6635-00	Workshop / Certification Expense	80	5,000	4,920	98.40
6650-00	Snacks/Drinks	0	25	25	100.00
6660-00	Riding Gear/Clothing/Tack	357	350	(7)	(2.00)
6670-00	Background Checks	56	60	4	6.67
6690-00	First Aid	83	70	(13)	(18.57)
6693-00	Volunteer Appreciation	515	500	(15)	(3.00)
6699-00	Program Expense - Other	1,588	500	(1,088)	(217.60)
Total Program Expense:		6,814	11,475	4,661	40.62
Grant Expense					
6700-00	Grant Expense	41	0	(41)	0.00
6701-00	Grant Expense-Miscellaneous	0	25	25	100.00
6720-00	Children's Trust Fund Expense	37	0	(37)	0.00
6730-00	Reeve Foundation Expense	2,325	0	(2,325)	0.00
Total Grant Expense:		2,403	25	(2,378)	(9,512.00)
Barn Expense					
6810-00	Pasture Equipment	70	500	430	86.00
6811-00	Pasture Maintenance	372	1,200	828	69.00
6820-00	Stall Equipment	483	200	(283)	(141.50)
6830-00	Barn Repairs	63	500	437	87.40
6840-00	Barn Tools	171	350	179	51.14
6899-00	Barn Expense - Other	694	200	(494)	(247.00)
Total Barn Expense:		1,853	2,950	1,097	37.19
Repairs					
6910-00	Grounds/Fencing	1,423	2,800	1,377	49.18
6915-00	Equipment Fuel	1,281	1,200	(81)	(6.75)
6920-00	Office/Building Repairs	2,030	2,250	220	9.78
6930-00	Office Equipment Repairs	16	0	(16)	0.00
6940-00	Pasture Equipment Repairs	1,464	2,500	1,036	41.44
6950-00	Pest Control	1,127	1,100	(27)	(2.45)
Total Repairs:		7,341	9,850	2,509	25.47
Horse Expense					
7110-00	Feed	3,186	4,000	814	20.35
7120-00	Farrier Services	3,970	4,000	30	0.75
7130-00	Hay	218	1,500	1,282	85.47

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Montgomery Area Nontraditional Equestrians (MAN)

			Year to Date	ORIGINAL YTD Budget	Variance	Variance %
Horse Expense		(Continued)				
7140-00	Vet		$ 1,805	$ 2,000	$ 195	9.75
7150-00	Vet Supplies		444	1,000	556	55.60
7160-00	Bedding/Shavings		2,703	1,800	(903)	(50.17)
7170-00	Horse Supplies		3,362	1,000	(2,362)	(236.20)
7180-00	Horse Equipment		625	0	(625)	0.00
7199-00	Miscellaneous		74	0	(74)	0.00
Total Horse Expense:			16,387	15,300	(1,087)	(7.10)
Travel & Entertainment						
7200-00	Travel & Entertainment		157	0	(157)	0.00
7210-00	Accomodations		191	0	(191)	0.00
7220-00	Meals		939	0	(939)	0.00
Total Travel & Entertainment:			1,287	0	(1,287)	0.00
Campaign/Fund Raising Expense						
7330-00	Course of Hope Dinner & Auction		64,341	55,000	(9,341)	(16.98)
7332-00	Fund Raising Expenses - Other		7,625	7,500	(125)	(1.67)
Total Campaign/Fund Raising Expense:			71,966	62,500	(9,466)	(15.15)
Total Expenses:			262,342	263,194	852	0.32
Net Ordinary Income:			200,461	95,087	111,374	117.13
Other Income and Expense						
7510-00	Interest Expense		(7,317)	(7,783)	466	5.99
Total Other Income and			(7,317)	(7,783)	466	5.99
Earnings Before Income Tax:			199,144	87,304	111,840	128.10
Net Income:			$ 199,144	$ 87,304	$ 111,840	128.10

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Balance Sheet
As of 9/30/2015

Montgomery Area Nontraditional Equestrians (MAN)

Assets				
Cash				
1113-00	Endowment Fund	$ 11,896		
1115-00	General Fund - Sterling	159,331		
1116-00	Debit Card - Sterling	1,469		
1117-00	Money Market - Sterling	143,007		
1118-00	Fundraising - Sterling	1,801		
	Total Cash:			317,504
Accounts Receivable				
1200-00	Accounts Receivable	2,509		
	Total Accounts Receivable:			2,509
Fixed Assets				
1401-00	Land	627,000		
1405-00	Land Improvements	85,763		
1410-00	Barn & Improvements	795,469		
1420-00	Farm Equipment	48,563		
1430-00	Furniture & Fixtures	23,091		
1440-00	Horses	24,231		
1450-00	Saddles	2,934		
1480-00	Carriage	6,550		
1490-00	Round Pen	26,010		
1495-00	Accumulated Depreciation	(231,496)		
	Total Fixed Assets:			1,408,115
	Total Assets:			$ 1,728,128
Liabilities				
Current Liabilities				
2000-00	Accounts Payable	916		
	Total Current Liabilities:			916
Other Current Liabilities				
2100-00	Payroll Liabilities	1,831		
2399-00	United Way Withholdings	8		
2632-00	Note Payable - Construction Loan	146,136		
	Total Other Current Liabilities:			147,975
	Total Liabilities:			148,891
Equity				
3100-00	Net Income - Current Year	199,144		
3100-00	Fund Balance	1,380,093		
	Total Equity:			1,579,237
	Total Liabilities & Equity:			$ 1,728,128

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2014 and 2013 Financial Statements

Montgomery Area Non-traditional Equestrians

Montgomery, Alabama

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ALDRIDGE BORDEN COMPANY
est. 1918

Mayer W. Aldridge, CPA (1883–1970)
John R. Borden, CPA (1916–1994)

SHAREHOLDERS
Dave G. Borden, CPA, ABV, CFF
James E. Blake, CPA
William L. Cox, CPA, CVA
Richard N. Yon, CPA
Rhonda L. Sibley, CPA, AEP®
W. Dane Floyd, CPA, ABV, CVA, CFF
Jeffrey T. Windham, CPA, ABV, CFP, CVA
B. David Chandler, CPA

PRINCIPALS
Bonnee Barrow Bailey, CPA, CVA
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Scott E. Grier, CPA, CVA
Ashley Conner Lough, CPA
Caterina Ardon Mozingo, CPA, PFS
Roger A. Spain, CPA, CFA, ABV, CVA
Jason A. Westbrook, CPA, CVA

Independent Auditors' Report

To the Board of Directors of
Montgomery Area Non-traditional Equestrians
Montgomery, Alabama

We have audited the accompanying statements of financial position of Montgomery Area Non-traditional Equestrians (a nonprofit organization), which comprise the statements of financial position as of September 30, 2014 and 2013, 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 of 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.

ALDRIDGE, BORDEN & COMPANY, P.C.
Certified Public Accountants
74 Commerce Street, 36104
Post Office Box 33, 36101-0033
Montgomery, Alabama
334 834 6640 tel
www.aldridgeborden.com

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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 Montgomery Area Non-traditional Equestrians as of September 30, 2014 and 2013, 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.

Aldridge, Borden and Company, P.C.

December 15, 2014

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Montgomery Area Non-traditional Equestrians
Montgomery, Alabama
September 30, 2014 and 2013

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Statements of Financial Position

Montgomery Area Non-traditional Equestrians
Montgomery, Alabama
As of September 30

	2014	2013
Assets		
Current assets:		
Cash and cash equivalents	$ 178,656	$ 271,477
Other assets	703	500
Total current assets	179,359	271,977
Property and equipment (net of accumulated depreciation of $256,747 and $237,853 respectively)	1,382,119	1,405,035
Total assets	1,561,478	1,677,012
Liabilities and net assets		
Current liabilities:		
Accounts payable	1,280	649
Accrued liabilities	7,254	4,161
Notes payable - current portion	26,829	25,650
Total current liabilities	35,363	30,460
Notes payable - noncurrent portion	146,021	172,718
Total liabilities	181,384	203,178
Net assets:		
Unrestricted	1,380,094	1,473,834
Total net assets	1,380,094	1,473,834
Total liabilities and net assets	$ 1,561,478	$ 1,677,012

The accompanying notes are an integral part of these financial statements.

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Statement of Activities and Changes in Net Assets

Montgomery Area Non-traditional Equestrians
Montgomery, Alabama
For the year ended September 30, 2014

	Unrestricted	Temporarily Restricted	Total
Revenues and other support			
Grants	$ 51,197		$ 51,197
Contributions	39,676		39,676
In-kind donations	14,645		14,645
Program service fees	15,830		15,830
Special events, net of direct expenses of $16,617	32,064		32,064
Interest	597		597
Total revenues and other support	154,009		154,009
Expenses			
Program services	219,322		219,322
Supporting services:			
Management and general	14,623		14,623
Fundraising	8,469		8,469
Total expenses	242,414		242,414
Losses			
Loss on disposal of fixed assets	5,335		5,335
Total expenses and losses	247,749		247,749
Change in net assets	(93,740)		(93,740)
Net assets - beginning of year	1,473,834		1,473,834
Net assets - end of year	$ 1,380,094		$ 1,380,094

The accompanying notes are an integral part of these financial statements.

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Statement of Activities and Changes in Net Assets

Montgomery Area Non-traditional Equestrians
Montgomery, Alabama
For the year ended September 30, 2013

	Unrestricted	Temporarily Restricted	Total
Revenues and other support			
Grants	$ 56,395		$ 56,395
Contributions	140,064		140,064
In-kind donations	9,150		9,150
Program service fees	16,935		16,935
Special events, net of direct expenses of $52,075	253,036		253,036
Interest	510		510
Net assets released from restriction	17,540	$ (17,540)	
Total revenues and other support	493,630	(17,540)	476,090
Expenses			
Program services	228,770		228,770
Supporting services:			
Management and general	14,119		14,119
Fundraising	9,220		9,220
Total expenses	252,109		252,109
Losses			
Loss on disposal of fixed assets	5,347		5,347
Total expenses and losses	257,456		257,456
Change in net assets	236,174	(17,540)	218,634
Net assets - beginning of year	1,237,660	$ 17,540	1,255,200
Net assets - end of year	$ 1,473,834		$ 1,473,834

The accompanying notes are an integral part of these financial statements.

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Statement of Functional Expenses

Montgomery Area Non-traditional Equestrians
Montgomery, Alabama
For the year ended September 30, 2014

	Program Services	Supporting Services: Management and General	Supporting Services: Fund Raising	Total
Salaries and benefits	$ 100,017	$ 6,595	$ 3,297	$ 109,909
Payroll taxes	7,144	471	235	7,850
Total compensation	107,161	7,066	3,532	117,759
Automobile expense	961	63	32	1,056
Bank charges	58	4	2	64
Depreciation	37,222			37,222
Dues and licenses	517			517
Equine care and feeding	7,927			7,927
Fundraising other			1,001	1,001
Insurance	9,705	640	320	10,665
Interest expense	7,748	511	255	8,514
Marketing			2,659	2,659
Miscellaneous expense	3,230	213	106	3,549
Office supplies	3,281	216	108	3,605
Pasture and barn expenses	10,007			10,007
Postage	1,461	96	48	1,605
Professional fees	5,000	5,000		10,000
Property taxes	1,178			1,178
Repairs and maintenance	7,898			7,898
Therapeutic supplies	15			15
Travel and training	1,040	69	34	1,143
Utilities	11,295	745	372	12,412
Veterinary expenses	3,618			3,618
Totals	$ 219,322	$ 14,623	$ 8,469	$ 242,414

The accompanying notes are an integral part of these financial statements.

Statement of Functional Expenses

Montgomery Area Non-traditional Equestrians
Montgomery, Alabama
For the year ended September 30, 2013

	Program Services	Supporting Services: Management and General	Supporting Services: Fund Raising	Total
Salaries and benefits	$ 90,975	$ 5,998	$ 2,999	$ 99,972
Payroll taxes	5,429	358	179	5,966
Total compensation	96,404	6,356	3,178	105,938
Automobile expense	1,131	75	37	1,243
Bank charges	111	7	4	122
Workshop / certification expense	4,796			4,796
Depreciation	38,866			38,866
Dues and licenses	665			665
Equine care and feeding	13,090			13,090
Fundraising other			2,757	2,757
Insurance	8,918	588	294	9,800
Interest expense	12,566	829	414	13,809
Marketing			1,904	1,904
Miscellaneous expense	1,835	121	60	2,016
Office supplies	5,512	363	182	6,057
Pasture and barn expenses	14,004			14,004
Postage	1,047	69	35	1,150
Professional fees	5,000	5,000		10,000
Property taxes	1,941			1,941
Repairs and maintenance	8,975			8,975
Therapeutic supplies	106			106
Travel and training	274	18	9	301
Utilities	10,503	693	346	11,542
Veterinary expenses	3,026			3,026
Totals	$ 228,770	$ 14,119	$ 9,220	$ 252,109

The accompanying notes are an integral part of these financial statements.

