



Capital Court Authority

Lexington-Fayette Urban County Government

Proposal for RFP #20-2021

**Drug Testing Services for Participants
in Electronic Monitoring, Work
Release, and Probation Programs**

**Submitted via Ion Wave:
Kyle Thompson
Director of Operations
Capital Court Authority, LLC
July 28, 2021**

Supplier Information

Company Name: Capital Court Authority, LLC

Contact Name: Kyle Thompson

Address: 100 E. Main St.
Frankfort, KY 40601

Phone: (502) 352-2550

Fax: (502) 352-2552

Email: cca.kyle@gmail.com

Supplier Notes

ONLY ONLINE BIDS WILL BE ACCEPTED! By submitting your response, you certify that you are authorized to represent and bind your company and that you agree to all bid terms and conditions as stated in the attached bid/RFP/RFQ/Quote/Auction documents.

Kyle T. Thompson
Print Name


Signature

SCOPE OF WORK:

Capital Court Authority, LLC can provide for all of the drug testing needs of the Lexington-Fayette Urban County Government for participants in Electronic Monitoring, Work Release, and Probation Programs with our numerous vendors that we have built relationships with over the last eight (8) years in this industry. Currently, Capital Court Authority, LLC has fifteen (15) employees and four (4) physical offices that include Frankfort (headquarters), Shelbyville, Georgetown, and Lexington.

Our Fayette County office is located at 1021 Majestic Drive, Suite 150, Lexington, KY 40513, in Beaumont Centre. This location was strategically chosen because of the access to public transportation, traffic models that shows much easier road travel access throughout our business hours than the previous location of drug testing services at the Fayette County Regional Jail, and a cost-efficient office option for our staff and the testers that can assist in keeping prices down for each client. At the present, Capital Court Authority, LLC is the sole approved provider of PreTrial urine sample drug testing services in Fayette County through the Administrative Office of the Courts, Office of PreTrial Services. CCA has annually entered into a Memorandum of Understanding with AOC to provide these services in the multiple jurisdictions that we have a physical presence. In addition, Capital Court Authority, LLC provides drug testing services to twenty-eight (28) separate county Department for Community Based Services Offices across the Commonwealth.

TESTING PROCEDURES:

Our urine drug testing procedures follow the prescribed requirements of the Administrative Office of the Courts and Federal Testing Standards (SAMHSA) for urine screening as follows:

1. The Provider shall provide a call-in system with a Phase System that will be assigned by the Office of Adult Probation to correspond with the number of tests that a client shall take in a one (1) month period.
2. An employee of the Provider will enroll each client into our call-in system. Further, we will provide thorough instructions regarding the testing process and, after requiring each client to sign the instruction sheet acknowledging the terms of their agreement to test with our office, including paying all fees necessary to test each time they are required to present themselves to our office, we will give them a copy of all signed instructions for their records. We will provide them with a document that will include their ID#, that they will key into the call-in system, and the phase that they are assigned, and should listen for each morning after connecting to said system.
3. At the time that the Client presents him/herself for testing services, they must come to the office prepared to provide a sample.
4. The Client shall pay for the drug testing collection and service prior to their observed urine sample production. Failure to pay or inability to pay for the test will result in the employee of the Provider refusing to provide drug testing services to the Client.
5. An employee of the provider shall provide a valid receipt for drug testing services with amounts paid, a clear date, name and address of the provider on the document.

6. Clients shall be provided a testing window of a minimum of six (6) hours to provide a urine specimen for the Provider. CCA's typical testing window is 9:00 A.M. to 12 PM and then from 1:00 P.M. to 4:00 P.M., Monday through Friday.
7. Client shall be allowed at least two (2) attempts to produce a sample. Each attempt must be a minimum of five (5) minutes.
8. Client shall provide a valid and acceptable form of identification.
9. Client must remove all unnecessary or bagging clothing that may prevent proper observation by the employee of the Provider that is conducting the test.
10. Client shall empty all of the contents of his/her pockets prior to entering the bathroom. The Provider will provide a standard and safe place for these items while the Client is testing.
11. The Client shall thoroughly wash and dry his/her hands prior to providing a sample.
12. All drug tests shall be strictly observed and collected by an employee of the Provider that is of the same sex of the client.
13. The Client shall provide, at the time of testing, a minimum of 30 mL's of his/her own urine for testing.
14. The Client shall raise or move any and all clothing that makes observation difficult for the employee of the Provider.
15. Clients who are unable to provide a sample within the allotted time that is provided to them for testing may be considered non-compliant and the Provider of testing services shall notify the Office of Adult Probation by the end of the testing day of this non-compliance.
16. Male Clients shall lower their pants to their knees for direct observation by the employee of the Provider of testing services while providing a valid urine sample for testing.
17. Female Clients shall squat, not sit, while providing a valid urine sample for testing. Female Clients must provide a valid sample "hands-free" to ensure that the urine is actually the Client's sample.
18. An employee of the Provider shall never allow the Client to be left alone with a urine sample.
19. An employee of the Provider shall pour the urine from the collection cup into the vial for transfer to the laboratory. After locking the vial with the plastic clip found on the side, the employee of the Provider shall place the lab sample sticker, that contains the date of testing and the Client's initials in his/her own writing, over the top and sides of the vial, securing the sample. At this point, the employee of the Provider shall place the Chain of Custody documents in the shipping bag from the laboratory then placing the vial in the same bag with the corresponding Chain of Custody with identical sample numbers on each. The Client shall be allowed the opportunity to watch the entire collection, pouring into the vial, locking the vial, sample identification and marking, and placing of their urine sample into the shipping bag with the same chain of custody and sample that both contain his/her identifiers.
20. An employee of the Provider will place the sample provided by the Client into a refrigerator for storage until the end of the day's business.

21. An employee of the Provider will pack all samples into a pre-addressed shipping container and then deliver the entire bag of the day's samples to a pick-up location for a common carrier used by the laboratory for shipments.
22. An employee of the Provider will provide a daily log of all testers for that day for use by the Office of Adult Probation to determine the attendance, or lack thereof, for each client scheduled to test that day.

PAYMENT:

Capital Court Authority, LLC is a "cash-based" business, in that we will never take the insurance, Medicaid, or Medicare information or identifiers for any client and bill or request payment from any third party or insurance fund or state or federal agency. As such, CCA accepts cash, credit card, check card, money order and cashier's check for payment of all services rendered. We do NOT accept personal checks from any client for any service of Capital Court Authority, LLC.

PRIVATE INFORMATION AND TEST RESULTS:

While we are not a covered HIPAA entity, nevertheless we do not and will not share any private information, including the results of any drug test with anyone but the client, any representative of the Office of Adult Probation, or their counsel of record without the express written consent of the Client.

IDENTIFICATION:

It is the preference in every circumstance that the Client provide a state issued identification card. However, we understand that due to financial reasons and criminal convictions, obtaining a state issued identification card may be difficult. Therefore, we can use any photo that may identify the individual including, but not limited to, a work badge, a mugshot, a social or shopping club card that has a photo on it, or any other means to identify that the person that is presenting themselves for drug testing is, in fact, the proper client that should provide a valid urine sample.

TYPES OF TESTING:

The National standard for drug detection in humans is lab screened urine testing. The GC/MS and LC/MS/MS testing is the highest standard of testing for common drugs of abuse. Capital Court Authority, LLC prefers to utilize these testing methods as they are the best evidence that may be provided in a Court of law involved in a case that addresses the freedoms or rights of any Client of our company.

Yet, there are many times that a Judge, Prosecutor, Law Enforcement Officer, Attorney, Social Worker, Probation Officer or Employer needs to know IMMEDIATELY concerning the presence of drugs of abuse, including alcohol, in a person's system. In those cases, Capital Court Authority, LLC, can provide on-site urine screens with instant results that can include each drug that the Office of Probation Services has requested for testing, except for Synthetics. (Those particular detections must always be tested at a laboratory.) In each of those instances, we follow the exact same procedure for collection of the urine sample. However, after collection, we use a

dip card that provides us with over 98% accuracy and results are back in less than five (5) minutes. If there is a positive screen on that on-site test, we *always* give the Client the right to send the sample to the laboratory for verification and confirmation at their cost. We also give the Client the opportunity to execute an Affidavit of Self-Admission regarding all drugs that they admit they have ingested, what date the drug use occurred on, and a notarized signature of the Client. Should a Client choose to execute this document, we shall inform them that we will be providing the document immediately to the Office of Probation Services.

In addition to the above-mentioned urine drug screen options, CCA has the ability to provide oral mouth swabs. (The accuracy of these swab tests is around 95% at the current time.) The only time we would suggest using this as a testing option would be when a Client has a *documented* medical condition that prevents him/her from providing a valid urine specimen and testing is necessary to determine the detection of drugs of abuse in the Client.

The final option that CCA can provide for drug screening and detection is a hair follicle test. While the cost is much higher than any of the previous tests discussed, the collection of just 1.5 inches of hair from the crown of the Client's head can provide up to ninety (90) days of review of drug use by the Client. The downsides of these particular types of tests is the high cost and the inability to determine exactly when the drug use occurred, as the presence of a drug in hair could have resulted from use at any time during the last three (3) months.

Capital Court Authority, LLC has the financial and human capital capabilities to perform *any* number of tests required by LFUCG, Division of Adult Probation, per day, week, month or year. CCA already has the collection site, personnel, supplies, and testing partners to immediately begin testing all Clients of the Division.

POINT OF CONTACT:

The single point of contact for all drug testing in Fayette County is our Lexington Office Supervisor, Mr. Randy Jones. Mr. Jones has an extensive professional background in corrections and investigations that included many years over the drug testing program, as well as Internal Affairs at the Fayette County Jail. Mr. Jones' contact information is Randy Jones, Capital Court Authority, LLC, Lexington Supervisor, (859) 368-7161 (office); (502) 542-9064 (Cell Phone); 1021 Majestic Drive, Suite 150, Lexington, KY 40513 (Office Address); cca.randyjones@gmail.com (Email communication).

The only other point of contact you may need is the Director of Operations for the company, Mr. Kyle Thompson. Mr. Thompson is the Owner, CEO, Director of Operations, and Legal Counsel for Capital Court Authority, LLC. His contact information is Kyle T. Thompson, Capital Court Authority, LLC, (502) 352-2550 (Office); (502) 229-8889 (Cell Phone); 100 East Main St., Frankfort, KY 40601 (Office Address); cca.kyle@gmail.com (Email communication).

LIAISON FOR COURT TESTIMONY

Capital Court Authority, LLC already has two individuals that are experienced and skilled in testifying in Court proceedings regarding drug test results and are more than willing to attend any Court matter when provided with proper notice provided to our offices.

The first person is Lisa Broaddus. Mrs. Broaddus is a Court-Liaison for four (4) different Courts throughout Central Kentucky. She currently serves at the pleasure of the Scott District and Traffic Courts, the Bourbon District Court, and the Spencer District Court. Lisa has over twenty-five (25) years of experience as an employee and Deputy Director of the Administrative Office of the Courts for the Commonwealth of Kentucky. She has been with the company for more than a year and has built up a wonderful relationship with each of the Courts she serves and looks forward to working with the Fayette County Courts, where she already has many contacts and business relationships. Her contact information is Lisa Broaddus, Capital Court Authority, LLC, Court Liaison Worker, 100 East Main St., Frankfort, KY 40601 (Office); (502) 352-2550 (Office Phone); (502) 320-2595 (Cell Phone); cca.lisabroaddus@gmail.com (Email Communications)

The second option is Kyle Thompson, Director of Operations and Legal Counsel for Capital Court Authority, LLC. Mr. Thompson has testified in over three hundred (300) cases in the last eight (8) years as the primary presence in courts throughout CCA's service region. Mr. Thompson has practiced law for twenty (20) years in Kentucky; he has been a former prosecutor for the Franklin County Attorney's Office; and, he is a certified regulatory investigator. Mr. Thompson has an extensive knowledge of toxicology, drug use and abuse, treatment options and success rates, and the Rules of Evidence for the State of Kentucky. His contact information is Kyle T. Thompson, Capital Court Authority, LLC, Director of Operations/Legal Counsel, 100 East Main St., Frankfort, KY 40601 (Headquarters); (502) 352-2550 (Office Phone); (502) 229-8889 (Cell Phone); cca.kyle@gmail.com (Email Communication)

LABORATORY PARTNER:

In the drug testing field, there are numerous providers of laboratory "screening" and "confirmation". However, while many of these labs may provide competitive pricing for doctors and clinics, the need for financially manageable drug testing is met by a relatively small number of entities. In addition to cost of testing, it is vitally important that the laboratory partner that we use is a "Certified Laboratory and Instrumented Initial Testing Facility Which Meets Minimum Standards to Engage in Urine and Oral Fluid Drug Testing for Federal Agencies" as determined by the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA). CCA has included a copy of the Federal Register, Vol. 86. No. 124, Thursday, July 1, 2021, providing notice of all such certified laboratories. Because of this relatively small list of providers, and while CCA has attempted to meet the requisite desire of LFUCG to engage sub-contractors that are Minority-Owned Businesses, Women-Owned Businesses, and Veteran Owned Businesses, the need for certified and quality laboratory sub-contractors that are certified through rigorous application and inspection has eliminated any ability to use laboratories that perhaps meet LFUCG's RFP's stated needs or desires.

