

9:57 AM  
 05/28/16  
 Accrual Basis

Tony Rice Center Inc.  
**Profit & Loss Budget Overview**  
 July 2015 through June 2016

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	Jul '15 - Jun 16
<b>Income</b>	
4001 · Corporate Contributions	3,000.00
4003 · Agencies, Churches, Foundations	6,550.00
4100 · State of Tenn.	460,400.00
4100-A · ADAT	6,000.00
4100-C · BOPP	155,000.00
4101-1 · Fundraiser-Horseshow	10,000.00
4102 · DUI School / Classes and DRI-II	57,000.00
4107 · Food Stamps Received	43,500.00
4108 · Fees & Rents from Clients	94,400.00
4110 · Misc. Income	13,200.00
4111 · Interest Income	224.00
4112 · Vending Machine Income	10,200.00
<b>Total Income</b>	<b>859,474.00</b>
<b>Expense</b>	
5000 · Salaries & Wages	430,580.00
5002 · Payroll Taxes-FICA & Medicare	33,000.00
5003 · Payroll Taxes- SUTA	1,100.00
5004 · Health Insurance- Group	1,254.00
5005 · Workmen's Comp. Ins.	10,500.00
5006 · Property/Fire & Theft Ins.	15,600.00
5007 · Vehicle Ins.	5,820.00
5008 · General Liability Ins.	4,920.00
5009 · Directors & Officer Insurance	1,500.00
5010 · Food/Groceries	84,000.00
5011 · Depreciation Expense	66,000.00
5012 · Dues/Subscriptions	480.00
5013 · Interest Expense-Land & Bldg.	12,600.00
5013-1 · Interest Expense-U.S.D.A.	1,800.00
5014-1 · Professional Fees-Audit	6,500.00
5014-2 · Professional Fees-Other	11,000.00
5015 · Repair and Maintenance	32,000.00
5016-1 · Supplies-Literature	1,000.00
5016-2 · Supplies-Office	5,800.00
5016-3 · Supplies-Other	16,800.00
5016-4 · Supplies-Postage	1,400.00
5016-5 · Supplies-DUI Lit. & Materials	7,800.00
5017 · Telephone & Communications	7,440.00
5018 · Utilities-Gas	7,800.00
5018-1 · Utilities-Power, Water, & Sewer	52,800.00
5018-2 · Utilities-Cable	1,800.00
5020 · Staff Training	3,600.00
5021 · Travel Expense	2,100.00
5022 · Misc.	2,400.00
5023 · Licenses, Fees, Bonds	6,600.00
5024 · Vehicle Exp.-gas,rep.,tags, etc	16,800.00
5026 · Fundraising Exp.-Horseshow	5,000.00
5031 · Medical Test for Clients/Staff	480.00
5032 · Advertising	1,200.00
<b>Total Expense</b>	<b>859,474.00</b>
<b>Net Income</b>	<b>0.00</b>

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DEC 1 9 50

UNITED STATES DEPARTMENT OF THE ARMY  
HEADQUARTERS, ARMY AIR FORCE  
WASHINGTON, D. C.

FORM NO. 1  
1 FEBRUARY 1949

1. Name of the person or organization to whom the report is made	1. Name of the person or organization to whom the report is made
2. Name of the person or organization making the report	2. Name of the person or organization making the report
3. Title of the report	3. Title of the report
4. Date of the report	4. Date of the report
5. Place of the report	5. Place of the report
6. Nature of the report	6. Nature of the report
7. Summary of the report	7. Summary of the report
8. Details of the report	8. Details of the report
9. Remarks	9. Remarks
10. Signature of the person or organization making the report	10. Signature of the person or organization making the report
11. Name of the person or organization making the report	11. Name of the person or organization making the report
12. Address of the person or organization making the report	12. Address of the person or organization making the report
13. City of the person or organization making the report	13. City of the person or organization making the report
14. State of the person or organization making the report	14. State of the person or organization making the report
15. Zip Code of the person or organization making the report	15. Zip Code of the person or organization making the report
16. Name of the person or organization receiving the report	16. Name of the person or organization receiving the report
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