Statements of Cash Flows

Montgomery Area Non-traditional Equestrians
Montgomery, Alabama
For the years ended September 30

	2014	2013
Cash flows from operating activities		
Change in net assets	$ (93,740)	$ 218,634
Adjustments to reconcile change in net assets to cash from operating activities:		
Depreciation	37,222	38,866
Loss on the sale of property and equipment	5,335	5,347
In-kind donation of property and equipment	(4,000)	(2,000)
Changes in assets and liabilities:		
Pledges receivable		17,540
Other assets	(203)	1,480
Accounts payable	631	93
Accrued liabilities	3,093	149
Net cash from operating activities	(51,662)	280,109
Cash flows from investing activities		
Purchases of property and equipment	(15,641)	
Proceeds from sale of property and equipment		800
Net cash from investing activities	(15,641)	800
Cash flows from financing activities		
Payments on long-term debt	(25,518)	(160,622)
Net cash from financing activities	(25,518)	(160,622)
Net increase (decrease) in cash and cash equivalents	(92,821)	120,287
Cash and cash equivalents - beginning of year	271,477	151,190
Cash and cash equivalents - end of year	$ 178,656	$ 271,477

The accompanying notes are an integral part of these financial statements.

Notes to Financial Statements

Montgomery Area Non-traditional Equestrians
Montgomery, Alabama
September 30, 2014 and 2013

Note 1 – Summary of Significant Accounting Policies

Nature of Activities – The Montgomery Area Non-traditional Equestrians (MANE) is a non-profit organization formed in 1994 that provides safe and effective therapeutic horseback riding opportunities to Montgomery and Tri-County area children and adults with emotional, physical, cognitive, and developmental disabilities. MANE serves a widely diverse client base, including those with cerebral palsy, learning disabilities, ADD, Traumatic Brain Injury (TBI), Down Syndrome, Multiple Sclerosis, Autism, Spina Bifida, Epilepsy, mental retardation, stroke patients, accident victims, the elderly, the visually impaired, patients with communicative disorders such as hearing impairment or cochlear implant recipients, and the families of those with disabilities.

MANE is a fully accredited Premier Riding Center through the Professional Association of Therapeutic Horsemanship International (PATH Intl.) formerly known as the North American Riding for the Handicapped Association (NARHA), and all instructors are certified by PATH Intl. PATH Intl. is a regulatory agency that assures stringent standards for quality therapeutic horseback riding through instructor certification, site accreditation, and program monitoring.

Therapeutic horseback riding provides extremely important and effective intervention for people with cognitive, emotional, and/or physical disabilities. A rider straddling a horse stretches tight spastic muscles throughout his or her body. Instructors and therapists use the three-dimensional rhythmic motion of the horse to reduce spasticity and abnormal movements, quicken reflexes, aid in motor planning, and strengthen muscles, joints, and tendons damaged by trauma or illness in their disabled patients. Riders with physical impairments or limited mobility can experience increased balance and muscle control, a wider range of motion, and improved respiration, circulation, appetite, and digestion. Confidence and enhanced self-esteem are positive by-products of therapeutic riding.

MANE operates from a 44-acre site located at 3699 Wallahatchie Road in East Montgomery, which includes an outdoor riding ring, office, and a 15-stall barn with an indoor riding area. MANE serves approximately 90 individuals weekly (depending on weather conditions) and currently has a waiting list for services during 4 sessions throughout the year. A full-time Program Director, Staff Instructors, and Executive Director enable MANE to serve increasing numbers of individuals with disabilities through therapeutic riding programs. During the year ended September 30, 2014, MANE gave 618 lessons using volunteers who donated over 10,000 hours of service. During the year ended September 30, 2013, MANE gave 750 lessons using volunteers who donated over approximately 10,000 hours of service. About 80% of the riders have cognitive disabilities or are emotionally/behaviorally at risk and about 20% have physical disabilities; many have multiple handicaps requiring extensive staff and volunteer support. Over 90% of the riders are children.

Basis of Presentation – Professional standards establish guidelines for external financial reporting by not-for-profit organizations and require resources to be classified for accounting and reporting purposes into three net asset categories according to externally (donor) imposed restrictions. The three classes of net assets are: (1) Unrestricted net assets - Net assets that are not subject to donor-imposed stipulations; (2) Temporarily restricted net assets - Net assets subject to donor-imposed stipulations that may or will be met either by actions of MANE (e.g., performing program services) and/or the passage of time; and (3) Permanently restricted net assets - Net assets subject to donor-imposed stipulations that may be maintained permanently by MANE.

In addition, MANE is required to present a statement of cash flows.

Cash and Cash Equivalents – All investments purchased with a maturity of three months or less are considered to be cash equivalents.

Note 1 – Summary of Significant Accounting Policies (Continued)

Property and Equipment – Expenditures for property, equipment, and improvements are capitalized at cost. Equipment expenditures of $500 or less are charged to expense. Ordinary repairs and maintenance are charged to expense when incurred. Donated assets are capitalized, and recorded as support, at their fair market value at the date of receipt. Such donations are reported as unrestricted support unless the donor has restricted the donated asset to a specific purpose. Assets donated with explicit restrictions regarding their use, and contributions of cash that must be used to acquire property and equipment, are reported as restricted support. Absent donor stipulations regarding how long those donated assets must be maintained, the Organization reports expirations of donor restrictions when the donated or acquired assets are placed in service as instructed by the donor. The Organization reclassifies temporarily restricted net assets to unrestricted net assets at that time. Depreciation is computed using the straight-line method over the estimated useful lives of the related assets, which are as follows:

Furniture and equipment	3-12 years
Land improvements	10-20 years
Building and improvements	20-40 years

Depreciation expense for the years ending September 30, 2014 and 2013 was $37,222 and $38,866, respectively.

Contributions – In accordance with current accounting standards, contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence and/or nature of any donor restrictions. Support that is restricted by the donor is reported as an increase in unrestricted net assets if the restriction expires in the reporting period in which the support is recognized. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets. A number of unpaid volunteers have made significant contributions of their time to MANE. Management estimates that their volunteers donated more than 10,000 hours during the years ended September 30, 2014 and 2013. However, the value of these services is not reflected in these statements because the criteria for recognition have not been satisfied.

Program Service Fees – Program service fees charged to riders are allocated to the period in which services are to be provided. Fees received prior to rendering the service are recognized as deferred revenue.

Expense Allocation – The costs of providing various programs and other activities have been summarized on a functional basis in the Statement of Activities and Changes in Net Assets and Statement of Functional Expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

Income Tax Status – MANE holds 501(c)(3) corporation status, and conducts its activities exclusively for charitable and educational purposes within the meaning of the U.S. Internal Revenue Code of 1986 under which it is qualified as a tax-exempt organization. Therefore, it has no provision for federal income taxes.

MANE has implemented the accounting guidance for uncertainty in income taxes. Using that guidance, tax positions initially need to be recognized in the financial statements when it is more-likely-than-not the position will be sustained upon examination by the tax authorities. As of September 30, 2014, MANE had no uncertain tax positions that qualify for either recognition or disclosure in the financial statements. MANE is no longer subject to income tax examinations by major tax jurisdictions for years before 2011.

Note 1 – Summary of Significant Accounting Policies (Continued)

Significant 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.

Subsequent Events – Management has evaluated subsequent events through December 15, 2014, which is the date the financial statements were available to be issued.

Note 2 – Pledges Receivable

In 2013, MANE received the final installment on a five year pledge. The total received was $20,000. This amount had been carried as a pledge receivable totaling $17,540 discounted at a rate of 3.25% due to the timing of the receipt of the pledge. Since the final installment was received in 2013, there was no pledge receivable balance or unamortized discount at September 30, 2014 and 2013.

Note 3 – Property and Equipment

Balances of major classes of assets and allowances for depreciation are as follows at September 30:

	2014		
	Cost	Accumulated Depreciation	Net
Buildings and improvements	$ 731,025	$ 89,058	$ 641,967
Land	627,000		627,000
Land improvements	176,217	91,799	84,418
Equipment	61,440	43,430	18,010
Horses	20,682	11,916	8,766
Furniture and fixtures	22,502	20,544	1,958
Total	$ 1,638,866	$ 256,747	$ 1,382,119

	2013		
	Cost	Accumulated Depreciation	Net
Buildings and improvements	$ 731,025	$ 70,762	$ 660,263
Land	627,000		627,000
Land improvements	176,217	82,533	93,684
Equipment	54,647	48,867	5,780
Horses	29,972	16,021	13,951
Furniture and fixtures	24,027	19,670	4,357
Total	$ 1,642,888	$ 237,853	$ 1,405,035

Note 4 – Statement of Cash Flow Disclosures

During the years ended September 30, 2014 and 2013, MANE received a total of $4,000 and $2,000 in donations of property and equipment, respectively.

During the years ended September 30, 2014 and 2013, MANE paid interest of $8,514 and $13,809, respectively, all of which was charged to expense.

Note 5 – Related Party Transactions

During the years ended September 30, 2014 and 2013, certain Board Members, members of their families, and related businesses made cash and in-kind contributions to MANE. No board members have received directly or indirectly compensation from MANE.

Note 6 – Concentrations

At various times, MANE maintained deposits in excess of the Federal Deposit Insurance Corporation (FDIC) limitations in two banks located in Montgomery, Alabama. At September 30, 2014, MANE had no amounts in excess of the FDIC limit, which is $250,000 for both interest and non-interest bearing accounts. At September 30, 2013, the amount at risk totaled $10,365. MANE has not experienced any losses in relation to its deposits and believes it is not exposed to any significant credit risk on its cash balances.

MANE receives the majority of its revenue from its golf tournament and dinner auction held every other year, and from United Way.

Note 7 – Lease Commitments

MANE is party to a noncancelable operating lease for a copier. The lease carries a 60-month term. As of September 30, 2014, the total remaining operating lease payments are as follows:

Year	Amount
2015	$ 1,188
2016	396

For the years ending September 30, 2014 and 2013, payments related to the operating lease were $1,236 and $1,188, respectively, and are reflected as a component of office supplies on the accompanying Statements of Functional Expenses.

Note 8 – Long-term Debt

In February of 2012, MANE established a note payable with Sterling Bank. The note bears a fixed interest rate of 4.5% and is due in February 2017. The note requires monthly principal and interest payments of $2,836 and is secured by real property located in Pike Road, AL. At September 30, 2014 and 2013, MANE had a principal balance of $172,850 and $198,368. The following is a schedule of principal maturities on the note payable for each of the next three years.

Year	Amount
2015	$ 27,419
2016	28,061
2017	117,370
Note Payable	$ 172,850

Form **8453-EO**

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2013, or tax year beginning 10/01, 2013, and ending 09/30, 20 14

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

OMB No. 1545-1879

2013

Department of the Treasury
Internal Revenue Service

Name of exempt organization

MONTGOMERY AREA NON-TRADITIONAL EQUESTRI

Employer identification number

58-2213532

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

Check the box for the type of return being filed with Form 8453-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 of 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-). 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 141,674.
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, Part I, line 3c or Part II, line 8c)	5b

Part II Declaration of Officer

6 [ ] I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) 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.

[ ] If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2013 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.

Sign Here ▶ _____ 12/10/15 ▶ Treasurer
Signature of officer — Date — Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only

ERO's signature ▶		Date 02/18/15	Check if also paid preparer [X]	Check if self-employed [ ]	ERO's SSN or PTIN P00911136
Firm's name (or yours if self-employed), address, and ZIP code ▶	HABIF, AROGETI, & WYNNE, L.L.P. FIVE CONCOURSE PARKWAY, SUITE 1000 ATLANTA GA 30328				EIN 57-1157523 Phone no. 404-892-9651

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
JEFFREY L WINLAND				
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no.	

For Privacy Act and Paperwork Reduction Act Notice, see back of form. Form **8453-EO** (2013)

JSA
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9-39

Return of Organization Exempt From Income Tax

Form **990**

Department of the Treasury
Internal Revenue Service

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.

▶ Information about Form 990 and its instructions is at *www.irs.gov/form990*.

OMB No. 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 10/01, 2013, and ending 09/30, 20 14

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

C Name of organization: MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS

Doing Business As:

Number and street (or P.O. box if mail is not delivered to street address): 3699 WALLAHATCHIE ROAD

Room/suite:

City or town, state or province, country, and ZIP or foreign postal code: PIKE ROAD, AL 36064

F Name and address of principal officer:

D Employer identification number: 58-2213532

E Telephone number: (334) 213-0909

G Gross receipts $ 164,344.

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.MANEWEB.ORG

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

L Year of formation: 1994 M State of legal domicile: AL

Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO PROVIDE THERAPEUTIC HORSEBACK RIDING OPPORTUNITIES FOR CHILDREN AND ADULTS WITH EMOTIONAL, PHYSICAL, AND DEVELOPMENTAL DISABILITIES. SEE ATTACHED STATEMENT A.

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	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 2013 (Part V, line 2a)	5	2.
6 Total number of volunteers (estimate if necessary)	6	185.
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
8 Contributions and grants (Part VIII, line 1h)	198,460.	98,518.
9 Program service revenue (Part VIII, line 2g)	16,935.	15,830.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-4,837.	-4,738.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	253,035.	32,064.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	463,593.	141,674.
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)	105,938.	117,759.
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 8,469.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	139,021.	117,655.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	244,959.	235,414.
19 Revenue less expenses. Subtract line 18 from line 12	218,634.	-93,740.

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	1,677,012.	1,561,478.
21 Total liabilities (Part X, line 26)	203,178.	181,384.
22 Net assets or fund balances. Subtract line 21 from line 20	1,473,834.	1,380,094.

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

▶ Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
JEFFREY L WINLAND	JEFFREY L WINLAND			P00911136

Firm's name ▶ HABIF, AROGETI, & WYNNE, L.L.P. — Firm's EIN ▶ 57-1157523

Firm's address ▶ FIVE CONCOURSE PARKWAY, SUITE 1000 ATLANTA, GA 30328 — Phone no. 404-892-9651

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

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2013)

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9-40

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:

TO PROVIDE THERAPEUTIC HORSEBACK RIDING OPPORTUNITIES FOR CHILDREN AND ADULTS WITH EMOTIONAL, PHYSICAL, COGNITIVE, AND DEVELOPMENTAL DISABILITIES.