To that end, and after a thorough search for not only all of CCA's business needs, but a laboratory partner to provide these services *with* us, we have chosen to *partner* with Redwood Toxicology Laboratory, 3700 Westwind Blvd., Santa Rosa, CA 95403 in this bid for the detection and confirmation testing of drugs for each Client required to test for the Fayette County Adult Probation Office. If the true desire of the RFP, LFUCG, and the Fayette County Adult Probation Office is to use a separate, "independent", laboratory for confirmation testing, we have also secured a partnership with Alere Toxicology Services, 1111 Newton St., Gretna, LA 70053, another SAMHSA certified lab, to provide those services. However, while we will provide the pricing for these confirmation testing services by the "independent" laboratory, the process of repackaging, properly labeling, and shipping of these specimens, along with the actual cost of the confirmation testing, is incredibly high and not cost effective for the Client or CCA, regardless of the laboratory we choose to assist us and LFUCG. The more economical and efficient (and industry standard) option would be to allow Redwood Toxicology Laboratory to provide the confirmation testing for any positive test results that are disputed by a Client. However, both options are presented and offered for this particular Request for Proposals.

Capital Court Authority, LLC, partners with Omega Laboratories, 400 N. Cleveland St., Mogadore, OH 44260, for our hair follicle testing options. Prices are listed below.

REPORTING OF TEST RESULTS:

Redwood Toxicology Laboratory uses a proprietary drug reporting system called ToxAccess. From the Redwood website and documentation provided to CCA:

"Engineered to support millions of drug and alcohol laboratory tests each year, the ToxAccess[®] website allows our clients to order tests and receive results from the laboratory more quickly and easily than ever. Our secure, web-based system helps you administer everyday collections and automates the reporting process so that results are at your fingertips as soon as they are ready.

COLLECTION MANAGEMENT

An intelligent solution that accelerates data entry and the test ordering process, saving you time and money.

- Decrease collection time and improve data accuracy
- Eliminate handwritten laboratory test request forms
- Intuitive step-by-step process ensures consistency in your program
- Improve scheduling, tracking and communication between clients, collectors, and donors
- Track the location of shipped, pending or complete specimens

RESULT REPORTING

Web-Result Reporting provides a secure and complete solution for searching, managing and printing drug and alcohol test reports.

- Comprehensive and easy to interpret drug and alcohol toxicology reports

- Easily locate, view, print and save donor results
 - Access monthly reports, drug statistics, donor summaries, and more
 - Examine donor reports and save them securely within the system”
- https://www.redwoodtoxicology.com/services/online_reporting

Through ToxAccess, we have the ability to easily allow online access to drug testing results with login credentials that can be tailored and managed for the entire Division and for individuals with varying degrees of access, dependent upon their needs and authority for the Division. The Adult Probation Clients can be managed and viewed as its own subset of the entire database, so that employees of the Division can review all Fayette Probation tests, without the concern of seeing any other client from another office of CCA.

ToxAccess and Redwood Toxicology Laboratory also have allowed CCA, and in turn LFUCG, access to their “Call In” Drug Testing Line. This toll-free number is used for the dissemination of daily information regarding the Clients that are required to test for that day. Capital Court Authority’s Lexington Office has already implemented the “Phase” system for all PreTrial and County Attorney referral cases. CCA would use the same criteria for assignment of “Phases” as used for all other testers for Fayette County, Kentucky drug testers. Currently, the “Phase” designations that CCA-Lexington uses are as follows:

Phase 1 – 3 times per week

Phase 2 – 2 times per week

Phase 3 – 1 time per week

Phase 4 – 2 times per month

Phase 5 – 1 time per month

Capital Court Authority can set these drug testing “Phases” randomly throughout a calendar week/month and will provide the proposed testing calendar to the Fayette County Adult Probation Office by the 15th of the month prior to the following month of testing. Should the Division so desire, we can alter and move any drug testing date on the calendar to meet their needs for the upcoming month. CCA will ensure that the “Call In” Line is appropriately set before each day’s testing in the Lexington Office.

PRICING OF SERVICES PROPOSED:

Panels Offered with Corresponding Costs Payable by Clients –

A. Standard Fifteen (15) Panel Urine Drug Screen with Following Drugs:

- Marijuana
- Cocaine
- Fentanyl
- Alcohol
- Amphetamines
- Opiates
- Oxycodone
- Benzodiazepine
- Suboxone
- Methadone
- Barbiturate

PROPOSED COST: \$25.00 Per Test

B. Standard Fifteen (15) Panel Urine Drug Screen – ALL drugs listed above in Panel A, *with* additional Synthetic Cannabinoid Panel.

PROPOSED COST: \$40.00 Per Test

C. Laboratory Confirmation of Urine Drug Screen performed at Redwood Toxicology Laboratory –

PROPOSED COST:
\$20.00 PER DRUG ON CONFIRMATION for MOST Drugs
\$30.00 Suboxone Confirmation
\$35.00 Fentanyl Confirmation
\$50.00 K2/Spice Confirmation

D. Laboratory Confirmation of Urine Drug Screen performed at Alere Toxicology Services (“Independent” Lab) –

PROPOSED COST:
\$125.00 packaging and shipping from Redwood to Alere
\$25.00 PER DRUG on standard panel
\$35.00 Fentanyl Confirmation
\$50.00 K2/Spice Confirmation

E. Standard twelve (12) Panel Oral Swab Drug Screen –

PROPOSED COST: \$25.00 Per Test

F. Standard Confirmation of Oral Swab Drug Screen –

**PROPOSED COST:
\$30.00 PER DRUG ON CONFIRMATION**

G. Hair Follicle Testing (Omega Laboratories) –

**PROPOSED COST:
\$180.00 – 7 Panel Drug Test
\$225.00 – 13 Panel Drug Test
\$250.00 – 17 Panel Drug Test**

H. On-Site/Instant Testing –

**PROPOSED COST:
\$15.00 PER TEST and includes ALL drugs except
Synthetic THC**

CORPORATE STABILITY AND EXPERTISE

Capital Court Authority, LLC, is an exceptionally stable company with regards to its finances and operations. Created in January, 2014, CCA has grown from one (1) small office with three (3) employees, that served Franklin County Courts only, to a company with (4) offices and fifteen (15) employees serving dozens of local court jurisdictions, state and local agencies, including currently offering drug testing services for twenty-eight (28) DCBS offices, as well as private individuals and companies. CCA provides more than 10,000 drug tests annually and monitors more than 2,000 probation cases at any one time throughout Central Kentucky. CCA is an approved PreTrial Drug Testing Provider with the Kentucky Administrative Office of the Courts since 2014. CCA is the only such provider in Fayette County. Capital Court Authority, LLC, has become the largest provider of PreTrial Drug Testing Services in Central Kentucky and is the largest private probation company in the Commonwealth in just seven (7) short years.

The founding owner of the company, Kyle Thompson, has twenty (20) years of legal and courtroom experience, along with thirty (30) years of business experience. Prior to opening CCA, Mr. Thompson ran an extremely successful legal practice focusing on criminal and domestic work throughout Kentucky.

The financial executive of the company, Ashley Sutphin, has more than twenty-five (25) years of experience in business finances and oversees the daily operations of CCA's billing department, along with handling all financial aspects of a thriving company including, but not limited to payroll, taxation, benefits, and governmental licensing and financial compliance.

Capital Court Authority, LLC has a Certified Public Accountant, Rick Waddle, that has provided expertise and services to the company since its inception. Mr. Waddle has written a letter that endorses the corporate financial stability of CCA. Said letter is attached.

In addition, CCA has provided a number of financial documents to prove it's corporate and financial stability to LFUCG, Division of Adult Probation. Those documents include the



Redwood Toxicology Laboratory, Inc.
 3650 Westwind Blvd.
 Santa Rosa, CA 95403
 T: +1 800 255 2159
 F: +1 707 577 8102

RTL Urinalysis Methodologies & Cutoff Levels

Cutoff levels by procedure – *Cutoff levels updated periodically*

Drug	Screen		Confirm	
	Methodology	Cutoff	GC-MS	LC-MS/MS
Alcohol (Ethanol)	EIA	0.04 gm/dL	.02 gm/dL (GC-FID)*	
Amphetamines - Amphetamine - Methamphetamine - MDA - MDMA - MDEA	EIA	500 or 1000 ng/mL**		250 ng/mL 250 ng/mL 250 ng/mL 250 ng/mL 250 ng/mL
Barbiturates - Amobarbital - Butobarbital - Butalbital - Pentobarbital - Phenobarbital - Secobarbital	EIA	200 ng/mL		200 ng/mL 200 ng/mL 200 ng/mL 200 ng/mL 200 ng/mL 200 ng/mL
Benzodiazepines - alpha-Hydroxyalprazolam (Alprazolam) - 7-Aminoclonazepam (Clonazepam) - 7-Aminoflunitrazepam (Flunitrazepam) - 2-Hydroxyethyl flurazepam (Flurazepam) - Lorazepam - alpha-Hydroxymidazolam (Midazolam) - Nordiazepam - Oxazepam - Temazepam - alpha-Hydroxytriazolam (Triazolam)	EIA	200 ng/mL		50 ng/mL 50 ng/mL 50 ng/mL 50 ng/mL 50 ng/mL 50 ng/mL 50 ng/mL 50 ng/mL 50 ng/mL 50 ng/mL
Buprenorphine - Buprenorphine - Norbuprenorphine	EIA	5 ng/mL		0.5 ng/mL 0.5 ng/mL
Carisoprodol - Carisoprodol - Meprobatmate	EIA	100 ng/mL		100 ng/mL 100 ng/mL
Cocaine (Cocaine Metabolite, Benzoylcegonine)	EIA	150 or 300 ng/mL**		100 ng/mL



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Ecstasy (MDMA)	EIA	500 ng/mL		250 ng/mL
Ethyl Glucuronide (EtG) - Ethyl Glucuronide (EtG) - Ethyl Sulfate (EtS)	EIA	100 or 500 ng/mL**		100 ng/mL 25 ng/mL
Fentanyl - Fentanyl - Norfentanyl - Methoxyacetyl fentanyl - Acetyl fentanyl - Tetrahydrofuranlyl fentanyl - Acryl fentanyl - Flurorfentanyl - Furanyl fentanyl - Isobutyryl fentanyl - Butyryl fentanyl - Valeryl fentanyl - 4-ANPP*** - 4'-Methylacetyl fentanyl*** - Acetyl norfentanyl*** - Alfentanyl*** - alpha-Methylacetyl fentanyl*** - alpha-Methyl fentanyl*** - beta- Hydroxythio fentanyl*** - Butyryl norfentanyl*** - Carfentanil*** - cis-3-Methyl fentanyl*** - Cyclopentyl fentanyl*** - Cyclopropyl fentanyl*** - para-Fluorobutyryl fentanyl*** - Flurorisobutyryl fentanyl*** - Furanyl norfentanyl*** - Ocfentanil*** - para-Chloroisobutyryl fentanyl*** - para-Methoxybutyryl fentanyl***	EIA	1ng/mL		0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 1 ng/mL 0.5 ng/mL 5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL 5 ng/mL 0.5 ng/mL 0.5 ng/mL 0.5 ng/mL
6-MAM (Heroin Metabolite)	EIA	10 ng/mL		5 ng/mL
Marijuana Metabolite (THC-COOH)	EIA	20 or 50 ng/mL**		5 ng/mL
Methadone - Methadone - EDDP (Methadone Metabolite)	EIA	150 ng/mL		100 ng/mL 100 ng/mL
Opiates - Codeine - Morphine	EIA	300 ng/mL		100 ng/mL 100 ng/mL



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- Hydrocodone - Hydromorphone				100 ng/mL 100 ng/mL
Oxycodone - Oxycodone - Oxymorphone - Noroxycodone	EIA	100 ng/mL		50 ng/mL 50 ng/mL 50 ng/mL
Phencyclidine (PCP)	EIA	25 ng/mL		5 ng/mL
Propoxyphene	EIA	300 ng/mL		200 ng/mL
Synthetic Cannabinoids (K2/Spice) - AKB-48 parent and metabolite - AM-1248 parent and metabolite - AM-2201 parent and metabolite - AM-694 parent and metabolite - JWH-018 parent and metabolite - JWH-019 parent and metabolite - JWH-073 parent and metabolite - JWH-081 parent and metabolite - JWH-122 parent and metabolite - JWH-200 parent and metabolite - JWH-203 parent and metabolite - JWH-210 parent and metabolite - JWH-250 parent and metabolite - JWH-398 parent and metabolite - MAM-2201 parent and metabolite - RCS-4 parent and metabolite - RCS-8 parent and metabolite - UR-144 parent and metabolite - XLR-11 parent and metabolite - 5-fluoro-AB-PINACA*** - AB-PINACA*** - 5-fluoro-ADBICA*** - ADBICA*** - 5-fluoro-ADB-PINACA*** - ADB-PINACA*** - 5-fluoro-AKB-48*** - AKB-48*** - 5-fluoro-AMB*** - 5-fluoro-PB-22*** - PB-22*** - AB-CHIMINACA*** - AB-FUBINACA*** - BB-22*** - FDU-PB-22*** - FUB-144***	EIA	10 ng/mL		Qualitative



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- FUB-AMB*** - FUB-PB-22*** - THJ-2201***				
Tramadol/Venlafaxine	EIA	200 ng/mL		100 ng/mL

* Test performed by Gas Chromatography Flame Ionization Detection.

**Client may choose cutoff level.

***Included in premium panel only.

confidentially, and may be made publicly available.

Complete license applications submitted in response to this Notice will be presumed to contain business confidential information and any release of information in these license applications will be made only as required and upon a request under the Freedom of Information Act, 5 U.S.C. 552.

Dated: June 25, 2021.

Surekha Vathyam,

Deputy Director, Technology Transfer and Intellectual Property Office, National Institute of Allergy and Infectious Diseases.

[FR Doc. 2021-14128 Filed 6-30-21; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Current List of HHS-Certified Laboratories and Instrumented Initial Testing Facilities Which Meet Minimum Standards To Engage in Urine and Oral Fluid Drug Testing for Federal Agencies

AGENCY: Substance Abuse and Mental Health Services Administration, HHS.

ACTION: Notice.

SUMMARY: The Department of Health and Human Services (HHS) notifies federal agencies of the laboratories and Instrumented Initial Testing Facilities (IITFs) currently certified to meet the standards of the Mandatory Guidelines for Federal Workplace Drug Testing Programs using Urine or Oral Fluid (Mandatory Guidelines).

FOR FURTHER INFORMATION CONTACT: Anastasia Donovan, Division of Workplace Programs, SAMHSA/CSAP, 5600 Fishers Lane, Room 16N06B, Rockville, Maryland 20857; 240-276-2600 (voice); *Anastasia.Donovan@samhsa.hhs.gov* (email).

SUPPLEMENTARY INFORMATION: In accordance with Section 9.19 of the Mandatory Guidelines, a notice listing all currently HHS-certified laboratories and IITFs is published in the **Federal Register** during the first week of each month. If any laboratory or IITF certification is suspended or revoked, the laboratory or IITF will be omitted from subsequent lists until such time as it is restored to full certification under the Mandatory Guidelines.

If any laboratory or IITF has withdrawn from the HHS National Laboratory Certification Program (NLCP) during the past month, it will be listed

at the end and will be omitted from the monthly listing thereafter.

This notice is also available on the internet at <https://www.samhsa.gov/workplace/resources/drug-testing/certified-lab-list>.

The Department of Health and Human Services (HHS) notifies federal agencies of the laboratories and Instrumented Initial Testing Facilities (IITFs) currently certified to meet the standards of the Mandatory Guidelines for Federal Workplace Drug Testing Programs (Mandatory Guidelines) using Urine and of the laboratories currently certified to meet the standards of the Mandatory Guidelines using Oral Fluid.

The Mandatory Guidelines using Urine were first published in the **Federal Register** on April 11, 1988 (53 FR 11970), and subsequently revised in the **Federal Register** on June 9, 1994 (59 FR 29908); September 30, 1997 (62 FR 51118); April 13, 2004 (69 FR 19644); November 25, 2008 (73 FR 71858); December 10, 2008 (73 FR 75122); April 30, 2010 (75 FR 22809); and on January 23, 2017 (82 FR 7920).

The Mandatory Guidelines using Oral Fluid were first published in the **Federal Register** on October 25, 2019 (84 FR 57554) with an effective date of January 1, 2020.

The Mandatory Guidelines were initially developed in accordance with Executive Order 12564 and section 503 of Public Law 100-71 and allowed urine drug testing only. The Mandatory Guidelines using Urine have since been revised, and new Mandatory Guidelines allowing for oral fluid drug testing have been published. The Mandatory Guidelines require strict standards that laboratories and IITFs must meet in order to conduct drug and specimen validity tests on specimens for federal agencies. HHS does not allow IITFs to conduct oral fluid testing.

To become certified, an applicant laboratory or IITF must undergo three rounds of performance testing plus an on-site inspection. To maintain that certification, a laboratory or IITF must participate in a quarterly performance testing program plus undergo periodic, on-site inspections.

Laboratories and IITFs in the applicant stage of certification are not to be considered as meeting the minimum requirements described in the HHS Mandatory Guidelines using Urine and/or Oral Fluid. An HHS-certified laboratory or IITF must have its letter of certification from HHS/SAMHSA (formerly: HHS/NIDA), which attests that the test facility has met minimum standards. HHS does not allow IITFs to conduct oral fluid testing.

HHS-Certified Laboratories Approved To Conduct Oral Fluid Drug Testing

In accordance with the Mandatory Guidelines using Oral Fluid dated October 25, 2019 (84 FR 57554), the following HHS-certified laboratories meet the minimum standards to conduct drug and specimen validity tests on oral fluid specimens:

At this time, there are no laboratories certified to conduct drug and specimen validity tests on oral fluid specimens.

HHS-Certified Instrumented Initial Testing Facilities Approved To Conduct Urine Drug Testing

In accordance with the Mandatory Guidelines using Urine dated January 23, 2017 (82 FR 7920), the following HHS-certified IITFs meet the minimum standards to conduct drug and specimen validity tests on urine specimens:

Dynacare, 6628 50th Street NW, Edmonton, AB Canada T6B 2N7, 780-784-1190 (Formerly: Gamma-Dynacare Medical Laboratories)

HHS-Certified Laboratories Approved To Conduct Urine Drug Testing

In accordance with the Mandatory Guidelines using Urine dated January 23, 2017 (82 FR 7920), the following HHS-certified laboratories meet the minimum standards to conduct drug and specimen validity tests on urine specimens:

Alere Toxicology Services, 1111 Newton St., Gretna, LA 70053, 504-361-8989/800-433-3823 (Formerly: Kroll Laboratory Specialists, Inc., Laboratory Specialists, Inc.)

Alere Toxicology Services, 450 Southlake Blvd., Richmond, VA 23236, 804-378-9130 (Formerly: Kroll Laboratory Specialists, Inc., Scientific Testing Laboratories, Inc.; Kroll Scientific Testing Laboratories, Inc.)

Clinical Reference Laboratory, Inc., 8433 Quivira Road, Lenexa, KS 66215-2802, 800-445-6917

Cordant Health Solutions, 2617 East L Street, Tacoma, WA 98421, 800-442-0438 (Formerly: STERLING Reference Laboratories)

Desert Tox, LLC, 5425 E Bell Rd., Suite 125, Scottsdale, AZ 85254, 602-457-5411/623-748-5045

DrugScan, Inc., 200 Precision Road, Suite 200, Horsham, PA 19044, 800-235-4890

Dynacare *, 245 Pall Mall Street, London, ONT, Canada N6A 1P4, 519-679-1630 (Formerly: Gamma-Dynacare Medical Laboratories)

ElSohly Laboratories, Inc., 5 Industrial Park Drive, Oxford, MS 38655, 662-236-2609

Laboratory Corporation of America Holdings, 7207 N Gessner Road, Houston, TX 77040, 713-856-8288/800-800-2387

Laboratory Corporation of America Holdings, 69 First Ave., Raritan, NJ 08869, 908-526-2400/800-437-4986 (Formerly: Roche Biomedical Laboratories, Inc.)

Laboratory Corporation of America Holdings, 1904 TW Alexander Drive, Research Triangle Park, NC 27709, 919-572-6900/800-833-3984 (Formerly: LabCorp Occupational Testing Services, Inc., CompuChem Laboratories, Inc.; CompuChem Laboratories, Inc., a Subsidiary of Roche Biomedical Laboratory; Roche CompuChem Laboratories, Inc., a Member of the Roche Group)

Laboratory Corporation of America Holdings, 1120 Main Street, Southaven, MS 38671, 866-827-8042/800-233-6339 (Formerly: LabCorp Occupational Testing Services, Inc.; MedExpress/National Laboratory Center)

LabOne, Inc. d/b/a Quest Diagnostics, 10101 Renner Blvd., Lenexa, KS 66219, 913-888-3927/800-873-8845 (Formerly: Quest Diagnostics Incorporated; LabOne, Inc.; Center for Laboratory Services, a Division of LabOne, Inc.)

Legacy Laboratory Services Toxicology, 1225 NE 2nd Ave., Portland, OR 97232, 503-413-5295/800-950-5295

MedTox Laboratories, Inc., 402 W County Road D, St. Paul, MN 55112, 651-636-7466/800-832-3244

Minneapolis Veterans Affairs Medical Center, Forensic Toxicology Laboratory, 1 Veterans Drive, Minneapolis, MN 55417, 612-725-2088. Testing for Veterans Affairs (VA) Employees Only

Pacific Toxicology Laboratories, 9348 DeSoto Ave., Chatsworth, CA 91311, 800-328-6942 (Formerly: Centinela Hospital Airport Toxicology Laboratory)

Phamatech, Inc., 15175 Innovation Drive, San Diego, CA 92128, 888-635-5840

Quest Diagnostics Incorporated, 400 Egypt Road, Norristown, PA 19403, 610-631-4600/877-642-2216 (Formerly: SmithKline Beecham Clinical Laboratories; SmithKline Bio-Science Laboratories)

Redwood Toxicology Laboratory, 3700 Westwind Blvd., Santa Rosa, CA 95403, 800-255-2159

U.S. Army Forensic Toxicology Drug Testing Laboratory, 2490 Wilson St., Fort George G. Meade, MD 20755-5235, 301-677-7085, Testing for Department of Defense (DoD) Employees Only

* The Standards Council of Canada (SCC) voted to end its Laboratory Accreditation Program for Substance Abuse (LAPSA) effective May 12, 1998. Laboratories certified through that program were accredited to conduct forensic urine drug testing as required by U.S. Department of Transportation (DOT) regulations. As of that date, the certification of those accredited Canadian laboratories will continue under DOT authority. The responsibility for conducting quarterly performance testing plus periodic on-site inspections of those LAPSA-accredited laboratories was transferred to the U.S. HHS, with the HHS' NLCP contractor continuing to have an active role in the performance testing and laboratory inspection processes. Other Canadian laboratories wishing to be considered for the NLCP may apply directly to the NLCP contractor just as U.S. laboratories do.

Upon finding a Canadian laboratory to be qualified, HHS will recommend that DOT certify the laboratory (**Federal Register**, July 16, 1996) as meeting the minimum standards of the Mandatory Guidelines published in the **Federal Register** on January 23, 2017 (82 FR 7920). After receiving DOT certification, the laboratory will be included in the monthly list of HHS-certified laboratories and participate in the NLCP certification maintenance program.

Anastasia Marie Donovan,
Policy Analyst.

[FR Doc. 2021-14044 Filed 6-30-21; 8:45 am]

BILLING CODE 4162-20-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Meeting of the Substance Abuse and Mental Health Services Administration, Center for Mental Health Services National Advisory Council

AGENCY: Substance Abuse and Mental Health Services Administration, HHS.

ACTION: Notice.

SUMMARY: Notice is hereby given of the meeting on August 17, 2021 of the Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services National Advisory Council (CMHS NAC). The meeting is open to the public and can be accessed remotely. Agenda with call-in information will be posted on the SAMHSA website prior to the

meeting at: <https://www.samhsa.gov/about-us/advisory-councils/meetings>.

The meeting will include consideration of the minutes from the March 18, 2021, SAMHSA, CMHS NAC meeting; updates from the CMHS Director to include discussions on the Mental Health Block Grant, Certified Community Behavioral Health Clinic, and Children Services; and updates from the Office of the Assistant Secretary for Mental Health and Substance Use.

DATES: Tuesday, August 17, 2021, 1:00 p.m. to 4:30 p.m., EDT, (OPEN).

ADDRESSES: The meeting will be held virtually only.

FOR FURTHER INFORMATION CONTACT: Pamela Foote, Designated Federal Officer, CMHS National Advisory Council, 5600 Fishers Lane, Room 14E57B, Rockville, Maryland 20857, Telephone: (240) 276-1279, Fax: (301) 480-8491, Email: pamela.foote@samhsa.hhs.gov.

SUPPLEMENTARY INFORMATION: Interested persons may present data, information, or views, orally or in writing, on issues pending before the Council. Individuals interested in sending written submissions or making public comments, must forward them and notify the contact person on or before July 30, 2021. Up to three minutes will be allotted for each presentation.

Registration is required to participate during this meeting. To attend virtually, or to obtain the call-in number and access code, submit written or brief oral comments, or request special accommodations for persons with disabilities, please register on-line at: <http://snacregister.samhsa.gov/MeetingList.aspx> or communicate with the CMHS NAC Designated Federal Officer; Pamela Foote.

Meeting information and a roster of Council members may be obtained by accessing the SAMHSA website at: <http://www.samhsa.gov/about-us/advisory-councils/cmhs-national-advisory-council> or by contacting the CMHS NAC Designated Federal Officer; Pamela Foote.

Council Name: Substance Abuse and Mental Health Services Administration, Center for Mental Health Services National Advisory Council.

Dated: June 25, 2021.

Carlos Castillo,

Committee Management Officer, SAMHSA.

[FR Doc. 2021-14031 Filed 6-30-21; 8:45 am]

BILLING CODE 4162-20-P

Updated: July 2021

Department of Health and Human Services (HHS)
Substance Abuse and Mental Health Services Administration (SAMHSA)

Title: State List of Current HHS-Certified Laboratories and Instrumented Initial Testing Facilities (IITFs) Which Meet Minimum Standards to Engage in Urine and Oral Fluid Drug Testing for Federal Agencies (20 UNITED STATES LABS and 1 CANADIAN LAB and 1 CANADIAN IITF, for a total of 21 HHS Certified Labs and 1 IITF).

The Department of Health and Human Services (HHS) notifies federal agencies of the laboratories and IITFs currently certified to meet the standards of the Mandatory Guidelines for Federal Workplace Drug Testing Programs (Mandatory Guidelines) using Urine or Oral Fluid.