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 $ 215,822. including grants of $) (Revenue $ 15,830.)

THE ORGANIZATION PROVIDED 618 LESSONS USING VOLUNTEERS WHO DONATED OVER 10,000 HOURS OF SERVICE TO CHILDREN AND ADULTS WITH EMOTIONAL, PHYSICAL, COGNITIVE AND DEVELOPMENTAL DISABILITIES.

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 ▶ 215,822.

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		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or 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 individuals in the United States 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
24 a	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		
25 a	**Section 501(c)(3) and 501(c)(4) 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 payable to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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
35 a	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	
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 2		
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	X	
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 Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
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	X	
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		X
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		X
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the 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		

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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 . . . . . 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.	1a 13		
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		
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 ▶ AL

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.

[X] 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, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ HEATHER KING 2660 EASTCHASE LANE, SUITE 100 MONTGOMERY, AL 36117 334-260-2522

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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 X

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.

X 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) CINDY LONGSHORE DIRECTOR		X						0	0	0
(2) CHIEF MIKE WARD DIRECTOR		X						0	0	0
(3) JUDGE FRANK MCFADDEN DIRECTOR		X						0	0	0
(4) MICHELLE PARKINSON DIRECTOR		X						0	0	0
(5) SUSAN WILSON DIRECTOR	15.00	X						0	0	0
(6) CHERI JORDAN DIRECTOR		X						0	0	0
(7) LYDIA PRICE BERINGER DIRECTOR		X						0	0	0
(8) KATHARINE HARRIS DIRECTOR		X						0	0	0
(9) JENNIFER G. BROWN DIRECTOR		X						0	0	0
(10) JENNIFER GREMANUX DIRECTOR		X						0	0	0
(11) KELLY WILSON PRESIDENT				X				0	0	0
(12) HEATHER KING SECRETARY TREASURER	1.00			X				0	0	0
(13) JIM EDWARDS VICE PRESIDENT				X				0	0	0
(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			
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*		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
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in 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 33,556.				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 64,962.				
	g	Noncash contributions included in lines 1a-1f: $ 7,745.					
	h	Total. Add lines 1a-1f	▶	98,518.			
Program Service Revenue			Business Code				
	2a	PROGRAM SERVICES	900099	15,830.	15,830.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f	▶	15,830.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts). ATTACHMENT 1	▶	597.			597.
	4	Income from investment of tax-exempt bond proceeds	▶	0			
	5	Royalties	▶	0			
			(i) Real / (ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)	▶	0			
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	718.				
	b	Less: cost or other basis and sales expenses	6,053.				
	c	Gain or (loss)	-5,335.				
	d	Net gain or (loss)	▶	-5,335.			
	8a	Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	a 48,681.				
	b	Less: direct expenses	b 16,617.				
	c	Net income or (loss) from fundraising events ATCH 2	▶	32,064.			
	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	▶	0			
	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	▶	0			
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d	▶	0			
	12	Total revenue. See instructions	▶	141,674.	15,830.		597.

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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 governments and organizations in the United States. See Part IV, line 21	0			
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	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			
7 Other salaries and wages	109,909.	100,017.	6,595.	3,297.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9 Other employee benefits	0			
10 Payroll taxes	7,850.	7,144.	471.	235.
11 Fees for services (non-employees):				
a Management	0			
b Legal	0			
c Accounting	3,000.	1,500.	1,500.	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	0			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0			
12 Advertising and promotion	0			
13 Office expenses	3,605.	3,281.	216.	108.
14 Information technology	0			
15 Royalties	0			
16 Occupancy	0			
17 Travel	1,143.	1,040.	69.	34.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	0			
20 Interest	8,514.	7,748.	511.	255.
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	37,222.	37,222.		
23 Insurance	10,665.	9,705.	640.	320.
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 MARKETING	2,659.			2,659.
b BANK CHARGES & PENALTIES	64.	58.	4.	2.
c MISCELLANEOUS	3,549.	3,230.	213.	106.
d PASTURE & BARN EXPENSE	10,007.	10,007.		
e All other expenses ATCH 3	37,227.	34,870.	904.	1,453.
25 Total functional expenses. Add lines 1 through 24e	235,414.	215,822.	11,123.	8,469.
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)	0			

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		0	1	0
	2	Savings and temporary cash investments		271,477.	2	178,656.
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		500.	4	703.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		0	5	0
	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		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		0	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,638,865.			
	b	Less: accumulated depreciation	10b 256,746.	1,405,035.	10c	1,382,119.
	11	Investments - publicly traded securities		0	11	0
	12	Investments - other securities. See Part IV, line 11		0	12	0
	13	Investments - program-related. See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11		0	15	0
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		1,677,012.	16	1,561,478.
Liabilities	17	Accounts payable and accrued expenses		649.	17	1,280.
	18	Grants payable		0	18	0
	19	Deferred revenue		0	19	0
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0
	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		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		198,368.	23	172,850.
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	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		4,161.	25	7,254.
	26	**Total liabilities.** Add lines 17 through 25		203,178.	26	181,384.
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		1,473,834.	27	1,380,094.
	28	Temporarily restricted net assets		0	28	0
	29	Permanently restricted net assets		0	29	0
		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		1,473,834.	33	1,380,094.
	34	Total liabilities and net assets/fund balances		1,677,012.	34	1,561,478.

Form **990** (2013)

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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	141,674.
2	Total expenses (must equal Part IX, column (A), line 25)	2	235,414.
3	Revenue less expenses. Subtract line 2 from line 1	3	-93,740.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,473,834.
5	Net unrealized gains (losses) on investments	5	0
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
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	1,380,094.

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		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.**
▶ **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.***

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS	58-2213532

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 11, 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.)

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 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.)

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

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III-Functionally integrated d ☐ Type III-Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	X
(ii)	A family member of a person described in (i) above?	11g(ii)	X
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	X

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col. (i) of your support? Yes	(v) No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	(vi) No	(vii) Amount of monetary support
(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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 IV.)						
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 2013 (line 6, column (f) divided by line 11, column (f)) . . . . . 14 %

15 Public support percentage from 2012 Schedule A, Part II, line 14 . . . . . 15 %

16a **33 1/3 % support test - 2013.** 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 - 2012.** 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 - 2013.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test - 2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	132,593.	257,503.	169,560.	451,495.	130,582.	1,141,733.
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	16,213.	24,670.	23,135.	16,935.	15,830.	96,783.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	148,806.	282,173.	192,695.	468,430.	146,412.	1,238,516.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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						0
c Add lines 7a and 7b						0
8 Public support (Subtract line 7c from line 6.)						1,238,516.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	148,806.	282,173.	192,695.	468,430.	146,412.	1,238,516.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	762.	689.	429.	510.	597.	2,987.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	762.	689.	429.	510.	597.	2,987.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	149,568.	282,862.	193,124.	468,940.	147,009.	1,241,503.

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 2013 (line 8, column (f) divided by line 13, column (f))	15	99.76%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	99.76%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	.24%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	.24%

19a 33 1/3% support tests - 2013. 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 - 2012. 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 **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. 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.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2013

Name of the organization
MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS

Employer identification number
58-2213532

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, $5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

[ ] For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of $5,000 or more during the year . . . . . ▶ $ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS | Employer identification number 58-2213532

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	UNITED WAY P.O. BOX 6135 MONTGOMERY, AL 36106	$ 33,556.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	THE THOMPSON FOUNDATION P.O. BOX 10367 BIRMINGHAM, AL 35202	$ 5,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	JOHN AND PATRICIA MOREHOUSE 3233 THOMAS AVENUE MONTGOMERY, AL 36106	$ 5,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4	HYUNDAI 700 HYUNDAI BOULEVARD MONTGOMERY, GA 36105	$ 5,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5	ROBYN AND KAREN READ 3699 WALLAHATCHIE ROAD PIKE ROAD, AL 36064	$ 5,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6	RITE AID FOUNDATION 3699 WALLAHATCHIE ROAD PIKE ROAD, AL 36064	$ 5,100.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS | Employer identification number 58-2213532

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
7	CHILDREN'S TRUST FUND 100 NORTH UNION STREET MONTGOMERY, AL 36104	$ 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.)
		$	Person [ ] 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.)

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Name of organization MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS

Employer identification number 58-2213532

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 MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS

Employer identification number 58-2213532

Part III ***Exclusively* religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than $1,000 for the year. 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.) ▶ $

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," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS

Employer identification number

58-2213532

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

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

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" to 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 an 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 8/17/06, 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, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, 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" to 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) Revenues included in 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 Revenues included in 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" to 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? ☐ Yes ☐ No

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

Part V Endowment Funds. Complete if the organization answered "Yes" to 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 in 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" to 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" to 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	627,000.			627,000.
b Buildings	731,025.		89,058.	641,967.
c Leasehold improvements	176,217.		91,799.	84,418.
d Equipment	83,942.		63,974.	19,968.
e Other	20,682.		11,916.	8,766.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				1,382,119.

Schedule D (Form 990) 2013

JSA
3E1269 2.000

9-62

Part VII Investments - Other Securities.
Complete if the organization answered "Yes" to 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" to 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" to 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" to 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	2,537.
(3) ACCRUED EXPENSES	4,670.
(4) UNITED WAY WITHHOLDINGS	47.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	7,254.

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" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	148,674.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b	7,000.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	7,000.
3	Subtract line 2e from line 1			3	141,674.
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	141,674.

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

1	Total expenses and losses per audited financial statements			1	242,414.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	7,000.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	7,000.
3	Subtract line 2e from line 1			3	235,414.
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	235,414.

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.

SEE PAGE 5

Part XIII Supplemental Information *(continued)*

PART X - LINE 2

MANE IMPLEMENTED THE ACCOUNTING GUIDANCE FOR UNCERTAINTY IN INCOME TAXES. USING THAT GUIDANCE, TAX POSITIONS INITIALLY NEED TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN IT IS MORE-LIKELY-THAN-NOT THE POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE TAX AUTHORITIES. AS OF SEPTEMBER 30, 2014, MANE HAD NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FIANCIAL STATEMENTS. MANE IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY MAJOR TAX JURISDICTIONS FOR YEARS BEFORE 2011.

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" to Form 990, Part IV, lines 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.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization: MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS

Employer identification number: 58-2213532

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to 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 ten 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 col. (i)	(vi) Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total ▶							

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.

Part II **Fundraising Events.** Complete if the organization answered "Yes" to 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 FUNDRAISING (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	48,681.			48,681.
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	48,681.			48,681.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	16,617.			16,617.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				16,617.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				32,064.

Part III **Gaming.** Complete if the organization answered "Yes" to 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 col. (a) through col. (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 operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10 a 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 operate 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 operated 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 ▶ _____

15 a 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 explanation 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 complete this part to provide any additional information (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.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS	58-2213532

FORM 990, PART 2

THE MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS (MANE) IS A NON-PROFIT ORGANIZATION FORMED IN 1994 THAT PROVIDES SAFE AND EFFECTIVE THERAPEUTIC HORSEBACK RIDING OPPORTUNITIES TO MONTGOMERY AND TRI-COUNTY AREA CHILDREN AND ADULTS WITH EMOTIONAL, PHYSICAL, COGNITIVE, AND DEVELOPMENTAL DISABILITIES. MANE SERVES A WIDELY DIVERSE CLIENT BASE, INCLUDING THOSE WITH CEREBRAL PALSY, LEARNING DISABILITIES, ADD, TRAUMATIC BRAIN INJURY (TBI), DOWN SYNDROME, MULTIPLE SCLEROSIS, AUTISM, SPINA BIFIDA, EPILEPSY, MENTAL RETARDATION, STROKE PATIENTS, ACCIDENT VICTIMS, THE ELDERLY, THE VISUALLY IMPAIRED, PATIENTS WITH COMMUNICATIVE DISORDERS SUCH AS HEARING IMPAIRMENT OR COCHLEAR IMPLANT RECIPIENTS, AND THE FAMILIES OF THOSE WITH DISABILITIES.

MANE HOLDS 501(C)(3) CORPORATION STATUS, AND CONDUCTS ITS ACTIVITIES EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL PURPOSES WITHIN THE MEANING OF THE U.S. INTERNAL REVENUE CODE OF 1986 UNDER WHICH IT IS QUALIFIED AS A TAX EXEMPT ORGANIZATION. THEREFORE, IT HAS NO PROVISION FOR FEDERAL INCOME TAXES.

MANE IS A FULLY ACCREDITED PREMIER RIDING CENTER THROUGH THE PROFESSIONAL ASSOCIATION OF THERAPEUTIC HORSEMANSHIP INTERNATIONAL (PATH INTL.) FORMERLY KNOWN AS THE NORTH AMERICAN RIDING FOR THE HANDICAPPED ASSOCIATION (NARHA), AND ALL INSTRUCTORS ARE CERTIFIED BY PATH INTL. PATH INTL. IS A REGULATORY AGENCY THAT ASSURES STRINGENT STANDARDS FOR QUALITY

Name of the organization: MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS

Employer identification number: 58-2213532

THERAPEUTIC HORSEBACK RIDING THROUGH INSTRUCTOR CERTIFICATION, SITE ACCREDITATION, AND PROGRAM MONITORING.