The Mandatory Guidelines using Urine were first published in the Federal Register on April 11, 1988 (53 FR 11970), and subsequently revised in the Federal Register on June 9, 1994 (59 FR 29908); September 30, 1997 (62 FR 51118); April 13, 2004 (69 FR 19644); November 25, 2008 (73 FR 71858); December 10, 2008 (73 FR 75122); April 30, 2010 (75 FR 22809); and on January 23, 2017 (82 FR 7920).

The Mandatory Guidelines using Oral Fluid were first published in the Federal Register on October 25, 2019 (84 FR 57554) with an effective date of January 1, 2020.

A notice listing all currently certified Laboratories and IITFs is published in the Federal Register during the first week of each month. If any Laboratory or IITFs' certification is suspended or revoked, the Laboratory/IITF will be omitted from subsequent lists until such time as it is restored to full certification under the Mandatory Guidelines.

List of HHS-Certified Laboratories Approved to Conduct Oral Fluid Drug Testing Listed By State:

At this time, there are no laboratories certified to conduct drug and specimen validity tests on oral fluid specimens.

List of HHS-Certified Instrumented Initial Testing Facilities Approved to Conduct Urine Drug Testing in the United States and in Canada:

At this time, there are no IITFs in the United States certified to conduct urine drug testing.

Canada

Alberta
Dynacare
780-784-1190

List of HHS-Certified Laboratories Approved to Conduct Urine Drug Testing Listed by State and in Canada:

Arizona

Scottsdale
Desert Tox, LLC
602-457-5411
623-748-5045

California

Chatsworth
Pacific Toxicology Laboratories
800-328-6942

San Diego
Phamatech, Inc.
888-635-5840

Santa Rosa
Redwood Toxicology Laboratory
800-255-2159

Kansas

Lenexa
Clinical Reference Laboratory, Inc.
800-445-6917

Lenexa
LabOne, Inc. d/b/a Quest Diagnostics
913-888-3927
800-873-8845

Louisiana

Gretna
Alere Toxicology Services
504-361-8989
800-433-3823

Maryland

Ft. Meade

US Army Forensic Toxicology Drug Testing Lab

301-677-7085

Testing for Department of Defense (DoD) Employees Only

Minnesota

Minneapolis

Minneapolis Veterans Affairs Medical Center, Forensic Toxicology Lab

612-725-2088

Testing for Veterans Affairs (VA) Employees Only

St. Paul

MedTox Labs, Inc.

800-832-3244

651-636-7466

Mississippi

Oxford

ElSohly Labs, Inc.

662-236-2609

Southaven

Laboratory Corporation of America Holdings

866-827-8042

800-233-6339

New Jersey

Raritan

Laboratory Corporation of America Holdings

908-526-2400

800-437-4986

North Carolina

Research Triangle Park
Laboratory Corp of America Holdings
919-572-6900
800-833-3984

Oregon

Portland
Legacy Laboratory Services Toxicology
503-413-5295
800-950-5295

Pennsylvania

Norristown
Quest Diagnostics Inc.
877-642-2216
610-631-4600

Horsham
DrugScan, Inc.
800-235-4890

Texas

Houston
Laboratory Corporation of America Holdings
713-856-8288
800-800-2387

Virginia

Richmond
Alere Toxicology Services
804-378-9130

Washington

Tacoma

Cordant Health Solutions

800-442-0438

Canada

London, Ontario

Dynacare

519-679-1630

CAPITAL COURT AUTHORITY, LLC

**CORPORATE AND FINANCIAL
STABILITY DOCUMENTATION
AND ATTACHMENTS**



Capital Court Authority

Capital Court Authority, LLC is a Court Alternative and Drug Testing Provider headquartered in Frankfort, Kentucky, that was created and opened on January 1, 2014. This multi-faceted business builds on twenty (20) years of experience in State and Federal Court systems to provide for incarceration alternatives, laboratory testing for drugs and alcohol, community service programs, private probation, and workplace and pre-employment substance testing. The founding member of this company, Kyle T. Thompson, is a former prosecutor, previous general counsel for the Kentucky Board of Emergency Medical Services, and a certified regulatory investigator. The company currently monitors and reviews the court obligations and testing requirements for more than two thousand (2,500) individuals in more than twenty-eight (28) counties and jurisdictions. CCA is the largest private probation company in Central Kentucky and the largest provider of judicial drug testing services in the Commonwealth.

Kyle Thompson is the Director of Operations and Co-Owner of Capital Court Authority, LLC. A native of Frankfort, Kentucky, he is a 1994 graduate of Franklin County High School. Mr. Thompson received a Bachelor of Arts degree in Political Science with an emphasis in Racial and Political Tolerance and a Minor in History from the University of Kentucky in 1998. After his undergraduate studies, Kyle Thompson graduated from Ohio Northern University, College of Law in 2001 where he was honored as a member of the Order of the Barristers and Top Oral Advocate, competing in and winning a number of Moot Court competitions. Mr. Thompson passed the Kentucky Bar Examination in 2001 and has been practicing law in Frankfort for twenty (20) years. A former Assistant Franklin County Attorney and General Counsel of a state agency, Mr. Thompson opened his own law firm over fourteen (14) years ago and focused his practice on domestic, criminal, insurance, personal injury, and administrative law. Kyle Thompson is licensed and has practiced before the Federal District Court for the Eastern District of Kentucky and the Sixth Circuit Court of Appeals in Cincinnati. In 2010, Mr. Thompson was sworn into practice by Chief Justice John Roberts before the United States Supreme Court. He is married to Jennifer Thompson (Vest). The couple have five (5) children between them.

Ashley Sherrard Sutphin is the Chief Financial Officer and Co-Owner of Capital Court Authority, LLC. She is a lifetime resident of Frankfort. A 1988 graduate of Franklin County High School, Mrs. Sutphin graduated with a Bachelor of Arts in Sociology and a Minor in psychology in 1992 from the University of Kentucky. After serving for more than 18 years as the office manager of another local business, Ashley joined her long-time family friend, Kyle Thompson, at Capital Court Authority, LLC. Ashley is married to Jon Sutphin who is the Associate Pastor at Capital City Christian Church. The couple have two children Olivia and Savannah.



RICK R WADDLE JR

Certified Public Accountant

17 Whitebridge Lane, Frankfort, Kentucky 40601

Tel. (502) 352-2950

rickwaddle@gmail.com

To Whom It May Concern:

My name is Rick Waddle. I am a Certified Public Accountant. I have been the individual that has provided accounting and tax preparation services to Capital Court Authority, LLC since their inception on January 1, 2014. I am also the personal accountant and tax preparer for both owners of the company, Kyle T. Thompson and Ashley H. Sutphin. I am intimately involved in their business structure, tax responsibilities and payments, as well as the financial stability of the company.

Capital Court Authority, LLC provides drug testing and private probation monitoring services to the courts of the Commonwealth of Kentucky as well as drug testing services for private individuals and businesses. The initial business plan was created and executed by Mr. Thompson in December, 2013. He provided a small personal investment to the company and began providing services. When Mrs. Sutphin joined the business in March, 2014, she too invested an equal amount as the founder to the general fund of the company. Since that time, through a dedicated work ethic and solid business acumen, this very small investment has grown to a company that has had gross revenues of over a million dollars in the last calendar year. CCA has gone from just three (3) employees, that included the owners, in one location originally, to now fifteen (15) employees in four (4) offices throughout Central Kentucky. They have made incredibly wise and calculated business decisions during this time to meet their ongoing obligations, as well as having measured growth that the company and its employees could handle with their financial and human capital. Beyond a small mortgage on the building that houses their headquarters, Capital Court Authority, LLC has never had to borrow any money or take out any lines of credit to meet their monthly and annual obligations. I have attached some documentation to prove the financial stability of the company for your review.

I can state, without equivocation, that Capital Court Authority, LLC is very financially stable and able to take on any number of growth opportunities including this Request for Proposal from the Lexington Fayette Urban County Government.

Thank you for your time and attention to this matter.

Sincerely,

Rick R. Waddle, Jr., CPA, PLLC

Rick R. Waddle, Jr., CPA, PLLC

Capital Court Authority, LLC Balance Sheet

As of December 31, 2014

	Dec 31, 14
ASSETS	
Current Assets	
Checking/Savings	20,157.87
Community Trust Checking	-3,334.46
Independence Bank	
Total Checking/Savings	16,823.41
Accounts Receivable	-824.00
Accounts Receivable	-824.00
Total Accounts Receivable	-824.00
Other Current Assets	-41.40
Undeposited Funds	-41.40
Total Other Current Assets	-85.80
Total Current Assets	15,958.01
TOTAL ASSETS	15,958.01
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	-595.16
2000 · Accounts Payable	-595.16
Total Accounts Payable	-1,190.32
Other Current Liabilities	1,644.75
4000 · Payroll Liabilities	1,644.75
Total Other Current Liabilities	1,644.75
Total Current Liabilities	1,049.59
Total Liabilities	1,049.59
Equity	
Member Distribution-K. Thompson	-766.62
Net Income	15,675.04
Total Equity	14,908.42
TOTAL LIABILITIES & EQUITY	15,958.01

10:51 AM

07/14/21

Cash Basis

Capital Court Authority, LLC
Balance Sheet
As of December 31, 2015

	Dec 31, 15
ASSETS	
Current Assets	
Checking/Savings	50.00
Cash Drawer - Frankfort	4,694.61
Community Trust Checking	-3,334.46
Independence Bank	
Total Checking/Savings	1,410.15
Accounts Receivable	
Accounts Receivable	-2,394.26
Total Accounts Receivable	-2,394.26
Other Current Assets	
Undeposited Funds	2,223.20
Total Other Current Assets	2,223.20
Total Current Assets	1,239.09
TOTAL ASSETS	1,239.09
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	-155.05
2000 - Accounts Payable	
Total Accounts Payable	-155.05
Other Current Liabilities	
4000 - Payroll Liabilities	731.10
Total Other Current Liabilities	731.10
Total Current Liabilities	576.05
Total Liabilities	576.05
Equity	
Member Distribution-K. Thompson	-1,972.37
32000 - Retained Earnings	15,675.04
Net Income	-13,039.63
Total Equity	663.04
TOTAL LIABILITIES & EQUITY	1,239.09

10:52 AM

07/14/21

Cash Basis

Capital Court Authority, LLC Balance Sheet

As of December 31, 2016

	Dec 31, 16
ASSETS	
Current Assets	
Checking/Savings	
Cash Drawer - Frankfort	150.00
Community Trust Checking	34,305.67
Independence Bank	-3,334.46
Total Checking/Savings	31,121.21
Accounts Receivable	
Accounts Receivable	-3,070.74
Total Accounts Receivable	-3,070.74
Other Current Assets	
Undeposited Funds	301.80
Total Other Current Assets	301.80
Total Current Assets	28,352.27
TOTAL ASSETS	28,352.27
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2000 - Accounts Payable	-155.05
Total Accounts Payable	-155.05
Credit Cards	
PNC Credit Card	2,230.66
Total Credit Cards	2,230.66
Other Current Liabilities	
4000 - Payroll Liabilities	1,311.82
Total Other Current Liabilities	1,311.82
Total Current Liabilities	3,387.43
Total Liabilities	3,387.43

10:52 AM

07/14/21

Cash Basis

Capital Court Authority, LLC Balance Sheet

As of December 31, 2016

	Dec 31, 16
Equity	
Member Distribution-K. Thompson	-1,972.37
Opening Balance Equity	-2,269.66
32000 - Retained Earnings	2,635.41
Net Income	26,571.46
Total Equity	24,964.84
TOTAL LIABILITIES & EQUITY	28,352.27

10:52 AM

07/14/21

Cash Basis

Capital Court Authority, LLC Balance Sheet

As of December 31, 2017

	Dec 31, 17
ASSETS	
Current Assets	
Checking/Savings	
Cash Drawer - Frankfort	160.00
Community Trust Checking	23,774.18
Independence Bank	-3,334.46
Secondary Acct, Community Trust	468.08
Total Checking/Savings	21,067.80
Accounts Receivable	
Accounts Receivable	-4,307.55
Total Accounts Receivable	-4,307.55
Other Current Assets	
Undeposited Funds	343.20
Total Other Current Assets	343.20
Total Current Assets	17,103.45
TOTAL ASSETS	17,103.45
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2000 - Accounts Payable	-181.84
Total Accounts Payable	-181.84
Credit Cards	
PNC Credit Card	2,230.66
Total Credit Cards	2,230.66
Other Current Liabilities	
4000 - Payroll Liabilities	1,855.75
Total Other Current Liabilities	1,855.75
Total Current Liabilities	3,904.57
Total Liabilities	3,904.57

10:52 AM

07/14/21

Cash Basis

Capital Court Authority, LLC
Balance Sheet
As of December 31, 2017

	Dec 31, 17
Equity	
Member Distribution-K. Thompson	-1,972.37
Opening Balance Equity	-2,269.66
32000 - Retained Earnings	29,206.87
Net Income	-11,765.96
Total Equity	<u>13,198.88</u>
TOTAL LIABILITIES & EQUITY	<u><u>17,103.45</u></u>