THERAPEUTIC HORSEBACK RIDING PROVIDES EXTREMELY IMPORTANT AND EFFECTIVE INTERVENTION FOR PEOPLE WITH COGNITIVE, EMOTIONAL, AND/OR PHYSICAL DISABILITIES. A RIDER STRADDLING A HORSE STRETCHES TIGHT SPASTIC MUSCLES THROUGHOUT HIS OR HER BODY. INSTRUCTORS AND THERAPISTS USE THE THREE-DIMENSIONAL RHYTHMIC MOTION OF THE HORSE TO REDUCE SPASTICITY AND ABNORMAL MOVEMENTS, QUICKEN REFLEXES, AID IN MOTOR PLANNING, AND STRENGTHEN MUSCLES, JOINTS, AND TENDONS DAMAGED BY TRAUMA OR ILLNESS IN THEIR DISABLED PATIENTS. RIDERS WITH PHYSICAL IMPAIRMENTS OR LIMTED MOBILITY CAN EXPERIENCE INCREASED BALANCE AND MUSCLE CONTROL; A WIDER RANGE OF MOTION; AND IMPROVED RESPIRATION, CIRCULATION, APPETITE, AND DIGESTION. CONFIDENCE AND ENHANCED SELF-ESTEEM ARE POSITIVE BY-PRODUCTS OF THERAPEUTIC RIDING.

MANE OPERATES FROM A 44 ACRE SITE LOCATED AT 3699 WALLAHATCHIE ROAD IN EAST MONTGOMERY, WHICH INCLUDES AN OUTDOOR RIDING RING, OFFICE, AND A 15 STALL BARN WITH AN INDOOR RIDING AREA. MANE SERVES APPROXIMATELY 90 INDIVIDUALS WEEKLY (DEPENDING ON WEATHER CONDITIONS) AND CURRENTLY HAS A WAITING LIST FOR SERVICES DURING 4 SESSIONS THROUGHOUT THE YEAR. A FULL-TIME PROGRAM DIRECTOR, STAFF INSTRUCTOR, AND EXECUTIVE DIRECTOR ENABLE MANE TO SERVE INCREASING NUMBERS OF INDIVIDUALS WITH DISABILITIES THROUGH TERAPEUTIC RIDING PROGRAMS. DURING THE YEAR ENDED SEPTEMBER 30, 2014, MANE GAVE 618 LESSONS USING VOLUNTEERS WHO DONATE OVER 10,000 HOURS

Name of the organization	Employer identification number
MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS	58-2213532

OF SERVICE. ABOUT 80% OF THE RIDERS HAVE COGNITIVE DISABILITIES OR ARE EMOTIONALLY/BEHAVIORALLY AT RISK AND ABOUT 20% PHYSICAL DISABILITES; MANY HAVE MULTIPLE HANDICAPS REQUIRING EXTENSIVE STAFF AND VOLUNTEER SUPPORT. OVER 90% OF THE RIDERS ARE CHILDREN.

FORM 990

FORM 990, PART VI, SECTION A, GOVERNING BODY AND MANAGEMENT, LINE 10 - DESCRIPTION OF FORM 990 REVIEW PROCESS BY THE ORGANIZATION MANE'S ACCOUNTING BOOKS AND RECORDS ARE MAINTAINED BY THE CHARITY'S TREASURER, HEATHER KING. AFTER THE END OF THE TAX YEAR MANE IS AUDITED BY AN INDEPENDENT AUDITOR. ONCE THE AUDIT IS COMPLETE A COPY OF THE AUDITED FINANCIALS ARE SENT TO THE TAX PREPARER (HABIF, AROGETI & WYNNE, LLP) FOR THE PREPARATION OF THE TAX RETURN (FORM 990 AND SUBSEQUENT SCHEDULES). ONCE THE RETURN PREPARATION IS COMPLETE A COPY OF THE RETURN IS FURNISHED TO HEATHER KING FOR HER REVIEW. ONCE THE RETURN HAS BEEN REVIEWED AND APPROVED BY HEATHER KING IT IS GIVEN TO BETTIE BORTON FOR HER REVIEW BEFORE SIGNING AND FILING WITH THE RESPECTIVE FEDERAL AND STATE GOVERNMENTS. THEY ARE ALSO DISTRIBUTED TO ALL BOARD MEMBERS FOR THEIR REVIEW PRIOR TO FILING.

FORM 990, PART VI, SECTION B, POLICIES, LINE 12C: THE BOARD OF DIRECTORS ARE WELL KNOWN TO EACH OTHER AND ARE SELECTED FOR THEIR INTEGRITY, HONESTY, AND LACK OF POTENTIAL FOR A CONFLICT OF INTEREST. SHOULD A CONFLICT OF INTEREST ARISE, BOARD MEMBERS ARE EXPECTED TO SELF-REPORT THE CONFLICT AND THE POLICY IS STRICTLY ENFORCED.

Name of the organization: MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS

Employer identification number: 58-2213532

FORM 990, PART VI, SECTION B, POLICIES, LINE 15: ALL SALARIES ARE DETERMINED BY THE BOARD. FORM 990, PART VI, SECTION C, DISCLOSURE, LINE 19: MANE POSTS ALL GOVERNING INFORMATION ON ITS OWN WEBSITE WHICH IS ACCESSIBLE TO THE PUBLIC.

FORM 990, PART VII, SECTION A, LINE 1A: THERE ARE NO OFFICER THAT RECEIVE COMPENSATION. NO EMPLOYEE RECEIVES $100,000 OR MORE OF COMPENSATION.

ATTACHMENT 1

FORM 990, PART VIII - INVESTMENT INCOME

DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
INTEREST INCOME	597.			597.
TOTALS	597.			597.

ATTACHMENT 2

FORM 990, PART VIII - FUNDRAISING EVENTS

DESCRIPTION	GROSS INCOME	DIRECT EXPENSES	NET INCOME
COURSE OF HOPE	44,381.	16,617.	27,764.
MISCELLANEOUS FUNDRAISING	4,300.		4,300.
TOTALS	48,681.	16,617.	32,064.

ATTACHMENT 3

Name of the organization: MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS

Employer identification number: 58-2213532

ATTACHMENT 3 (CONT'D)

FORM 990, PART IX - OTHER EXPENSES

DESCRIPTION	(A) TOTAL EXPENSES	(B) PROGRAM SERVICE EXP.	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING EXPENSES
VETERINARY EXPENSE	3,618.	3,618.		
AUTO EXPENSE	1,056.	961.	63.	32.
EQUINE CARE & FEEDING	7,927.	7,927.		
REPAIRS & MAINTENANCE	7,898.	7,898.		
OTHER TAXES	1,178.	1,178.		
DUES & LICENSES	517.	517.		
POSTAGE	1,605.	1,461.	96.	48.
THERAPEUTIC SUPPLIES	15.	15.		
UTILITIES	12,412.	11,295.	745.	372.
FUNDRAISING EXPENSES	1,001.			1,001.
TOTALS	37,227.	34,870.	904.	1,453.

Form **4797**

Department of the Treasury
Internal Revenue Service

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

▶ Attach to your tax return.

▶ Information about Form 4797 and its separate instructions is at *www.irs.gov/form4797*.

OMB No. 1545-0184

2013

Attachment Sequence No. **27**

Name(s) shown on return: MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS

Identifying number: 58-2213532

1 Enter the gross proceeds from sales or exchanges reported to you for 2013 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions) 1

Part I **Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year** (see instructions)

2 (a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
ATTACHMENT 1						-5,335.

3 Gain, if any, from Form 4684, line 39	3	
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37	4	
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5	
6 Gain, if any, from line 32, from other than casualty or theft	6	
7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows:	7	-5,335.
Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.		
Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.		
8 Nonrecaptured net section 1231 losses from prior years (see instructions)	8	
9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions)	9	

Part II **Ordinary Gains and Losses** (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

11 Loss, if any, from line 7	11	(5,335)
12 Gain, if any, from line 7 or amount from line 8, if applicable	12	
13 Gain, if any, from line 31	13	
14 Net gain or (loss) from Form 4684, lines 31 and 38a	14	
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17 Combine lines 10 through 16	17	-5,335.
18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below:		
a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." See instructions	18a	
b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 14	18b	

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A		
B		
C		
D		

These columns relate to the properties on lines 19A through 19D. ▶		Property A	Property B	Property C	Property D
20 Gross sales price (Note: *See line 1 before completing.*)	20				
21 Cost or other basis plus expense of sale	21				
22 Depreciation (or depletion) allowed or allowable	22				
23 Adjusted basis. Subtract line 22 from line 21	23				
24 Total gain. Subtract line 23 from line 20	24				
25 If section 1245 property:					
a Depreciation allowed or allowable from line 22	25a				
b Enter the smaller of line 24 or 25a	25b				
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.					
a Additional depreciation after 1975 (see instructions)	26a				
b Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b				
c Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c				
d Additional depreciation after 1969 and before 1976	26d				
e Enter the smaller of line 26c or 26d	26e				
f Section 291 amount (corporations only)	26f				
g Add lines 26b, 26e, and 26f	26g				
27 If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).					
a Soil, water, and land clearing expenses	27a				
b Line 27a multiplied by applicable percentage (see instructions)	27b				
c Enter the smaller of line 24 or 27b	27c				
28 If section 1254 property:					
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions)	28a				
b Enter the smaller of line 24 or 28a	28b				
29 If section 1255 property:					
a Applicable percentage of payments excluded from income under section 126 (see instructions)	29a				
b Enter the smaller of line 24 or 29a (see instructions)	29b				

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30 Total gains for all properties. Add property columns A through D, line 24	30	
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions)

		(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33		
34 Recomputed depreciation (see instructions)	34		
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35		

Description	Date Acquired	Date Sold	Gross Sales Price	Depreciation Allowed or Allowable	Cost or Other Basis	Gain or (Loss) for entire year
FARM EQUIPMENT	VARIOUS	09/30/2014	718.	8,716.	9,732.	-298.
COMPUTERS	VARIOUS	09/30/2014		1,200.	1,525.	-325.
HORSE	10/15/2004	09/30/2014		3,278.	3,950.	-672.
HORSE DALLAS	09/28/2008	09/30/2014		2,143.	2,500.	-357.
HORSE ROSE	10/12/2011	09/30/2014		643.	1,500.	-857.
HORSE TEX	05/25/2012	09/30/2014		667.	2,000.	-1,333.
HORSE GODIVA	05/31/2013	09/30/2014		619.	2,000.	-1,381.
HORSE JILL	10/01/2003	09/30/2014		1,229.	1,341.	-112.
Totals						-5,335.

9-26

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2013

Attachment Sequence No. **179**

Name(s) shown on return: MONTGOMERY AREA NON-TRADITIONAL EQUESTRIANS

Identifying number: 58-2213532

Business or activity to which this form relates: GENERAL 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	
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	
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 2012 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 do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 ▶	13	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II Special Depreciation Allowance and Other Depreciation (Do not 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	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2013	17	36,780.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B - Assets Placed in Service During 2013 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	SEE DETAIL					
b	5-year property		2,738.	5.000	SL	SL	109.
c	7-year property		4,000.	7.000	SL	SL	333.
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 2013 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
c	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	37,222.
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	

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

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

Section A - Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles.*)

24a Do you have evidence to support the business/investment use claimed? Yes [X] No 24b If "Yes," is the evidence written? Yes [X] No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

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

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

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

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: *If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.*

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2013 tax year (see instructions):					
43 Amortization of costs that began before your 2013 tax year				43	
44 Total. Add amounts in column (f). See the instructions for where to report				44	

Last Tuesday the governing board of the Alabama Local Government Health Insurance Program approved new rates for 2017. Rates for individual and family coverage in both the "preferred" and "standard" classifications will be increased by 4 percent. The increase, which is well below the national average, will be reflected on the December billing cycle.

2. Session Nears Conclusion

The special legislative session will reconvene tomorrow, with all eyes focused on the bill that would distribute the state's proceeds from settling its claims against BP as a result of the Deepwater Horizon oil spill.

Competing interests continue to work toward a resolution that will repay a significant portion of the funds owed to the Alabama Trust Fund and provide funding for the ailing Medicaid program and road construction in Mobile and Baldwin counties.

Watch your "inbox" for more details.

3. 14...If You Can Believe It

This year's November election will include a total of 14 proposed statewide constitutional amendments, including three that are vitally important to Alabama counties. (See also: full list of Proposed Constitutional Amendments (Statewide & Local) provided by the Secretary of State.)

VOTE YES: Statewide Amendment 3
Local Constitutional Amendments
To revise legislative procedures so that proposed local constitutional amendments are less likely to face a statewide referendum.

VOTE YES: Statewide Amendment 4
Administrative Decision-Making
To provide counties with *limited* authority to carry out management and administrative activities without the need for passage of future local laws.

VOTE YES: Statewide Amendment 14
Protect Local Laws
To ratify hundreds of existing local laws that were passed with House vote counts which are currently under court challenge.

10-1

Summary Information for Proposed Constitutional Amendments to appear on the 2016 General Election Ballot

To view the full text of the Act that proposes the constitutional amendment, click the Act number that appears in blue at the end of each proposed amendment.