10:53 AM

07/14/21

Cash Basis

Capital Court Authority, LLC Balance Sheet

As of December 31, 2018

	Dec 31, 18
ASSETS	
Current Assets	
Checking/Savings	
Cash Drawer - Georgetown DCBS	50.00
Cash Drawer - Frankfort	150.00
Community Trust Checking	23,541.41
Independence Bank	-3,334.46
Secondary Acct, Community Trust	1,038.08
United Bank & Trust / Wesbanco	21,917.68
Total Checking/Savings	43,362.71
Accounts Receivable	
Accounts Receivable	-5,938.15
Total Accounts Receivable	-5,938.15
Other Current Assets	
Undeposited Funds	483.60
Total Other Current Assets	483.60
Total Current Assets	37,908.16
Fixed Assets	
100 East Main	
100 East Main-Original Cost	213,253.29
Total 100 East Main	213,253.29
Vehicles	
2012-Cadillac SRX	9,897.00
2012 Mazda CX9	14,327.00
Total Vehicles	24,224.00
Total Fixed Assets	237,477.29
TOTAL ASSETS	275,385.45
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2000 · Accounts Payable	-194.48
Total Accounts Payable	-194.48

10:53 AM

07/14/21

Cash Basis

Capital Court Authority, LLC Balance Sheet

As of December 31, 2018

	Dec 31, 18
Credit Cards	
PNC Credit Card	2,230.66
Total Credit Cards	<u>2,230.66</u>
Other Current Liabilities	
Community Trust Bank LOC	-2.16
4000 - Payroll Liabilities	8,268.74
Total Other Current Liabilities	<u>8,266.58</u>
Total Current Liabilities	<u>10,302.76</u>
Long Term Liabilities	
NP-Community Trust-Bldg	203,851.38
NP-Community Trust-Cadillac	7,965.22
Total Long Term Liabilities	<u>211,816.60</u>
Total Liabilities	<u>222,119.36</u>
Equity	
Opening Balance Equity	-2,219.66
32000 - Retained Earnings	15,468.54
Net Income	40,017.21
Total Equity	<u>53,266.09</u>
TOTAL LIABILITIES & EQUITY	<u><u>275,385.45</u></u>

6:28 PM

07/13/21

Cash Basis

Capital Court Authority, LLC Balance Sheet

As of December 31, 2019

	Dec 31, 19
ASSETS	
Current Assets	
Checking/Savings	
Cash Drawer - Georgetown DCBS	50.00
Cash Drawer - Frankfort	146.00
CCU - Frankfort	11,567.94
CCU SAVINGS	-666.02
Community Trust Checking	-2,925.33
Independence Bank	3,699.78
Independence Bank 2	8,424.42
Money Market II Independence	-15,004.22
Money Market Independence	9,081.94
Total Checking/Savings	14,374.51
Accounts Receivable	
Accounts Receivable	-8,524.97
Total Accounts Receivable	-8,524.97
Other Current Assets	
Undeposited Funds	377.20
Total Other Current Assets	377.20
Total Current Assets	6,226.74
Fixed Assets	
100 East Main	
100 East Main-Original Cost	213,253.29
100 East Main - Other	19,238.43
Total 100 East Main	232,491.72
Vehicles	
2012-Cadillac SRX	9,897.00
2012 Mazda CX9	14,327.00
2019 Ford Edge	30,526.00
Total Vehicles	54,750.00
Total Fixed Assets	287,241.72
TOTAL ASSETS	293,468.46

Capital Court Authority, LLC Balance Sheet

As of December 31, 2019

	Dec 31, 19
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	-14,885.72
2000 · Accounts Payable	-14,885.72
Total Accounts Payable	-14,885.72
Credit Cards	
American Express	-390.99
Chase Visa 0% Int	14,025.51
PNC Credit Card	2,230.66
Total Credit Cards	15,865.18
Other Current Liabilities	
Community Trust Bank LOC	-477.16
2110 · Direct Deposit Liabilities	-13,618.59
4000 · Payroll Liabilities	12,967.75
Total Other Current Liabilities	-1,128.00
Total Current Liabilities	-148.54
Long Term Liabilities	
NP-Community Trust-Bldg	203,851.38
NP-Community Trust-Cadillac	567.56
NP-Pinnacle Ford-Edge	32,981.04
Total Long Term Liabilities	237,399.98
Total Liabilities	237,251.44
Equity	
Member Distribution-A. Sutphin	-13,626.98
Member Distribution-K. Thompson	-31,955.64
Opening Balance Equity	-2,219.66
32000 · Retained Earnings	55,485.75
Net Income	48,533.55
Total Equity	56,217.02
TOTAL LIABILITIES & EQUITY	293,468.46

Capital Court Authority, LLC
Statement of Cash Flows
 January 2014 through December 2019

	Jan '14 - Dec 19
OPERATING ACTIVITIES	
Net Income	145,710.31
Adjustments to reconcile Net Income to net cash provided by operations:	
Accounts Receivable	-39,307.90
2000 · Accounts Payable	-6,771.49
American Express	-390.99
Chase Visa 0% Int	14,025.51
PNC Credit Card	2,230.66
Community Trust Bank LOC	-477.16
2110 · Direct Deposit Liabilities	-13,618.59
4000 · Payroll Liabilities	16,302.21
Net cash provided by Operating Activities	117,702.56
INVESTING ACTIVITIES	
100 East Main	-19,238.43
100 East Main:100 East Main-Original Cost	-213,253.29
Vehicles:2012-Cadillac SRX	-9,897.00
Vehicles:2012 Mazda CX9	-14,327.00
Vehicles:2019 Ford Edge	-30,526.00
Net cash provided by Investing Activities	-287,241.72
FINANCING ACTIVITIES	
NP-Community Trust-Bldg	203,851.38
NP-Community Trust-Cadillac	567.56
NP-Pinnacle Ford-Edge	32,981.04
Member Distribution-A. Sutphin	-13,626.98
Member Distribution-K. Thompson	-31,955.64
Opening Balance Equity	-2,219.66
32000 · Retained Earnings	-1,972.37
Net cash provided by Financing Activities	187,625.33
Net cash increase for period	18,086.17
Cash at beginning of period	-3,334.46
Cash at end of period	14,751.71

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07/13/21

Cash Basis

Capital Court Authority, LLC
Profit & Loss
 January 2014 through December 2019

Jan '14 - Dec 19

Ordinary Income/Expense		
Income		
Cash Drawer - Georgetown		-50.00
Interest Earned		55.51
Legal Fee Income		262.36
3000 · Client Income		
3001 · Background Check		350.00
3002 · Probation Fees		252,893.40
3003 · Late Fee		20,491.35
3005 · Charger Replacement		435.56
3010 · Community Service Fee		48,751.13
3020 · Drug Screening (Urine)		513,555.52
3021 · Drug Screen (Oral Fluid Lab)		390.00
3022 · Employer Drug Screens		40.00
3025 · DCBS Drug Screens		581,592.50
3030 · Home Incarceration/Bracelet		439,079.01
3035 · BA/RT Device		1,311.33
3040 · SCRAM Monitoring/Daily Rates		214,044.03
3045 · SCRAM Monitoring - Updated Rate		38,112.28
3050 · Insurance Monitoring		445,178.05
3055 · Ignition Interlock Device Monito		18,129.66
3060 · Records Check Fee		71,816.17
3070 · Test for Home Use		4,570.00
3090 · Credit Card Processing Fees		26,253.23
3095 · Set Up or Enrollment Fees		41,661.92
3099 · Rewards/Credits		-185.05
3100 · Customer Rewards		334.57
3305 · Hair Testing 5 panel		29,265.00
3307 · Hair Testing 7 Panel		415.00
3313 · Hair Testing 13 panel		2,745.00
3317 · Hair Testing 17 panel		4,180.00
3000 · Client Income - Other		-12,898.59
Total 3000 · Client Income		2,742,511.07
3115 · Rent		20,100.00
49910 · Returned Check Charges		133.00
Total Income		2,763,011.94
Gross Profit		2,763,011.94
Net Ordinary Income		2,763,011.94
Net Income		2,763,011.94

Capital Court Authority, LLC
Multi year Profit and Loss account (% of Income)
January 2014 through December 2019

	Jan - Dec 14	Jan - Dec 15	Jan - Dec 16	Jan - Dec 17	Jan - Dec 18	Jan - Dec 19	TOTAL
Ordinary Income/Expense							
Income							
Cash Drawer - Georgetown	0.00	0.00	0.00	0.00	0.00	-50.00	-50.00
Interest Earned	0.00	0.00	0.00	0.00	0.00	55.51	55.51
Legal Fee Income	0.00	0.00	20.00	0.00	225.50	0.00	245.50
3000 · Client Income	254,773.90	247,430.89	279,269.79	346,428.96	691,255.47	971,641.66	2,790,800.67
3115 · Rent	0.00	9,000.00	11,100.00	0.00	0.00	0.00	20,100.00
49910 · Returned Check Charges	100.00	3.00	30.00	0.00	0.00	0.00	133.00
Total Income	254,873.90	256,433.89	290,419.79	346,428.96	691,480.97	971,647.17	2,811,284.68
Gross Profit	254,873.90	256,433.89	290,419.79	346,428.96	691,480.97	971,647.17	2,811,284.68
Expense							
4100 · Monitoring/Testing	38,438.56	45,751.39	55,058.25	71,528.39	156,153.08	239,594.47	606,524.14
4200 · Equipment/Furniture	2,117.60	2,407.97	4,118.07	4,923.39	17,359.07	22,505.18	53,431.28
4400 · Building	17,088.21	21,426.26	20,586.56	24,586.94	14,092.47	11,712.86	109,493.30
4600 · Finance Service Charges	478.71	1,340.96	1,026.70	1,947.54	9,090.19	19,392.87	33,276.97
4700 · Insurance Expense	948.17	1,369.04	1,470.85	3,253.22	4,980.76	5,496.25	17,518.29
4800 · Meals and Entertainment	157.28	225.70	266.17	327.90	0.00	0.00	977.05
4900 · Office Supplies	5,970.32	3,909.93	5,104.09	10,658.69	19,104.25	34,892.10	79,639.38
5000 · Payroll Expenses / Wages	115,686.95	136,528.75	146,054.38	173,615.17	366,391.55	528,930.47	1,467,207.27
5001 · Reimbursement - Mileage	75.00	600.00	725.00	930.00	2,557.92	2,864.97	7,752.89
5002 · Reimbursement - Phone	0.00	515.68	450.38	356.00	4,095.00	4,648.68	10,065.74
5003 · Reimbursement - Employee Misc.	0.00	0.00	0.00	0.00	251.00	2,229.68	2,480.68
5100 · Professional Fees	874.82	1,479.46	2,634.59	1,736.05	7,815.88	10,463.90	25,004.70
5200 · Rent & Utilities	3,446.72	8,167.47	7,022.53	6,994.47	37,039.69	56,437.06	119,107.94
5300 · Versailles	3,623.00	9,029.76	9,226.77	9,076.80	0.00	0.00	30,956.33
5500 · Refunds	7,639.78	7,857.60	12,965.00	13,273.20	3,196.68	2,856.75	47,789.01
5600 · Taxes	0.00	3,610.84	288.22	22,049.74	13,374.04	4,519.25	43,842.09
5900 · Marketing	824.32	585.02	640.64	377.93	1,797.28	4,105.81	8,331.00
66900 · Reconciliation Discrepancies	-274.63	-607.70	110.24	92.42	-0.93	70.12	-610.48
69800 · Uncategorized Expenses	215.80	234.00	612.65	114.77	111.55	231.50	1,520.27

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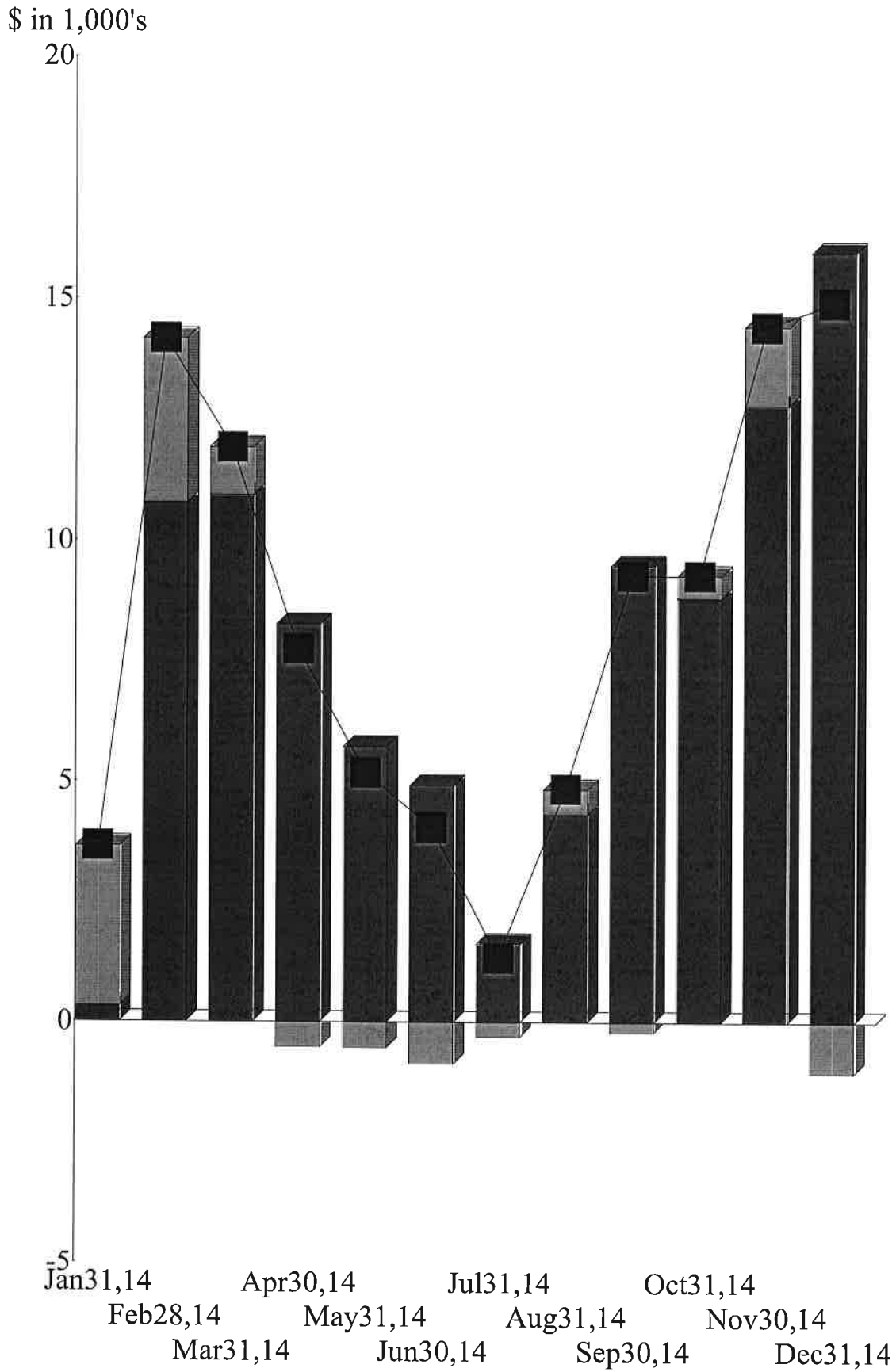
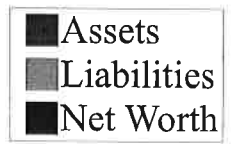
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Accrual Basis