PROPOSED AMENDMENTS TO APPEAR ON THE BALLOT STATEWIDE

Statewide Amendment 1

Proposing an amendment to the Constitution of Alabama of 1901, to establish procedures to ensure that no more than three of the members of the Auburn University Board of Trustees shall have terms that expire in the same calendar year and to add two additional at-large members to the board to enhance diversity on the board. (Proposed by Act 2015-217)

Statewide Amendment 2

Proposing an amendment to the Constitution of Alabama of 1901, to prohibit any monies from the State Parks Fund, the Parks Revolving Fund, or any fund receiving revenues currently deposited in the State Parks Fund or the Parks Revolving Fund, and any monies currently designated under law for use by the state parks system from being transferred to any other public account, fund or entity or used for any purpose other than the support, upkeep, and maintenance of the state parks system; and to propose an amendment to Amendment 617 of the Constitution of Alabama of 1901, now appearing as Section 213.32 of the Official Recompilation of the Constitution of Alabama of 1901, as amended; to provide exceptions to the requirement that all state park system land and facilities be exclusively and solely operated and maintained by the Department of Conservation and Natural Resources. (Proposed by Act 2016-145)

Statewide Amendment 3

Proposing an amendment to the Constitution of Alabama of 1901, to revise the procedure for adoption of local constitutional amendments to provide that a proposed constitutional amendment the Legislature determines without a dissenting vote applies to only one county or a political subdivision within one or more counties shall be adopted as a valid part of the constitution by a favorable vote of a majority of the qualified electors of the affected county or the political subdivision and county or counties in which the political subdivision is located, who vote on the amendment. (Proposed by Act 2015-44)

Statewide Amendment 4

Proposing an amendment to the Constitution of Alabama of 1901, to authorize each county commission in the state to establish, subject to certain limitations, certain programs related to the administration of the affairs of the county. (Proposed by Act 2015-220)

Statewide Amendment 5

Proposing an amendment to the Constitution of Alabama of 1901, to repeal and restate the provisions of Article III of the Constitution of Alabama of 1901 relating to separation of powers to modernize the language without making any substantive change, effective January 1, 2017. (Proposed by Act 2015-200)

Statewide Amendment 6

Proposing an amendment to the Constitution of Alabama of 1901, to become operative January 1, 2017, to repeal and replace Article VII, Impeachments. (Proposed by Act 2015-199)

Statewide Amendment 7

Relating to Etowah County, proposing an amendment to the Constitution of Alabama of 1901, to provide that the employees of the Office of Sheriff of Etowah County, except for the chief deputy, chief of detention, chief of administration, chief of investigation, director of communications, and food service manager, shall be under the authority of the of the Personnel Board of the Office of the Sheriff of Etowah County. (Proposed by Act 2015-97)

Statewide Amendment 8

Proposing an amendment to the Constitution of Alabama of 1901, to declare that it is the public policy of Alabama that the right of persons to work may not be denied or abridged on account of membership or nonmembership in a labor union or labor organization; to prohibit an agreement to deny the right to work, or place conditions on prospective employment, on account of membership or nonmembership in a labor union or labor organization; to prohibit an employer from requiring its employees to abstain from union membership as a condition of employment; and to provide that an employer may not require a person, as a condition of employment or continuation of employment, to pay dues, fees, or other charges of any kind to any labor union or labor organization. (Proposed by Act 2016-86)

Statewide Amendment 9

A local constitutional amendment to the to the Constitution of Alabama of 1901; to provide that a person who is not over the age of 75 at the time of qualifying for election or at the time of his appointment may be elected or appointed to the office of Judge of Probate of Pickens County. (Proposed by Act 2016-120)

Statewide Amendment 10

An amendment to Constitution of Alabama of 1901, to provide that any territory located in Calhoun County would be subject only to the police jurisdiction and planning jurisdiction of a municipality located wholly or partially in the county. (Proposed by Act 2016-144)

Statewide Amendment 11

Proposing an amendment to the Constitution of Alabama of 1901, as amended, to permit cities and counties, notwithstanding any existing constitutional restrictions, to utilize tax increment district revenues collected within a Major 21st Century Manufacturing Zone and other moneys to incentivize the establishment and improve various types of manufacturing facilities located or to be located in such Zone, and to validate and confirm the Major 21st Century Manufacturing Zone Act, Act No. 2013-51. (Proposed by Act 2016-267)

Statewide Amendment 12

Relating to municipalities in Baldwin County; proposing an amendment to the Constitution of Alabama of 1901, to authorize the Legislature by general or local law to provide for any municipalities in the county to incorporate a toll road and bridge authority as a public corporation in the municipality for the construction and operation of toll roads and bridges in the municipality and to authorize the authority to issue revenue bonds to finance the projects. (Proposed by Act 2016-274)

Statewide Amendment 13

Proposing an amendment to the Constitution of Alabama of 1901, as amended, to repeal any existing age restriction on the appointment, election, or service of an appointed or elected official, with the exception of persons elected or appointed to a judicial office, currently imposed by a provision of the Constitution or other law; and to prohibit the Legislature from enacting any law imposing a maximum age limitation on the appointment, election, or service of an appointed or elected official. (Proposed by Act 2016-429)

Statewide Amendment 14

To propose an amendment to Amendment 448 to the Constitution of Alabama of 1901, now appearing as Section 71.01 of the Official Recompilation of the Constitution of Alabama of 1901, as amended, to ratify, approve, validate, and confirm the application of any budget isolation resolution authorizing the consideration of a bill proposing a local law adopted by the Legislature before November 8, 2016, that conformed to the rules of either body of the Legislature at the time it was adopted. (Proposed by Act 2016-430)

PROPOSED AMENDMENTS OF LOCAL APPLICATION TO APPEAR ON THE BALLOT IN ONLY THE COUNTY OF APPLICATION

Autauga County

Relating to Autauga County, proposing an amendment to Amendment 626 to the Constitution of Alabama of 1901, now appearing as Section 3, Local Amendments, Autauga County, Official Recompilation of the Constitution of Alabama of 1901, as amended, to prohibit the Sheriff of Autauga County from participating in the supernumerary program of the county and to allow the sheriff to elect to participate in the Employees' Retirement System. (Proposed by Act 2015-218)

Baldwin County Local Amendment 1

Relating to Baldwin County, proposing an amendment to the Constitution of Alabama of 1901, to allow the Mayor of Bay Minette to appoint up to two additional members to the Bay Minette Municipal Planning Commission; and to provide eligibility requirements for the two additional members. (Proposed by Act 2015-126)

Baldwin County Local Amendment 2

Relating to Baldwin County, proposing an amendment to the Constitution of Alabama of 1901, to allow mayors to participate in the Employees' Retirement System. (Proposed by Act 2015-338)

Baldwin County Local Amendment 3

Relating to Baldwin County, proposing an amendment to the Constitution of Alabama of 1901, to authorize the Legislature by general or local law to provide for the incorporation of a toll road and bridge authority as a public corporation in the county for the construction and operation of toll roads and bridges in the county and to authorize the authority to issue revenue bonds to finance the projects. (Proposed by Act 2016-270)

Baldwin County Local Amendment 4

Relating to Baldwin County; proposing an amendment to the Constitution of Alabama of 1901, authorizing any municipality in the county to allow the limited operation of golf carts on designated municipal streets or public roads subject to restrictions and civil penalties for violations. (Proposed by Act 2016-271)

Baldwin County Local Amendment 5

Relating to Baldwin County, proposing an amendment to Amendment 660 to the Constitution of Alabama of 1901, as amended by Amendment 780, to revise the term of office of a person appointed to fill a vacancy in the office of circuit or district judge in Baldwin County so that the term will correspond with the general provisions of Section 153 of the Constitution. (Proposed by Act 2016-273)

DeKalb County

Relating to DeKalb County, proposing an amendment to the Constitution of Alabama of 1901, to repeal Amendment No. 845 of the Constitution of Alabama of 1901, requiring the county commission of the county to call a special election to fill a vacancy in a county office under certain conditions. (Proposed by Act 2015-500 and Act 2015-501)

Fayette County

Relating to Fayette County, proposing an amendment to the Constitution of Alabama of 1901, to provide that certain elected public officials in Fayette County may participate in the Employees' Retirement System in lieu of participating in a supernumerary program or system. (Proposed by Act 2016-148)

Henry County

Relating to Henry County, proposing an amendment to the Constitution of Alabama of 1901, to provide that a person who is not over the age of 72 at the time of qualifying or appointment may be elected or appointed to the office of Judge of Probate of Henry County. (Proposed by Act 2015-128)

Houston County

Relating to Houston County, proposing an amendment to the Constitution of Alabama of 1901, to allow the Judge of Probate of Houston County to exercise equity jurisdiction concurrent with that of the circuit court in cases originally filed in the Probate Court of Houston County if the Judge of Probate is licensed to practice law in the State of Alabama. (Proposed by Act 2015-46)

Jefferson County

Relating to Jefferson County, proposing an amendment to the Constitution of Alabama of 1901, to specify that a tenant or tenants who receives residential garbage service from the county, a municipality, or a local governmental entity shall be solely responsible for the garbage bill. (Proposed by Act 2015-339)

Lamar County

Relating to Lamar County, proposing an amendment to the Constitution of Alabama of 1901, to provide that certain elected or appointed public officials in Lamar County may participate in the Employees' Retirement System in lieu of participating in a supernumerary program or system. (Proposed by Act 2015-26)

Lauderdale County

Relating to Lauderdale County, proposing an amendment to Amendment 819 to the Constitution of Alabama of 1901, to revise the term of office of a person appointed to fill a vacancy in the office of circuit or district judge in Lauderdale County so that the term will correspond with the general provisions of Section 153 of the Constitution. (Proposed by Act 2016-200)

Madison County

Relating to Madison County, proposing an amendment to Amendment 334 to the Constitution of Alabama of 1901, to revise the term of office of a person appointed to fill a vacancy in the office of circuit or district judge in Madison County so that the term will correspond with the general provisions of Section 153 of the Constitution. (Proposed by Act 2016-272)

Marion County

Relating to Marion County, proposing an amendment to the Constitution of Alabama of 1901, to provide for the levy and collection of an additional three mill property tax for fire protection in the county, with the proceeds to be divided equally among the paid and volunteer fire departments in the county. (Proposed by Act 2016-275)

Monroe County

Relating to Monroe County, proposing an amendment to the Constitution of Alabama of 1901, to levy a tax on tobacco products and collect and distribute the proceeds from the tax. (Proposed by Act 2015-127)

Montgomery County

Proposing an amendment to the Constitution of Alabama of 1901, to allow the Montgomery County Sheriff to participate in the Employees' Retirement System in lieu of participating in a supernumerary program. (Proposed by Act 2016-147)

Shelby County Local Amendment 1

Relating to Shelby County; proposing an amendment to the Constitution of Alabama of 1901, to provide procedures for nominations to the Governor by the Shelby County Judicial Commission to fill vacancies in the office of judge of probate. (Proposed by Act 2015-198)

Shelby County Local Amendment 2

Relating to Shelby County, proposing an amendment to Amendment 804 to the Constitution of Alabama of 1901, to revise the term of office of a person appointed to fill a vacancy in the office of circuit or district judge in the 18th Judicial Circuit so that the term will correspond with the general provisions of Section 153 of the Constitution. (Proposed by Act 2016-269)

Winston County

Relating to Winston County, proposing an amendment to the Constitution of Alabama of 1901, to grant sixteenth section and school lands located in Winston County, and held in trust by the state for education purposes in Winston County, to the Winston County Board of Education; to authorize the Winston County Board of Education to manage, sell, lease, and control those lands; and to provide for the distribution of any proceeds and interest from the sale, lease, or other disposition of the land or the sale of timber, minerals, or other natural resources generated by the land. (Proposed by Act 2015-219)

Family Sunshine Center
Montgomery Area Family Violence Program, Inc.
P.O. Box 5160 Montgomery, Alabama 36103 | 334.206.2100 | 334.206.2111 Local Crisis Line 334.263.0218 collect calls accepted www.familysunshine.org

August 15, 2016

The Honorable Elton Dean
Montgomery County Commission
P. O. Box 1667
Montgomery, AL 36103-1667

Dear Chairman Dean:

I so appreciate the opportunity provided us to meet with you on June 27, and appreciate your advice and counsel as we struggle to finance some unanticipated expenses toward the end of this fiscal year. As promised, I am communicating herein the estimate we received to mitigate the damage to our shelter and to renovate where it is essential to make the shelter whole again and safe for residents.

After requesting proposals and receiving bids, the most economical price we received is $104,000 to install our plumbing, including replacing showers and bathtubs, accomplish all remediation (including ridding shelter of toxins/contaminants), testing for successful remediation, demolition/reconstruction where necessary, and painting. Of course, as we stated during our meeting, this is not a cost we had budgeted for the current fiscal year.

We are happy to provide any additional information you might need, and would appreciate any assistance the Montgomery County Commission might provide in helping defray the above stated expenses.

Thank you so much for taking the time to meet with Marjorie Baker, Melanie Bradley and me.

Warmest regards,

Karen Sellers

Karen B. Sellers
Executive Director

11-1

CITY - COUNTY OF MONTGOMERY
PERSONNEL DEPARTMENT

27 Madison Avenue
Montgomery, Alabama 36104

BARBARA M. MONTOYA
PERSONNEL DIRECTOR
KAREN B. CASON
ASSISTANT PERSONNEL DIRECTOR
TELEPHONE: 334-241-2675
FAX: 334-241-2219

August 12, 2016

Donnie Mims
County Administrator
Montgomery County Commission
101 South Lawrence Street
Montgomery, AL 36116

Dear Donnie:

I am in receipt of your notification of the expiration of the appointment of Randy James to the Montgomery City-County Personnel Board. Randy wanted me to extend his appreciation to Commission for appointing him to serve on the Montgomery City-County Personnel Board. Due to other obligations, he will not be able to serve on the Board after the expiration of his term, effective October 1, 2016.

Benita Froemming and I are requesting that the Commission consider appointing a new board member that is an attorney. It is beneficial to the Board and the employees that we serve to have someone with a legal background.

If you need any additional information, please let me know.

Sincerely,

John F. Baker
Personnel Board Chairman

cc: Benita Froemming
Randy James

12-1

To Mr. Jiles Williams:

Have a Heart 4 Children, Inc. is a 501 c (3) federal ID number 80-0728451, organization whose mission is to provide social and educational programs to enhance the welfare of children and youth by providing resources and activities including, but not limited to: annual after school programs, holiday programs, educational programs and field trips, workshops, summer programs, athletic programs, mentoring programs and youth development programs.

We are in the final planning stages of our annual Holiday Event, which will be held at Frazier Methodist Church in Westley Hall 6000 Atlanta Hwy on December 12, 2016 . We would greatly appreciate a generous monetary donation from you to provide much needed Holiday resources to students in over 85 classes in the Montgomery county and surrounding areas. Since time is of the essence, would you please make your allocation as soon as possible that we may finalize our plans and purchase gifts for students and teachers by November 19th. .

On behalf of my board and the many special needs children that we serve, we are extending a personal invitation for you to attend this exciting Holiday event. We pray that we can count on you for your donation as we continue to meet the growing needs of our special needs children. Thank you in advance and I am very appreciative of our long and exciting partnership and your continued support.

Sincerely,

Earnestine Woods

Earnestine Woods,
Founder/Executive Director
Have a Heart 4 Children

1900 Brook Street
Montgomery, Alabama 36106

Tel: 334-561-6363

email: haveaheart4children@hotmail.com

UPCOMING BIDS/CONTRACT RENEWALS

Item	Department	Vendor	Renewal Date	Rebid Date
Preventive Maintenance	Support Service	Climate Services	September 14, 2016	September 14, 2017
Preventive Maintenance	Youth Facility	Climate Services		September 14, 2016
Oil Service & Tire Rotation	Sheriff's Office	J. Wrights		September 30, 2016
Metal Pipe	Engineering	Contech Construction		September 30, 2016
Concrete Pipe	Engineering	Hanson Pipe		September 30, 2016
Clean Saturday Trash Pickup	County Commission	Sea Coast Disposal	October 31, 2016	October 31, 2018
Commissary & Trust	Detention Facility	Keefe Commissary		October 31, 2017
Sherriff's Uniforms	Sheriff's Office	Azar's Uniforms	November 6, 2016	November 6, 2017
Leather & Accessories	Sheriff's Office	Gulf States Distributors	November 6, 2016	November 6, 2017
Food Trays	County Commission	Chappy's Deli		November 20, 2016
Landscape -Industrial Park	Engineering	Sharp Cut	November 16, 2016	November 16, 2017
Inmate Security	Detention Facility	MSF, Inc.	November 14, 2016	November 14, 2017
Emergency Medical Treatment	Sherriff's Office	Haynes Ambulance	November 30, 2016	November 30, 2017
Drug Testing Equipment	Comm. Corrections	Drug Testing Program Management, Inc.	November 1, 2016	November 1, 2018
Janitorial Services	Support Service	Fall Facility Services	November 15, 2016	November 15, 2018

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MONTGOMERY COUNTY COMMISSION
SHERIFF PROCESS FEE COLLECTION COMPARISON
OCTOBER 1, 2015 THROUGH SEPTEMBER 30, 2016

New Fee so no revenue in prior years

Month Deposited	FY 2016 Collections
OCTOBER	40,638
NOVEMBER	40,673
DECEMBER	35,655
JANUARY	40,131
FEBRUARY	39,769
MARCH	35,100
APRIL	47,475
MAY	34,074
JUNE	34,011
JULY	44,820
AUGUST	36,304
SEPTEMBER	45,981
TOTAL	474,632

Budgeted Revenue	**$1,000,000**
Budget Trend (Deficit)	**($525,368)**

MONTGOMERY COUNTY COMMISSION
TOTAL SALES TAX COLLECTION COMPARISON - New Presentation Showing No Audit Proceeds Or Refunds Paid Out
OCTOBER 1, 2015 THROUGH SEPTEMBER 30, 2016 **(Better Presentation For Comparison To City Collections)**

		FY 16 Compared to FY 15						
Month Taxes Deposited	FY 16 County Collections at 1.5%	FY 15 County Collections at 1.5%	Difference	%	FY 14 County Collections at 1.5%	FY 13 County Collections at 1.5%	FY 10 County Collections at 1.5%	FY 07 Total Collections at 1.5%
OCTOBER	$3,425,185.55	$3,372,213.86	52,972	1.57%	$3,253,940.96	$3,105,048.69	$2,899,346.96	$3,516,665.11
NOVEMBER	$3,472,817.35	$3,488,968.43	(16,151)	-0.46%	$3,227,375.17	$3,134,538.46	$2,835,012.76	$3,354,320.41
DECEMBER	$3,390,391.08	$3,406,586.61	(16,196)	-0.48%	$3,291,226.12	$3,263,054.64	$2,918,331.65	$3,315,241.33
JANUARY	$4,247,131.95	$4,107,866.90	139,265	3.39%	$3,858,396.45	$3,919,183.42	$3,697,271.38	$4,471,028.60
FEBRUARY	$3,243,886.72	$3,193,876.31	50,010	1.57%	$2,918,926.11	$3,014,487.73	$2,840,648.74	$3,379,040.47
MARCH	$3,492,052.67	$3,389,228.94	102,824	3.03%	$3,399,717.29	$3,094,307.58	$3,043,633.87	$3,331,995.45
APRIL	$3,875,222.49	$3,764,834.62	110,388	2.93%	$3,603,674.96	$3,583,428.14	$3,503,840.63	$3,856,834.56
MAY	$3,643,375.69	$3,500,145.54	143,230	4.09%	$3,305,893.80	$3,287,020.85	$3,115,779.99	$3,463,717.40
JUNE	$3,547,817.75	$3,552,517.86	(4,700)	-0.13%	$3,387,189.53	$3,317,026.31	$3,047,439.84	$3,613,341.33
JULY	$3,621,890.61	$3,553,471.64	68,419	1.93%	$3,488,643.93	$3,313,189.60	$3,121,260.19	$3,627,299.60
AUGUST	$3,470,126.08	$3,467,854.08	2,272	0.07%	$3,317,443.52	$3,152,143.53	$3,055,054.29	$3,355,083.13
SEPTEMBER		$3,431,677.74	(3,431,678)	-100.00%	$3,319,856.40	$3,295,056.53	$2,988,779.27	$3,500,110.08
Year to Date	$39,429,897.94	$38,797,564.79	632,333	1.63%	$40,372,284.24	$39,478,485.48	$37,066,399.57	$42,784,677.47

FY TOTALS $42,229,242.53

NOTES:

Note: Collections Shown Above For Current Fiscal Year 2013 And Prior Fiscal Years 2012, 2011 and 2010 Do Not Include S&U Audits Collected In FY 2013, FY2012, FY2011 Or FY 2010. Additionally, Collections Shown Above For Current FY2013 And For Prior Years FY 2012, FY2011 and FY2010 Have Not Been Decreased For S&U Refunds Issued In 2010, 2011, 2012 or 2013. This New Revised Basis Of Reporting Was Begun For The Month Ended September 2010 And For Subsequent Reporting Periods.

Note: Collections Shown Above For Prior Year September 2009 Have Also Been Revised To Reflect The Same For A True Comparison As Shown On New Report Issued For The Month Ended September 2010.

Note: Collections Shown Above For Prior Year August 2009 And For Months Prior To August 2009 Have Not Been Revised. Thus, The Collections Shown Above For August 2009 And For Months Prior To August 2009 Do Include Audits Collected And Have Not Been Decreased For S&U Refunds Issued.

Note: FY 2016 Year To Date General Fund Collections Include $24,649.17 Streamlined Sellers Use Tax (SSUT) Through August 31, 2016.

Note: Current Month August 2016 Collections Do Not Include Extraordinary Receipts Of $55,992.22 (or 60% of $93,320.36) Remitted In August 2016 By Taxpayer ID#1908.

Note: Current Month August 2016 Collections Do Not Include Extraordinary Receipts Of $24,269.80 (or 60% of $40,449.66) Remitted In August 2016 By Taxpayer ID#47335.

Note: Current Month August 2016 Collections Do Not Include Extraordinary Receipts Of $14,705.54 (or 60% of $24,509.24) Remitted In August 2016 By Taxpayer ID#2191.

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MONTGOMERY COUNTY COMMISSION
TOTAL SALES TAX COLLECTION COMPARISON - Same Presentation as the Past
OCTOBER 1, 2015 THROUGH SEPTEMBER 30, 2016

		FY 16 Compared to FY 15						
Month Taxes Deposited	FY 16 County Collections at 1.5%	FY 15 County Collections at 1.5%	Difference	%	FY 14 County Collections at 1.5%	FY 13 County Collections at 1.5%	FY 10 County Collections at 1.5%	FY 07 Total Collections at 1.5%
OCTOBER	$3,454,774.02	$3,394,359.13	60,415	1.78%	$3,280,219.93	$3,142,293.68	$2,939,534.46	$3,516,665.11
NOVEMBER	$3,487,541.79	$3,624,138.56	(136,597)	-3.77%	$3,360,233.90	$3,189,307.86	$2,850,712.59	$3,354,320.41
DECEMBER	$3,428,684.54	$3,450,114.82	(21,430)	-0.62%	$3,302,563.59	$3,272,129.39	$2,863,389.45	$3,315,241.33
JANUARY	$4,271,023.33	$4,148,886.31	122,137	2.94%	$3,866,244.98	$3,931,474.14	$3,707,672.59	$4,471,028.60
FEBRUARY	$3,299,077.27	$3,210,816.61	88,261	2.75%	$2,939,651.95	$3,049,192.57	$2,848,671.98	$3,379,040.47
MARCH	$3,533,309.84	$3,399,389.82	133,920	3.94%	$3,426,651.88	$3,131,421.86	$3,061,962.18	$3,331,995.45
APRIL	$3,912,863.95	$3,864,957.27	47,907	1.24%	$3,823,236.56	$3,599,524.70	$3,529,396.01	$3,856,834.56
MAY	$3,672,532.46	$3,610,671.96	61,861	1.71%	$3,325,763.15	$3,299,131.70	$3,146,504.02	$3,463,717.40
JUNE	$3,578,988.60	$3,589,684.79	(10,696)	-0.30%	$3,410,641.51	$3,346,454.43	$3,098,242.43	$3,613,341.33
JULY	$3,815,430.38	$3,790,269.37	25,161	0.66%	$3,628,315.87	$3,349,663.44	$3,171,968.28	$3,627,299.60
AUGUST	$3,577,400.69	$3,482,711.20	94,689	2.72%	$3,419,724.55	$3,153,053.75	$2,942,105.45	$3,355,083.13
SEPTEMBER		$3,460,884.04	(3,460,884)	-100.00%	$3,444,583.38	$3,292,477.17	$3,028,207.58	$3,500,110.08
Year to Date	$40,031,626.87	$39,565,999.84	465,627	1.18%	$41,227,831.25	$39,756,124.69	$37,188,367.02	$42,784,677.47
FY TOTALS		$43,026,883.88						

NOTES:

Note: FY 2016 Year To Date General Fund Collections Include $24,649.17 Streamlined Sellers Use Tax (SSUT) Through August 31, 2016.

Note: Current Month August 2016 Collections Include Extraordinary Receipts Of $55,992.22 (or 60% of $93,320.36) Remitted In August 2016 By Taxpayer ID#1908.

Note: Current Month August 2016 Collections Include Extraordinary Receipts Of $24,269.80 (or 60% of $40,449.66) Remitted In August 2016 By Taxpayer ID#47335.

Note: Current Month August 2016 Collections Include Extraordinary Receipts Of $14,705.54 (or 60% of $24,509.24) Remitted In August 2016 By Taxpayer ID#2191.