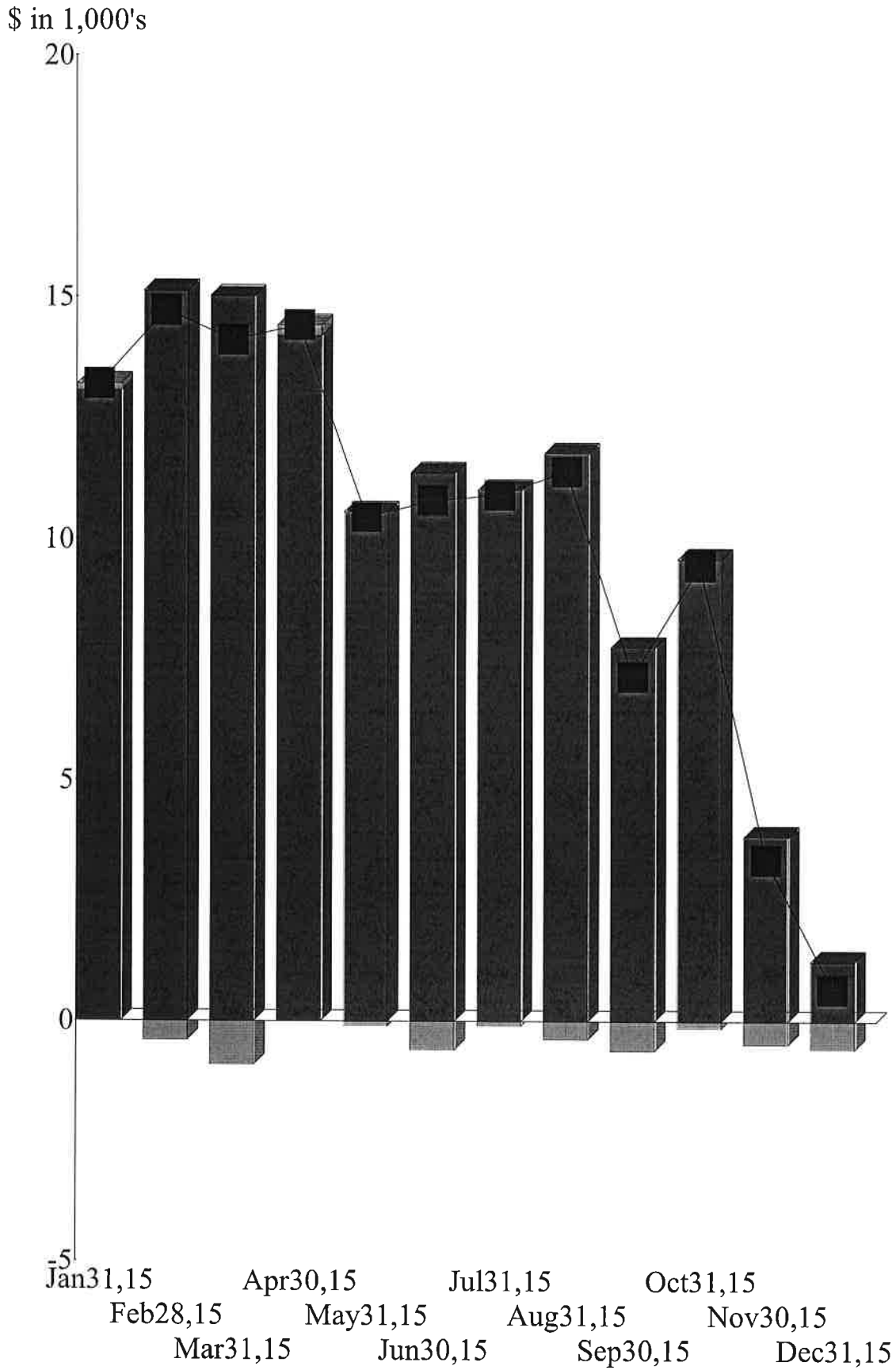
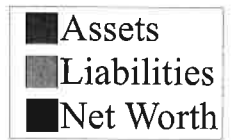
Capital Court Authority, LLC
Multi year Profit and Loss account (% of Income)
January 2014 through December 2019

	Jan - Dec 14	Jan - Dec 15	Jan - Dec 16	Jan - Dec 17	Jan - Dec 18	Jan - Dec 19	TOTAL
69810 - Bank Service Charges	53.21	72.44	3.00	-0.93	45.70	-17.42	156.00
Total Expense	197,363.82	244,504.57	268,364.09	345,841.69	657,455.18	950,934.50	2,664,463.85
Net Ordinary Income	57,510.08	11,929.32	22,055.70	587.27	34,025.79	20,712.67	146,820.83
Other Income/Expense							
Other Income							
Ask My Accountant-Income	0.00	0.00	145.92	0.00	0.00	0.00	145.92
80001 - Other Income	0.00	0.00	85.08	0.00	-199.26	0.00	-114.18
Total Other Income	0.00	0.00	231.00	0.00	-199.26	0.00	31.74
Other Expense							
80000 - Ask My Accountant	0.00	-0.23	0.00	83.00	0.00	1,059.49	1,142.26
Total Other Expense	0.00	-0.23	0.00	83.00	0.00	1,059.49	1,142.26
Net Other Income	0.00	0.23	231.00	-83.00	-199.26	-1,059.49	-1,110.52
Net Income	57,510.08	11,929.55	22,286.70	504.27	33,826.53	19,653.18	145,710.31

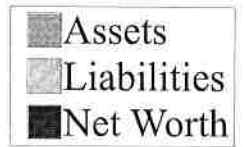
Net Worth by Month
As of December 31, 2014



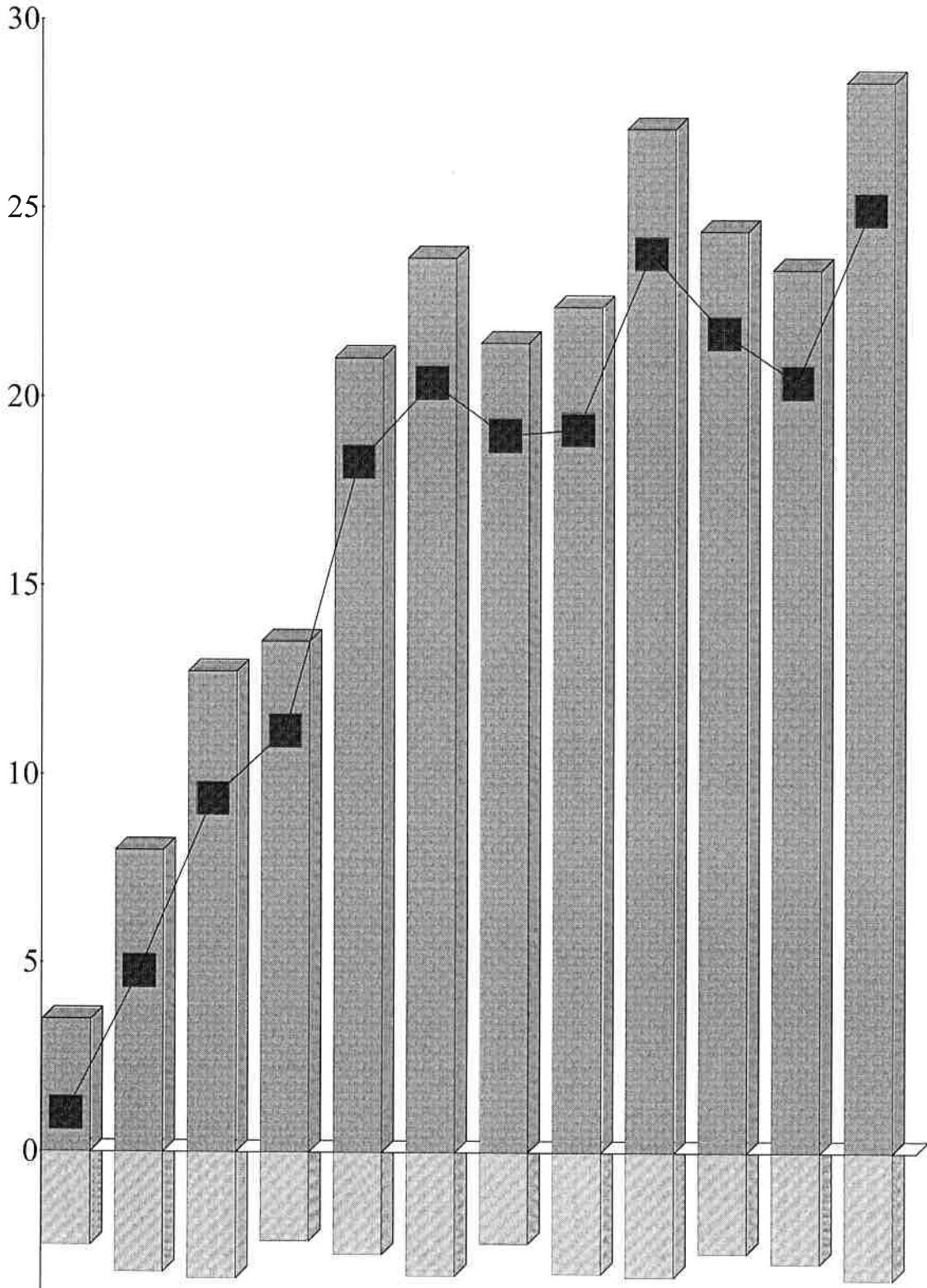
Net Worth by Month
As of December 31, 2015



Net Worth by Month As of December 31, 2016

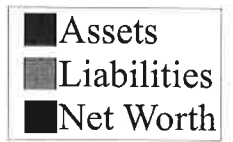


\$ in 1,000's

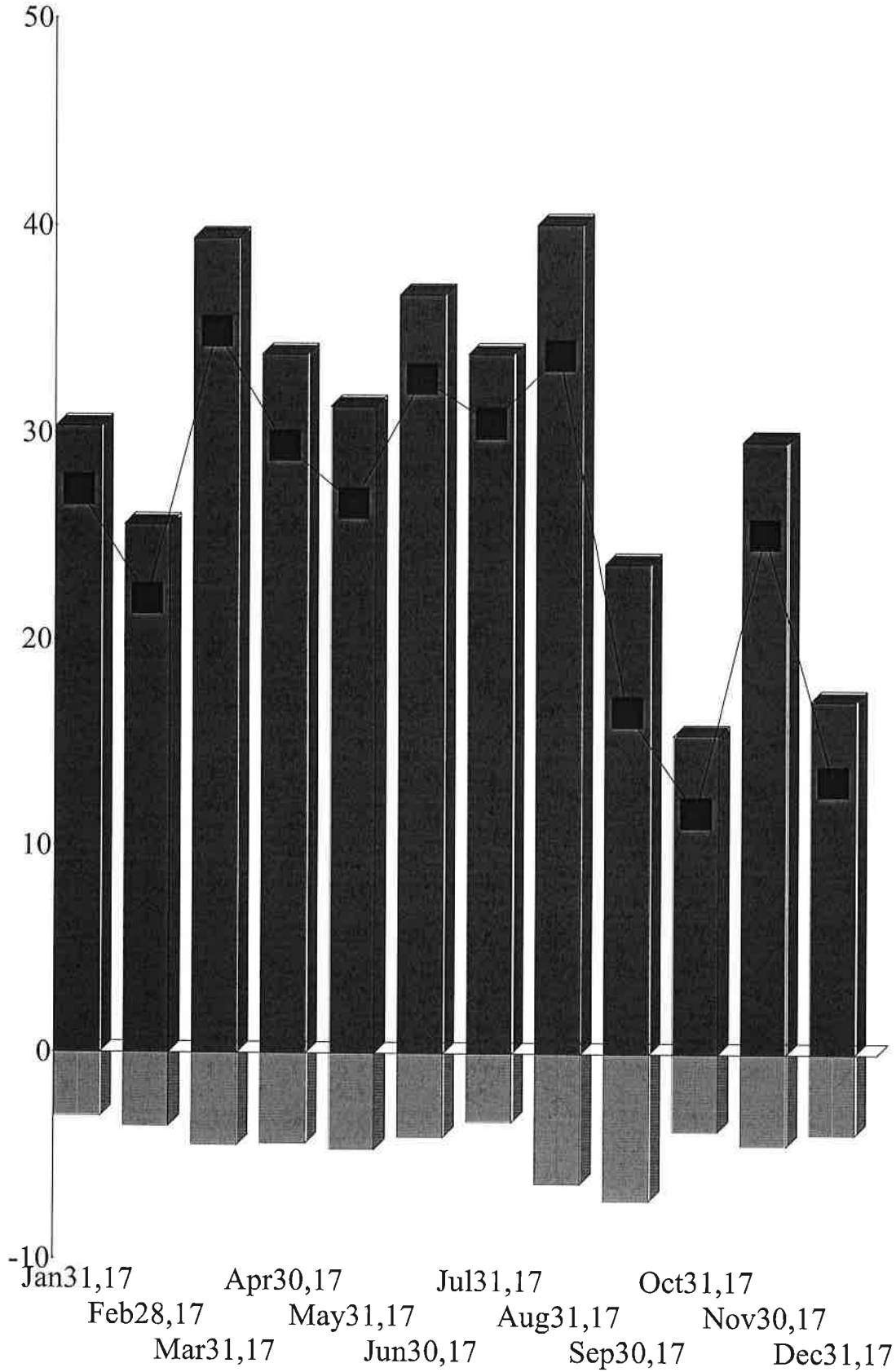


Jan 31, 16 Feb 29, 16 Mar 31, 16 Apr 30, 16 May 31, 16 Jun 30, 16 Jul 31, 16 Aug 31, 16 Sep 30, 16 Oct 31, 16 Nov 30, 16 Dec 31, 16

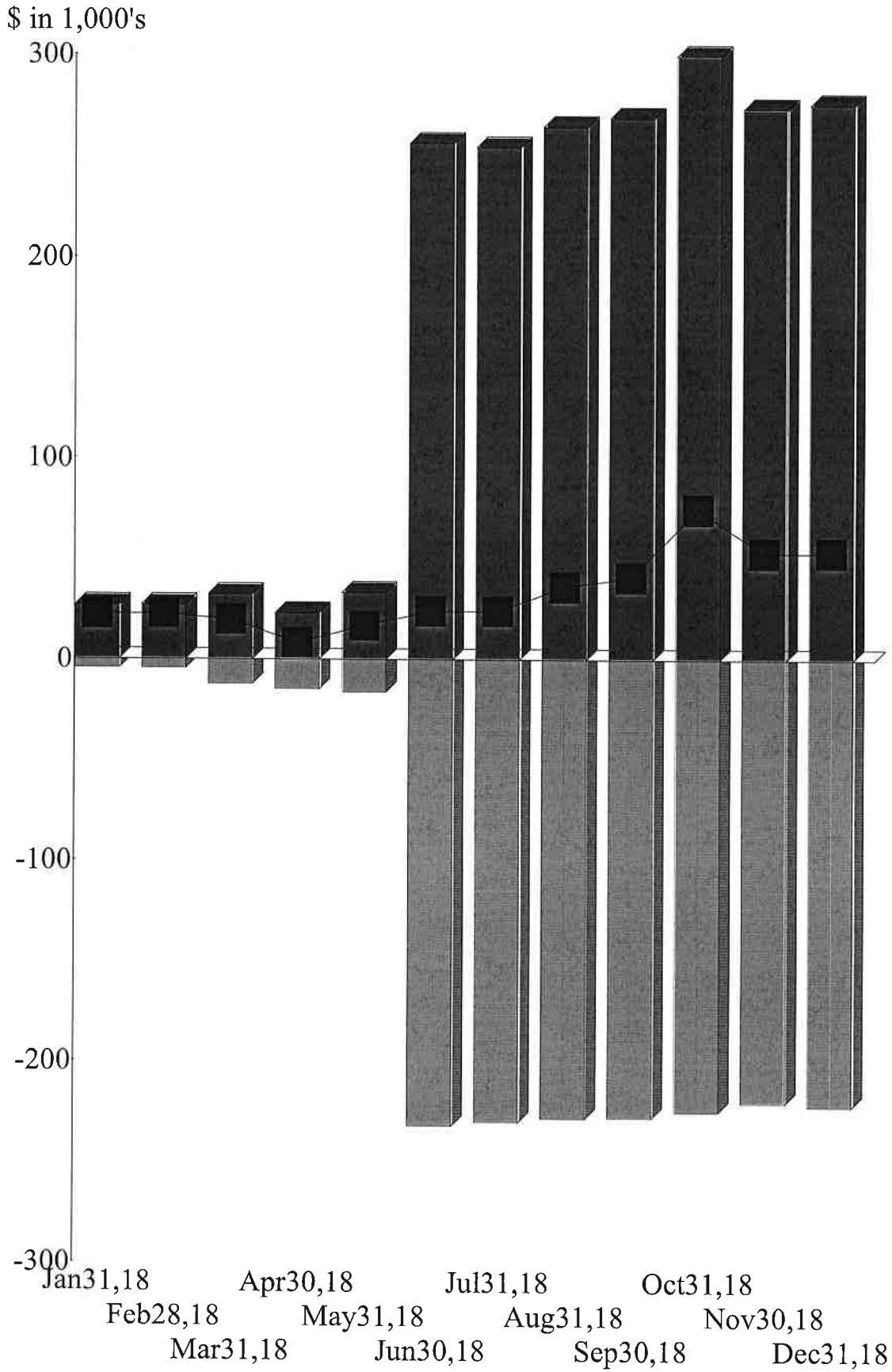
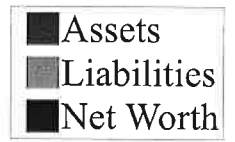
Net Worth by Month
As of December 31, 2017



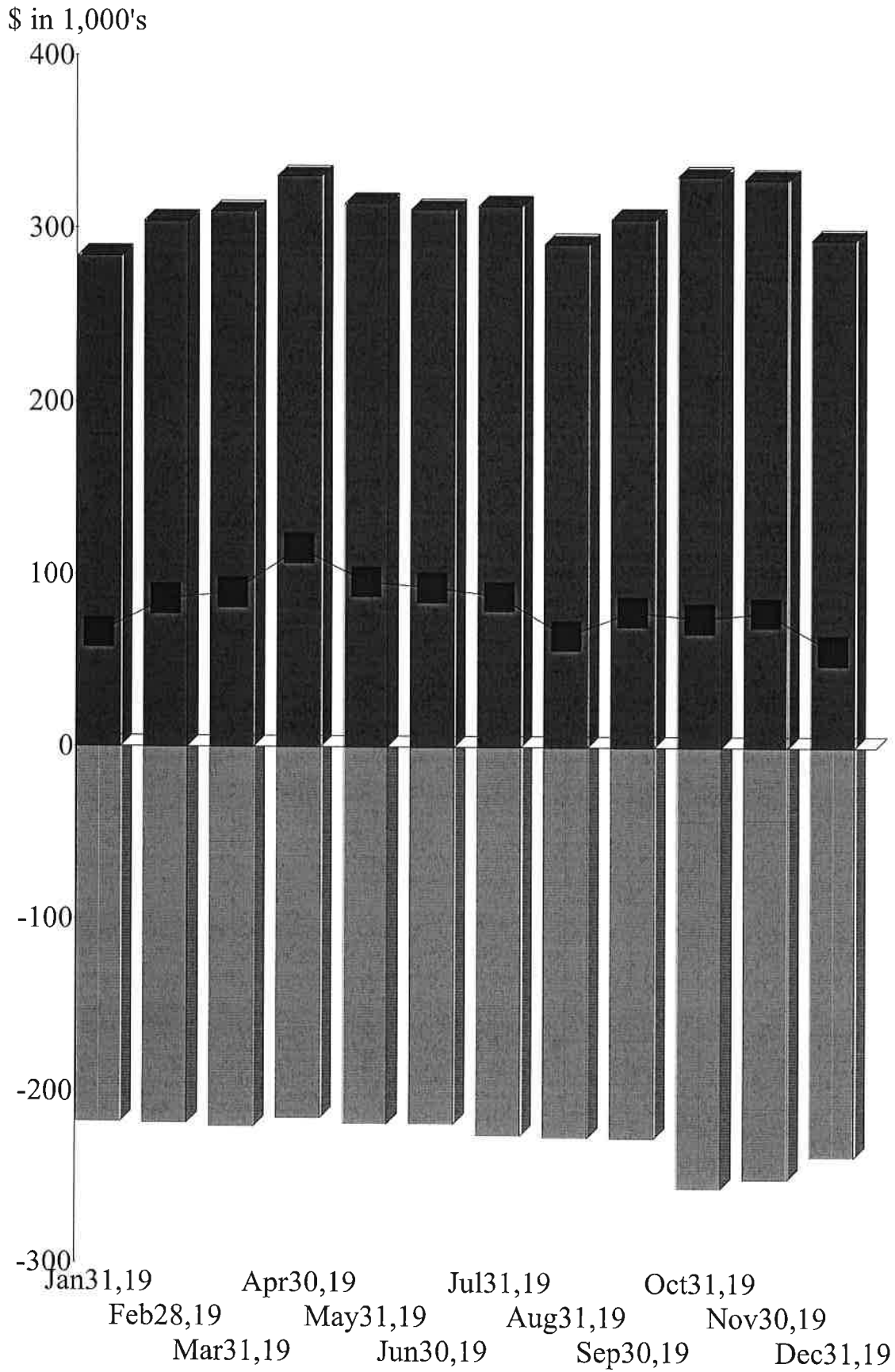
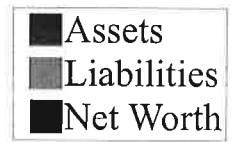
\$ in 1,000's



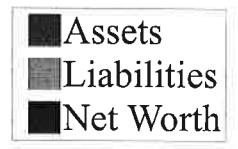
Net Worth by Month
As of December 31, 2018



Net Worth by Month
As of December 31, 2019



Net Worth by Month
As of December 31, 2020



Application for Automatic Extension of Time To File Certain Business Income Tax, Information, and Other Returns

OMB No. 1545-0233

▶ **File a separate application for each return.**
 ▶ **Go to www.irs.gov/Form7004 for instructions and the latest information.**

Print or Type	Name	Identifying number
	CAPITAL COURT AUTHORITY LLC	46-4407593
	Number, street, and room or suite no. (If P.O. box, see instructions.)	
	100 EAST MAIN STREET	
	City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).)	
	FRANKFORT KY 40601	

Note: File request for extension by the due date of the return. See instructions before completing this form.

Part I Automatic Extension for Certain Business Income Tax, Information, and Other Returns. See instructions.

1 Enter the form code for the return listed below that this application is for. 25

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041 (estate other than a bankruptcy estate)	04	Form 1120-REIT	23
Form 1041 (trust)	05	Form 1120-RIC	24
Form 1041-N	06	Form 1120S	25
Form 1041-QFT	07	Form 1120-SF	26
Form 1042	08	Form 3520-A	27
Form 1065	09	Form 8612	28
Form 1066	11	Form 8613	29
Form 1120	12	Form 8725	30
Form 1120-C	34	Form 8804	31
Form 1120-F	15	Form 8831	32
Form 1120-FSC	16	Form 8876	33
Form 1120-H	17	Form 8924	35
Form 1120-L	18	Form 8928	36
Form 1120-ND	19		

Part II All Filers Must Complete This Part

- 2 If the organization is a foreign corporation that does not have an office or place of business in the United States, check here.
- 3 If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here.
 If checked, attach a statement listing the name, address, and employer identification number (EIN) for each member covered by this application.
- 4 If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here.
- 5a The application is for calendar year 20 20, or tax year beginning _____, 20____, and ending _____, 20____.
- b **Short tax year.** If this tax year is less than 12 months, check the reason: Initial return Final return
 Change in accounting period Consolidated return to be filed Other (See instructions—attach explanation.)

6 Tentative total tax	6	0
7 Total payments and credits. See instructions	7	0
8 Balance due. Subtract line 7 from line 6. See instructions	8	0

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

2019 Tax Return
Capital Court Authority LLC
September 12, 2020

Rick R Waddle Jr CPA PLLC
17 Whitebridge Lane
Frankfort KY 40601
502-352-2950

Privacy Policy Statement of
Rick R Waddle Jr CPA PLLC
as required by the
Gramm-Leach-Bliley Act
Public Law 106-102
Effective November 12, 1999

Rick R Waddle Jr CPA PLLC collects nonpublic personal information about you, and your family, if applicable, in order to properly prepare and complete your requested tax returns, from the following sources:

Information received from you on applications, tax preparation worksheets and other documents, such as interview information forms and client organizers whether submitted by you or completed on your behalf, used in the preparation of your tax return and other tax related forms.

Information about your history with us and/or other tax preparation firms offering similar services.

Information we receive from a consumer-reporting agency in accordance with tax related products requested by you.

Rick R Waddle Jr CPA PLLC will not disclose any of your nonpublic personal information to anyone, except as permitted by law or authorized by you.

If you decide to close your account(s) or become an inactive customer, Rick R Waddle Jr CPA PLLC will adhere to the privacy policies and practices as noted above.