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MONTGOMERY COUNTY COMMISSION

MONTGOMERY COUNTY SCHOOL BOARD SALES TAX COLLECTION COMPARISON - New Presentation Showing No Audit Proceeds Or Refunds Paid Out

OCTOBER 1, 2015 THROUGH SEPTEMBER 30, 2016 (Better Presentation For Comparison To City Collections)

			FY 16 Compared to FY 15					
Month Taxes Deposited	FY 16 County Collections at 1.0%	FY 15 County Collections at 1.0%	Difference	%	FY 14 County Collections at 1.0%	FY 13 County Collections at 1.0%	FY 10 Total Collections at 1.0%	FY 07 Total Collections at 1.0%
OCTOBER	$2,266,642.57	$2,225,694.19	40,948	1.84%	$2,140,563.20	$2,035,268.61	$1,893,218.08	$2,336,878.89
NOVEMBER	$2,308,685.19	$2,307,237.48	1,448	0.06%	$2,123,088.19	$2,050,214.94	$1,855,446.45	$2,241,537.84
DECEMBER	$2,236,706.66	$2,256,396.51	(19,690)	-0.87%	$2,169,555.98	$2,156,268.11	$1,906,191.19	$2,174,549.44
JANUARY	$2,821,172.62	$2,711,194.29	109,978	4.06%	$2,559,366.17	$2,608,733.79	$2,426,650.42	$2,967,724.05
FEBRUARY	$2,144,517.71	$2,094,244.71	50,273	2.40%	$1,944,321.08	$1,968,248.59	$1,852,039.84	$2,253,143.01
MARCH	$2,301,627.89	$2,225,802.98	75,825	3.41%	$2,243,986.50	$2,022,402.12	$1,987,878.13	$2,203,462.52
APRIL	$2,551,583.97	$2,480,564.76	71,019	2.86%	$2,377,920.10	$2,349,908.28	$2,295,451.42	$2,552,776.74
MAY	$2,396,336.01	$2,304,330.43	92,006	3.99%	$2,216,594.87	$2,151,387.07	$2,035,714.92	$2,290,604.35
JUNE	$2,338,747.23	$2,338,958.13	(211)	-0.01%	$2,243,196.38	$2,170,841.10	$1,989,820.56	$2,391,375.92
JULY	$2,372,404.92	$2,340,193.39	32,212	1.38%	$2,309,266.99	$2,170,477.57	$2,043,667.02	$2,413,981.16
AUGUST	$2,279,205.95	$2,280,174.47	(969)	-0.04%	$2,192,463.54	$2,131,173.21	$1,996,633.51	$2,231,903.25
SEPTEMBER		$2,260,947.17	(2,260,947)	-100.00%	$2,187,947.94	$2,183,146.41	$1,953,355.70	$2,342,155.12
Year to Date	$26,017,630.72	$25,564,791.34	452,839	1.77%	$26,708,270.94	$25,998,069.80	$24,236,067.24	$28,400,092.29

FY TOTALS $27,825,738.51

NOTES:

Note: Collections Shown Above For Current Fiscal Year 2013 And Prior Fiscal Years 2012, 2011 and 2010 Do Not Include S&U Audits Collected In FY2012, FY2011 Or FY 2010. Additionally, Collections Shown Above For Current FY2013 And For Prior Years FY2012, FY2011 and FY2010 Have Not Been Decreased For S&U Refunds Issued In 2010, 2011 or 2012. This New Revised Basis Of Reporting Was Begun For The Month Ended September 2010 And For Subsequent Reporting Periods.

Note: Collections Shown Above For Prior Year September 2009 Have Also Been Revised To Reflect The Same For A True Comparison As Shown On New Report Issued For The Month Ended September 2010.

Note: Collections Shown Above For Prior Year August 2009 And For Months Prior To August 2009 Have Not Been Revised. Thus, The Collections Shown Above For August 2009 And For Months Prior To August 2009 Do Include Audits Collected And Have Not Been Decreased For S&U Refunds Issued.

Note: Current Month August 2016 Collections Do Not Include Streamlined Sellers Use Tax (SSUT). FY 16 Year To Date Collections Total Above Does Include $2,267.50 For SSUT Collections To Date Through August 31, 2016 For 40% Of SSUT Collections Receipted In FY 16 Through May 31, 2016.

Note: Current Month August 2016 Collections Do Not Include Extraordinary Receipts Of $37,328.14 (or 40% of $93,320.36) Remitted In August 2016 By Taxpayer ID#1908.

Note: Current Month August 2016 Collections Do Not Include Extraordinary Receipts Of $16,179.86 (or 40% of $40,449.66) Remitted In August 2016 By Taxpayer ID#47335.

Note: Current Month August 2016 Collections Do Not Include Extraordinary Receipts Of $9,803.70 (or 40% of $24,509.24) Remitted In August 2016 By Taxpayer ID#2191.

6.3

MONTGOMERY COUNTY COMMISSION
MONTGOMERY COUNTY SCHOOL BOARD SALES TAX COLLECTION COMPARISON - Same Presentation as the Past
OCTOBER 1, 2015 THROUGH SEPTEMBER 30, 2016

		FY 16 Compared to FY 15						
Month Taxes Deposited	FY 16 County Collections at 1.0%	FY 15 County Collections at 1.0%	Difference	%	FY 14 County Collections at 1.0%	FY 13 County Collections at 1.0%	FY 10 Total Collections at 1.0%	FY 07 Total Collections at 1.0%
OCTOBER	$2,286,368.22	$2,239,274.92	47,093	2.10%	$2,158,082.51	$2,059,868.92	$1,920,009.74	$2,336,878.89
NOVEMBER	$2,316,642.62	$2,397,350.91	(80,708)	-3.37%	$2,211,660.67	$2,073,083.78	$1,865,913.01	$2,241,537.84
DECEMBER	$2,261,187.29	$2,285,415.32	(24,228)	-1.06%	$2,175,889.07	$2,161,032.89	$1,869,563.07	$2,174,549.44
JANUARY	$2,837,072.94	$2,738,514.41	98,559	3.60%	$2,563,030.73	$2,616,927.60	$2,433,584.56	$2,967,724.05
FEBRUARY	$2,181,311.40	$2,105,538.24	75,773	3.60%	$1,930,503.86	$1,991,385.15	$1,857,388.66	$2,253,143.01
MARCH	$2,322,353.10	$2,245,000.21	77,353	3.45%	$2,261,069.69	$2,074,146.97	$2,000,097.00	$2,203,462.52
APRIL	$2,576,678.28	$2,547,313.19	29,365	1.15%	$2,524,294.50	$2,360,555.16	$2,312,488.34	$2,552,776.74
MAY	$2,413,850.78	$2,378,014.71	35,836	1.51%	$2,229,841.11	$2,159,460.97	$2,056,197.60	$2,290,604.35
JUNE	$2,359,527.79	$2,363,736.09	(4,208)	-0.18%	$2,233,171.70	$2,183,872.05	$2,032,869.37	$2,391,375.92
JULY	$2,527,504.00	$2,498,058.55	29,445	1.18%	$2,402,381.61	$2,194,793.45	$2,095,198.37	$2,413,981.16
AUGUST	$2,350,722.35	$2,290,079.21	60,643	2.65%	$2,260,650.90	$2,131,451.32	$1,921,334.27	$2,231,903.25
SEPTEMBER		$2,283,189.10	(2,283,189)	-100.00%	$2,271,099.25	$2,178,821.22	$1,979,641.24	$2,342,155.12
Year to Date	$26,433,218.77	$26,088,295.76	344,923	1.32%	$27,221,675.60	$26,185,399.48	$24,344,285.23	$28,400,092.29

FY TOTALS $28,371,484.86

NOTES:

Note: Current Month August 2016 Collections Do Not Include Streamlined Sellers Use Tax (SSUT). FY 16 Year To Date Collections Total Above Does Include $2,267.50 For SSUT Collections To Date Through August 31, 2016 For 40% Of SSUT Collections Receipted In FY 16 Through May 31, 2016.

Note: Current Month August 2016 Collections Include Extraordinary Receipts Of $37,328.14 (or 40% of $93,320.36) Remitted In August 2016 By Taxpayer ID#1908.

Note: Current Month August 2016 Collections Include Extraordinary Receipts Of $16,179.86 (or 40% of $40,449.66) Remitted In August 2016 By Taxpayer ID#47335.

Note: Current Month August 2016 Collections Include Extraordinary Receipts Of $9,803.70 (or 40% of $24,509.24) Remitted In August 2016 By Taxpayer ID#2191.

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MONTGOMERY COUNTY COMMISSION
TOTAL LODGING TAX COLLECTION COMPARISON
OCTOBER 1, 2015 THROUGH SEPTEMBER 30, 2016

Month Taxes Deposited	FY 16 County Collections (Net of Audits)	FY 15 County Collections (Net of Audits)	Difference	FY 16% of FY 15	FY 14 County Collections (Net of Audits)	FY 13 County Collections (Net of Audits)	FY 12 County Collections (Net of Audits)	FY 11 County Collections (Net of Audits)	FY 10 County Collections (Net of Audits)	FY 09 County Collections (Net of Audits)	FY 08 County Collections (Net of Audits)	FY 07 County Collections
OCTOBER	$210,404.70	$202,931.97	$7,472.73	3.68%	$125,810.01	$130,518.53	$129,788.39	$90,450.70	$76,167.78	$90,394.00	$85,389.00	$96,766.68
NOVEMBER	$228,350.62	$203,853.15	$24,497.47	12.02%	$134,418.39	$129,403.01	$136,865.64	$97,820.73	$83,493.00	$91,018.26	$82,912.00	$89,391.10
DECEMBER	$202,331.12	$198,304.69	$4,026.43	2.03%	$131,612.41	$122,045.52	$135,043.41	$73,352.85	$75,264.67	$78,616.00	$70,910.00	$81,974.31
JANUARY	$198,176.50	$189,614.07	$8,562.43	4.52%	$175,562.73	$119,034.95	$116,960.65	$117,494.72	$77,080.62	$63,846.00	$74,508.00	$71,218.23
FEBRUARY	$195,375.25	$185,372.85	$10,002.40	5.40%	$173,369.88	$110,354.05	$112,071.38	$110,488.53	$79,625.91	$65,773.76	$69,418.38	$72,734.13
MARCH	$221,142.25	$203,648.13	$17,494.12	8.59%	$202,573.31	$120,791.98	$140,556.61	$133,350.07	$91,658.00	$89,980.66	$104,324.00	$79,463.09
APRIL	$251,651.72	$241,254.42	$10,397.30	4.31%	$223,538.94	$154,554.57	$155,696.79	$143,432.70	$97,434.00	$89,419.80	$98,280.44	$91,745.00
MAY	$252,495.43	$216,027.19	$36,468.24	16.88%	$203,301.77	$138,910.11	$132,858.15	$135,834.83	$90,676.00	$83,291.00	$94,118.00	$103,146.70
JUNE	$246,726.91	$241,147.97	$5,578.94	2.31%	$226,716.73	$143,536.96	$138,452.50	$133,739.74	$86,555.65	$90,215.00	$88,706.00	$80,069.00
JULY	$245,468.51	$242,538.42	$2,930.09	1.21%	$238,103.50	$147,306.61	$146,942.79	$145,371.25	$96,492.84	$87,515.78	$101,972.09	$91,751.00
AUGUST	$239,377.56	$238,712.00	$665.56	0.28%	$238,386.25	$146,925.48	$146,822.89	$147,058.66	$96,310.00	$94,001.00	$92,973.52	$89,222.00
SEPTEMBER		$214,232.48	-$214,232.48	-100.00%	$203,577.01	$137,316.54	$139,758.00	$142,709.12	$87,044.00	$86,034.26	$95,529.98	$87,431.00
Year to Date	$2,491,500.57	$2,363,404.86	$128,095.71	5.42%	$2,276,970.93	$1,600,698.31	$1,631,817.20	$1,471,103.90	$1,037,802.47	$1,010,105.52	$1,059,041.41	$1,034,912.24

FY TOTALS $2,577,637.34

NOTES:

Lodging Rate Changed Effective December 1, 2013. Rate Increased From $1.50 To $2.25 Per Room Rented/Furnished. Lodging Rate Was $1.50 Per Room Rented/Furnished From December 1, 2010 Through November 30, 2013. Initial Lodging Rate Was $1.00 Per Room Rented/Furnished From April 1, 2006 Through November 30, 2010.

Lodging Taxes Are Reported And Collected In Arrears; Thus The First Reporting/Collection Period For The New $2.25 Loding Rate Started In January 2014 For The December 2013 Tax Period.

No Lodging Tax Return Reported Or Remitted In August 2016 For Period 7-2016 By Taxpayer ID#00048023. Taxpayer Has Been Contacted As Of 8/31/2016 .

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MONTGOMERY COUNTY COMMISSION
TOTAL MOTOR FUEL / GASOLINE TAX COLLECTION COMPARISON
OCTOBER 1, 2015 THROUGH SEPTEMBER 30, 2016

Month Taxes Deposited	FY 16 County Collections	FY 15 County Collections	Difference	FY 16 % of FY 15	FY 14 County Collections	FY 13 County Collections	FY 12 County Collections	FY 11 County Collections	FY 10 County Collections	FY 09 County Collections	FY 08 County Collections	FY 07 County Collections
OCTOBER	$132,886.21	$127,603.30	$5,282.91	4.14%	$115,849.14	$117,747.11	$122,397.70	$129,485.41	$128,602.75	$122,819.40	$131,431.18	$147,134.81
NOVEMBER	$137,399.54	$133,268.71	$4,130.83	3.10%	$144,887.33	$128,927.51	$126,138.43	$131,821.66	$131,109.74	$140,959.08	$139,649.82	$149,345.81
DECEMBER	$126,037.20	$122,059.10	$3,978.10	3.26%	$119,369.29	$119,209.28	$123,734.46	$122,993.67	$121,824.96	$126,525.74	$130,576.82	$142,001.39
JANUARY	$134,503.41	$134,158.69	$344.72	0.26%	$124,428.93	$119,438.35	$123,368.06	$132,469.50	$134,624.20	$133,168.99	$132,710.13	$137,632.24
FEBRUARY	$118,284.06	$133,657.15	-$15,373.09	-11.50%	$116,262.54	$120,575.79	$116,317.80	$117,843.96	$124,816.72	$124,744.47	$122,467.49	$128,594.64
MARCH	$136,621.09	$124,054.65	$12,566.44	10.13%	$113,158.87	$116,366.70	$118,944.86	$119,740.83	$122,760.76	$122,181.42	$127,836.30	$129,748.15
APRIL	$139,243.86	$138,516.44	$727.42	0.53%	$129,165.59	$132,760.62	$125,195.99	$133,872.83	$140,254.46	$131,464.61	$143,992.83	$121,070.37
MAY	$135,716.55	$139,860.22	-$4,143.67	-2.96%	$127,462.01	$128,976.82	$127,146.28	$128,147.03	$139,372.47	$134,069.49	$134,662.63	$130,277.77
JUNE	$141,152.25	$138,102.44	$3,049.81	2.21%	$132,708.57	$135,036.74	$133,057.98	$131,383.85	$138,630.67	$130,919.07	$150,668.15	$142,064.46
JULY	$136,208.59	$141,991.34	-$5,782.75	-4.07%	$128,657.59	$136,899.14	$129,894.40	$130,793.70	$137,671.94	$135,859.21	$133,863.13	$136,886.87
AUGUST	$140,874.49	$142,936.80	-$2,062.31	-1.44%	$137,914.11	$134,598.24	$132,248.94	$127,265.33	$130,748.17	$126,087.38	$137,111.09	$138,154.02
SEPTEMBER		$137,629.68	-$137,629.68	-100.00%	$134,963.91	$131,991.94	$136,543.09	$137,599.99	$135,878.23	$140,923.91	$137,251.76	$109,066.03
Year to Date	$1,478,927.25	$1,476,208.84	$2,718.41	0.18%	$1,524,827.88	$1,522,528.24	$1,514,987.99	$1,543,417.76	$1,586,295.07	$1,569,722.77	$1,622,221.33	$1,611,976.56

FY Totals $1,613,838.52

16-9

MAC SIM BUTLER DETENTION FACILITY
225 SOUTH MCDONOUGH STREET
MONTGOMERY, AL 36104

Statistical Report for August 2016

Federal Prisoners Received	34
Federal Prisoner Carryovers from Previous Month	59
Total Federal Inmate Days	1741
**********	
State Inmates Received	381
State Inmate Carryovers from Previous Month	477
Total State Inmates in Facility this Month	858
Total Carryovers to Next Month	353
Total State Inmate Days	15,198
**********	
Total Inmates (State and Federal Combined)	951
Total Inmate Days (State and Federal Combined)	16,939
Average Daily Population	605
**********	
Total Days Billed to the State	15,198
Amount Charged to the State	$ 26,596.50
Sheriff's Allowance	$ 348.75
Total Charged to the State	$ 26,945.25
**********	
Total Spent for Food this Month	$35,748.93
Amount Over Allowance	$35,400.18
Amount Under Allowance	--
Average Cost for Food per Inmate Day	$2.35

17-1

MONTGOMERY COUNTY MAC SIM BUTLER DETENTION FACILITY
225 SOUTH MCDONOUGH STREET
MONTGOMERY, AL 36104

August 2016 Monthly Jail Report -- State Inmates

Number of Inmates Brought Over from Previous Month:

O/M	6	1.02%
W/M	84	16.33%
B/M	349	68.37%
W/F	12	6.12%
B/F	25	8.16%
O/F	1	0.00%
Total	477	100.00%

Number of Inmates Received During the Month:

O/M	1	0.26%
W/M	56	14.70%
B/M	252	66.14%
W/F	22	5.77%
B/F	50	13.12%
O/F	0	0.00%
Total	381	100.00%

Total Number of Inmates in Jail During the Month:

O/M	7	0.82%
W/M	140	16.32%
B/M	601	70.05%
W/F	34	3.96%
B/F	75	8.74%
O/F	1	0.12%
Total	858	100.00%

Number of Inmates Released or Removed During the Month:

O/M	1	0.20%
W/M	85	16.83%
B/M	344	68.12%
W/F	21	4.16%
B/F	53	10.50%
O/F	1	0.20%
Total	505	100.00%

Number of Inmates Carried Over at the Close of the Month:

O/M	6	1.70%
W/M	55	15.58%
B/M	257	72.80%
W/F	13	3.68%
B/F	22	6.23%
O/F	0	0.00%
Total	353	100.00%

17-2

MONTGOMERY COUNTY MAC SIM BUTLER DETENTION FACILITY
225 SOUTH MCDONOUGH STREET
MONTGOMERY, AL 36104

August 2016 Monthly Jail Report -- Federal Inmates

Number of Inmates Brought Over from Previous Month:

O/M	5
W/M	14
B/M	30
W/F	2
B/F	6
O/F	2
Total	59

Number of Inmates Received During the Month:

O/M	3
W/M	9
B/M	18
W/F	3
B/F	1
O/F	0
Total	34

Number of Inmates in Jail During the Month:

O/M	8
W/M	23
B/M	48
W/F	5
B/F	7
O/F	2
Total	93

Number of Inmates Released or Removed During the Month:

O/M	0
W/M	4
B/M	16
W/F	1
B/F	3
O/F	0
Total	24

Number of Inmates Carried Over at the Close of the Month:

O/M	8
W/M	19
B/M	32
W/F	4
B/F	4
O/F	2
Total	69

17-3

Standard Form 1034
Revised October 1987
Department of the Treasury
I TFM 4-2000

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

VOUCHER NO
Invoice #08-2016

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION
U.S. Marshals Service
One Church Street, Suite A-100
Montgomery, AL 36104
Attn: Debi Brewer (334) 223-3101

DATE VOUCHER PREPARED
09/01/2016

CONTRACT NUMBER AND DATE

REQUISITION NUMBER AND DATE

SCHEDULE NO

PAID BY
USMS M/AL
Montgomery

PAYEE'S NAME AND ADDRESS
Montgomery County Jail (4AP)
225 South McDonough Street
Montgomery, AL 36106
(334) 832-1665 (Corlis Miles)
Fax: (334) 265-0990 corlismiles@mc-ala.org

TAX ID# 63-6001653 H02
DUNS # 099839086
IGA # 02-11-0009

DATE INVOICE RECEIVED

DISCOUNT TERMS

PAYEE'S ACCOUNT NUMBER

SHIPPED FROM | TO | WEIGHT

GOVERNMENT B/L NUMBER

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUANTITY	UNIT PRICE COST	UNIT PRICE PER	AMOUNT
August Jail Bill 08/01/2016 to 08/31/2016	08/31/2016	Housing of Federal Inmates Montgomery County Jail (See Attached List) Submitted by: IGA # 02-11-0009 COR:_____ PH-4AP-D02- -HSG-	1741	48	Day	83,568.00
					TOTAL	83,568.00

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)**

PAYMENT
- ☐ PROVISIONAL
- ☐ COMPLETE
- ☐ PARTIAL
- ☐ FINAL
- ☐ PROGRESS
- ☐ ADVANCE

APPROVED FOR =$

EXCHANGE RATE =$1.00

BY [2]

TITLE

DIFFERENCES

Amount verified; correct for payment

(Signature or initials)

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

(Date) (Authorized Certifying Officer) [2] (Title)

ACCOUNTING CLASSIFICATION

SOC:25801 1561020XD H52 D02 HDH5000D

PAID BY

CHECK NUMBER ON ACCOUNT OF U.S. TREASURY

CASH $

DATE

CHECK NUMBER ON (Name of bank)

PAYEE [3]

1. When stated in foreign currency, insert name of currency.
2. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.
3. When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example, "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.

PER

TITLE

Previous edition usable

NSN 7540-00-900-2234

PRIVACY ACT STATEMENT

The information requested on this form is required under the provisions of 31 U.S.C. 82b and 82c, for the purpose of disbursing Federal money. The information requested is to identify the particular creditor and the amounts to be paid. Failure to furnish this information will hinder discharge of the payment obligation.

17-4

Standard Form 1034
Revised October 1987
Department of the Treasury
TFRM 4-2000

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

VOUCHER NO.: Invoice #08-2016

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION:
U.S. Marshals Service
One Church Street, Suite A-100
Montgomery, AL 36104
Attn: Debi Brewer (334) 223-3101

DATE VOUCHER PREPARED: 09/01/2016

CONTRACT NUMBER AND DATE:

REQUISITION NUMBER AND DATE:

SCHEDULE NO.:

PAID BY: USMS M/AL Montgomery

PAYEE'S NAME AND ADDRESS:
Montgomery County Jail (4AP)
225 South McDonough Street
Montgomery, AL 36106
(334) 832-1665 (Corlis Miles)
Fax: (334) 265-0990 corlismiles@mc-ala.org
TAX ID# 63-6001653 H02
DUNS # 099839086
IGA # 02-11-0009

DATE INVOICE RECEIVED:

DISCOUNT TERMS:

PAYEE'S ACCOUNT NUMBER:

SHIPPED FROM: TO: WEIGHT:

GOVERNMENT B/L NUMBER:

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUANTITY	UNIT PRICE COST	UNIT PRICE PER	AMOUNT (1)
August Jail Bill 8/01/2016 to 8/31/2016	08/31/2016	Non-Medical Transport of Federal Inmates	1432	0.54	Mile	773.28
		Montgomery County Jail (See Attached List)	1	0.54		0.32
		Submitted by: [signature] IGA # 02-11-0009				
		COR: _____				
		PT-4AP-D02- -TRP-				

(Use continuation sheet(s) if necessary)

(Payee must NOT use the space below) TOTAL 773.60

PAYMENT
- ☐ PROVISIONAL
- ☐ COMPLETE
- ☐ PARTIAL
- ☐ FINAL
- ☐ PROGRESS
- ☐ ADVANCE

APPROVED FOR =$

EXCHANGE RATE =$1.00

DIFFERENCES

BY [2]

TITLE

Amount verified; correct for payment

(Signature or initials)

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

(Date) (Authorized Certifying Officer) [2] (Title)

ACCOUNTING CLASSIFICATION

SOC:25302/2292 1561020XD H52 D02 HDT5001D

PAID BY

CHECK NUMBER ON ACCOUNT OF U.S. TREASURY

CASH $ DATE

CHECK NUMBER ON (Name of bank)

PAYEE [3]

1. When stated in foreign currency, insert name of currency.
2. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.
3. When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.

PER

TITLE

Previous edition usable

NSN 7540-00-900-2234

PRIVACY ACT STATEMENT

The information requested on this form is required under the provisions of 31 U.S.C. 82b and 82c for the purpose of disbursing Federal money. The information requested is to identify the particular creditor and the amounts to be paid. Failure to furnish this information will hinder discharge of the payment obligation.

17-5

DFC "A" - SHERIFF'S FEED BILL

THE STATE OF ALABAMA,

Vendor Number 03600165305

Payable to MCC & Derrick Cunningham Sheriff of Montgomery County.

For feeding prisoners in the jail of said county during the month of August (Month), 2016 (Year)

Date	Total # In Jail	Insane	Juvenile	Federal	Other	# In Jail State	Per Capita	Sheriff's Allowance
1	487					487	$ 852.25	$ 11.25
2	486					486	$ 850.50	$ 11.25
3	489					489	$ 855.75	$ 11.25
4	490					490	$ 857.50	$ 11.25
5	487					487	$ 852.25	$ 11.25
6	484					484	$ 847.00	$ 11.25
7	484					484	$ 847.00	$ 11.25
8	490					490	$ 857.50	$ 11.25
9	486					486	$ 850.50	$ 11.25
10	489					489	$ 855.75	$ 11.25
11	483					483	$ 845.25	$ 11.25
12	470					470	$ 822.50	$ 11.25
13	472					472	$ 826.00	$ 11.25
14	473					473	$ 827.75	$ 11.25
15	485					485	$ 848.75	$ 11.25
16	486					486	$ 850.50	$ 11.25
17	500					500	$ 875.00	$ 11.25
18	499					499	$ 873.25	$ 11.25
19	482					482	$ 843.50	$ 11.25
20	492					492	$ 861.00	$ 11.25
21	492					492	$ 861.00	$ 11.25
22	497					497	$ 869.75	$ 11.25
23	499					499	$ 873.25	$ 11.25
24	501					501	$ 876.75	$ 11.25
25	499					499	$ 873.25	$ 11.25
26	504					504	$ 882.00	$ 11.25
27	503					503	$ 880.25	$ 11.25
28	502					502	$ 878.50	$ 11.25
29	495					495	$ 866.25	$ 11.25
30	492					492	$ 861.00	$ 11.25
31	500					500	$ 875.00	$ 11.25
Total	15198	0	0	0	0	15198	$ 26,596.50	$ 348.75

Amount Chargeable to the State (0900-14) $ 26,596.50

SSN: _____ Sheriff's Allowance (0900-31) $ 348.75

Total Amount $ 26,945.25

Affadavit of the Sheriff before Notary Public

The State of Alabama Montgomery County

Before me Marilyn M. Crenshaw Notary Public, personally appeared

MCC & Derrick Cunningham Sheriff of said County, who being by me sworn,

makes oath that the within account for 26945.25 Dollars is correct and that no part here of has been paid.

Sheriff Signature

Sworn to and subscribe before me this 6th day of September, 2016

Marilyn M. Crenshaw

Notary Public Signature

17-6

DYS MONTHLY POPULATION REPORT

Licensed Facilities

AUGUST 2016

Facility Name: Montgomery County Youth Facility

Address: 1111 Air Base Boulevard Montgomery, Alabama

Movement of Population	Number of Youth						
	W/M	B/M	W/F	B/F	O/M	O/F	TOTAL
1 **Under Care on First Day of Month** (Item 5 of Previous Month)	3	33	0	3	0	0	39
2 **Number Admitted During the Month**	1	15	1	2	0	0	19
3 **Total During the Month** (Sum of Items 1 & 2)	4	48	1	5	0	0	58
4 **Number Discharged during the Month**	3	13	1	1	0	0	18
5 **Under Care on Last Day of Month** (Item 3 Minus Item 4)	1	35	0	4	0	0	40

6 **Average Number of Juveniles per Day** 35.64

15 out-of-county youth were served

GWEN HINSON

Signature of Person Completing Report

Signature of Agency Executive

Revised 2/7/06