Rick R Waddle Jr CPA PLLC restricts access to your public and nonpublic personal information, including your account information, to those employees and partnered companies who need to know that information to provide products and/or services requested by you.

Rick R Waddle Jr CPA PLLC maintains physical, electronic, and procedural safeguards that comply with the federal standards to guard your nonpublic personal information.

We know that you have confidence in our ability to perform the services requested by you. Equally important to us is your confidence in knowing that all your personal information is safe.

Please contact us at 502-352-2950 if you have any questions or concerns regarding our policy.

Rick R Waddle Jr CPA PLLC
17 Whitebridge Lane
Frankfort KY 40601
502-352-2950

September 12, 2020

Kyle Thompson
Capital Court Authority LLC
100 East Main Street
FRANKFORT, KY 40601

The 2019 Federal S Corporation tax return for Capital Court Authority LLC will be filed electronically to the IRS. Please retain the enclosed copy for your records.

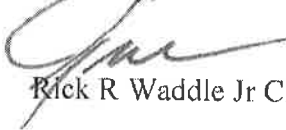
There is no overpayment or tax due on your return.

Your Kentucky state tax return is enclosed. There is a balance due of \$175.00. The return must be signed and dated by an officer of the corporation and mailed by 10/15/2020 to the address below. If you are not paying the balance due electronically, mail your payment with the return.

Kentucky Department of Revenue
P.O. Box 856910
Louisville, KY 40285-6910

If you have any questions, please call us. We appreciate the opportunity to serve you.

Sincerely,



Rick R Waddle Jr CPA

U.S. Income Tax Return for an S Corporation

Department of the Treasury
Internal Revenue Service

Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
Go to www.irs.gov/Form1120S for instructions and the latest information.

2019

For calendar year 2019 or tax year beginning

ending

A S election effective date 01/02/2014	TYPE OR PRINT	Name CAPITAL COURT AUTHORITY LLC	D Employer identification number 46-4407593
B Business activity code number (see instructions) 541190		Number, street, and room or suite no. If a P.O. box, see instructions. 100 EAST MAIN STREET	E Date incorporated 01/02/2014
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town State ZIP code FRANKFORT KY 40601	F Total assets (see instructions) \$ 266,110
		Foreign country name Foreign province/state/county Foreign postal code	

G Is the corporation electing to be an S corporation beginning with this tax year? Yes No If "Yes," attach Form 2553 if not already filed

H Check if: (1) Final return (2) Name change (3) Address change (4) Amended return (5) S election termination or revocation

I Enter the number of shareholders who were shareholders during any part of the tax year 2

J Check if corporation: (1) Aggregated activities for section 465 at-risk purposes (2) Grouped activities for section 469 passive activity purposes

Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1a Gross receipts or sales	1a 996,441	
	b Returns and allowances	1b 2,864	
	c Balance. Subtract line 1b from line 1a		1c 993,577
	2 Cost of goods sold (attach Form 1125-A)		2 244,561
	3 Gross profit. Subtract line 2 from line 1c		3 749,016
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)		4
5 Other income (loss) (see instructions—attach statement)		5	
6 Total income (loss). Add lines 3 through 5		6 749,016	
Deductions (see instructions for limitations)	7 Compensation of officers (see instructions—attach Form 1125-E)		7 155,807
	8 Salaries and wages (less employment credits)		8 297,233
	9 Repairs and maintenance		9 7,724
	10 Bad debts		10
	11 Rents		11 43,692
	12 Taxes and licenses		12 42,872
	13 Interest (see instructions)		13 7,593
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)		14 17,297
	15 Depletion (Do not deduct oil and gas depletion.)		15
	16 Advertising		16 4,674
	17 Pension, profit-sharing, etc., plans		17
	18 Employee benefit programs		18 15,525
	19 Other deductions (attach statement)		19 108,121
	20 Total deductions. Add lines 7 through 19		20 700,538
	21 Ordinary business income (loss). Subtract line 20 from line 6		21 48,478

Tax and Payments	22a Excess net passive income or LIFO recapture tax (see instructions)	22a	
	b Tax from Schedule D (Form 1120-S)	22b	
	c Add lines 22a and 22b (see instructions for additional taxes)		22c
	23a 2019 estimated tax payments and 2018 overpayment credited to 2019	23a	
	b Tax deposited with Form 7004	23b	
	c Credit for federal tax paid on fuels (attach Form 4136)	23c	
	d Reserved for future use	23d	
	e Add lines 23a through 23d		23e
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>		24
	25 Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed		25
26 Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid		26	
27 Enter amount from line 26: Credited to 2020 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>		27	

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer	Date	Title
----------------------	------	-------

May the IRS discuss this return with the preparer shown below? See instructions Yes No

Paid Preparer Use Only

Print/Type preparer's name RICK R WADDLE JR CPA	Preparer's signature RICK R WADDLE JR CPA	Date 03/14/2020	Check <input type="checkbox"/> if self-employed	PTIN P01387041
Firm's name RICK R WADDLE JR CPA PLLC	Firm's EIN 03-0376671	Phone no. 502-352-2950		
Firm's address 17 WHITEBRIDGE LANE	City FRANKFORT	State KY	ZIP code 40601	

Schedule B Other Information (see instructions)

- 1 Check accounting method: a Cash b Accrual
 c Other (specify) _____
- 2 See the instructions and enter the:
 a Business activity COURT MONITORING b Product or service COURT MONITORING SERV
- 3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation
- 4 At the end of the tax year, did the corporation:
 a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below

Yes	No
	X
	X

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made
			0.000	
			0.000	
			0.000	
			0.000	

- b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below

Yes	No
	X

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
				0.000
				0.000
				0.000
				0.000

- 5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock?

Yes	No
	X

If "Yes," complete lines (i) and (ii) below.
 (i) Total shares of restricted stock
 (ii) Total shares of non-restricted stock

- b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments?

Yes	No
	X

If "Yes," complete lines (i) and (ii) below.
 (i) Total shares of stock outstanding at the end of the tax year
 (ii) Total shares of stock outstanding if all instruments were executed

- 6 Has this corporation filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?

Yes	No
	X

- 7 Check this box if the corporation issued publicly offered debt instruments with original issue discount
 If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.

Yes	No
	<input type="checkbox"/>

- 8 If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. See instructions \$ _____

- 9 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions

Yes	No
X	

- 10 Does the corporation satisfy one or more of the following? See instructions

Yes	No
X	

- a The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense.
 b The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the corporation has business interest expense.
 c The corporation is a tax shelter and the corporation has business interest expense.
 If "Yes," complete and attach Form 8990.

- 11 Does the corporation satisfy both of the following conditions?

Yes	No
X	

- a The corporation's total receipts (see instructions) for the tax year were less than \$250,000.
 b The corporation's total assets at the end of the tax year were less than \$250,000.
 If "Yes," the corporation is not required to complete Schedules L and M-1.

Schedule B Other Information (see instructions) (continued)		Yes	No
12	During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction ▶ \$		X
13	During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
14a	Did the corporation make any payments in 2019 that would require it to file Form(s) 1099? b If "Yes," did the corporation file or will it file required Form(s) 1099?		X
15	Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 14 ▶ \$		X

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	48,478
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss) 3a		
	b Expenses from other rental activities (attach statement) 3b		
	c Other net rental income (loss). Subtract line 3b from line 3a 3c		
	4 Interest income 4		
	5 Dividends: a Ordinary dividends 5a		
	b Qualified dividends 5b		
	6 Royalties 6		
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S)) 7		
8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S)) 8a			
b Collectibles (28%) gain (loss) 8b			
c Unrecaptured section 1250 gain (attach statement) 8c			
9 Net section 1231 gain (loss) (attach Form 4797) 9			
10 Other income (loss) (see instructions) Type ▶	10		
Deductions	11 Section 179 deduction (attach Form 4562) 11		
	12a Charitable contributions 12a		
	b Investment interest expense 12b		
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶ 12c(2)		
d Other deductions (see instructions) Type ▶ 12d			
Credits	13a Low-income housing credit (section 42(j)(5)) 13a		
	b Low-income housing credit (other) 13b		
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) 13c		
	d Other rental real estate credits (see instructions) Type ▶ 13d		
	e Other rental credits (see instructions) Type ▶ 13e		
	f Biofuel producer credit (attach Form 6478) 13f		
	g Other credits (see instructions) Type ▶ 13g		
Foreign Transactions	14a Name of country or U.S. possession ▶		
	b Gross income from all sources 14b		
	c Gross income sourced at shareholder level 14c		
	Foreign gross income sourced at corporate level		
	d Reserved for future use 14d		
	e Foreign branch category 14e		
	f Passive category 14f		
	g General category 14g		
	h Other (attach statement) 14h		
	Deductions allocated and apportioned at shareholder level		
	i Interest expense 14i		
	j Other 14j		
	Deductions allocated and apportioned at corporate level to foreign source income		
	k Reserved for future use 14k		
	l Foreign branch category 14l		
	m Passive category 14m		
	n General category 14n		
	o Other (attach statement) 14o		
Other information			
p Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued ▶ 14p			
q Reduction in taxes available for credit (attach statement) 14q			
r Other foreign tax information (attach statement)			

Schedule K		Shareholders' Pro Rata Share Items (continued)	Total amount	
Alternative Minimum Tax (AMT) Items	15a	Post-1986 depreciation adjustment	15a	
	b	Adjusted gain or loss	15b	
	c	Depletion (other than oil and gas)	15c	
	d	Oil, gas, and geothermal properties—gross income	15d	
	e	Oil, gas, and geothermal properties—deductions	15e	
	f	Other AMT items (attach statement)	15f	
Items Affecting Shareholder Basis	16a	Tax-exempt interest income	16a	
	b	Other tax-exempt income	16b	
	c	Nondeductible expenses	16c	680
	d	Distributions (attach statement if required) (see instructions)	16d	48,670
	e	Repayment of loans from shareholders	16e	
Other Information	17a	Investment income	17a	
	b	Investment expenses	17b	
	c	Dividend distributions paid from accumulated earnings and profits	17c	
	d	Other items and amounts (attach statement)		
Reconciliation	18	Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14p	18	48,478

Schedule L		Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)		
1	Cash				19,776		
2a	Trade notes and accounts receivable			41,028			
b	Less allowance for bad debts				41,028		
3	Inventories						
4	U.S. government obligations						
5	Tax-exempt securities (see instructions)						
6	Other current assets (attach statement)						
7	Loans to shareholders						
8	Mortgage and real estate loans						
9	Other investments (attach statement)						
10a	Buildings and other depreciable assets	223,879		235,695			
b	Less accumulated depreciation	13,092	210,787	30,389	205,306		
11a	Depletable assets						
b	Less accumulated depletion						
12	Land (net of any amortization)						
13a	Intangible assets (amortizable only)						
b	Less accumulated amortization						
14	Other assets (attach statement)						
15	Total assets		210,787		266,110		
Liabilities and Shareholders' Equity							
16	Accounts payable						
17	Mortgages, notes, bonds payable in less than 1 year						
18	Other current liabilities (attach statement)						
19	Loans from shareholders						
20	Mortgages, notes, bonds payable in 1 year or more				202,211		
21	Other liabilities (attach statement)						
22	Capital stock						
23	Additional paid-in capital						
24	Retained earnings		64,771		63,899		
25	Adjustments to shareholders' equity (attach statement)						
26	Less cost of treasury stock						
27	Total liabilities and shareholders' equity		64,771		266,110		

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note: The corporation may be required to file Schedule M-3. See instructions.

<p>1 Net income (loss) per books 47,798</p> <p>2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize) -----</p> <p>3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14p (itemize):</p> <p> a Depreciation \$ -----</p> <p> b Travel and entertainment \$ 680 -----</p> <p>4 Add lines 1 through 3 48,478</p>		<p>5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):</p> <p> a Tax-exempt interest \$ -----</p> <p>6 Deductions included on Schedule K, lines 1 through 12 and 14p, not charged against book income this year (itemize):</p> <p> a Depreciation \$ -----</p> <p>7 Add lines 5 and 6 680</p> <p>8 Income (loss) (Schedule K, line 18). Subtract line 7 from line 4 48,478</p>
---	--	---

Schedule M-2 Analysis of Accumulated Adjustments Account, Shareholders' Undistributed Taxable Income Previously Taxed, Accumulated Earnings and Profits, and Other Adjustments Account (see instructions)

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1 Balance at beginning of tax year	64,771			
2 Ordinary income from page 1, line 21	48,478			
3 Other additions				
4 Loss from page 1, line 21				
5 Other reductions	680			
6 Combine lines 1 through 5	112,569			
7 Distributions	48,670			
8 Balance at end of tax year. Subtract line 7 from line 6	63,899			

Final K-1

Amended K-1

Schedule K-1
(Form 1120-S)

Department of the Treasury
Internal Revenue Service

2019

For calendar year 2019, or tax year

beginning ending

Shareholder's Share of Income, Deductions,
Credits, etc.

▶ See back of form and separate instructions.

Part III Shareholder's Share of Current Year Income,
Deductions, Credits, and Other Items

1	Ordinary business income (loss)	13	Credits
	24,239		
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
11	Section 179 deduction	16	Items affecting shareholder basis
		C	340
12	Other deductions	D	24,799
		17	Other information
		V	
18	<input type="checkbox"/> More than one activity for at-risk purposes*		
19	<input type="checkbox"/> More than one activity for passive activity purposes*		

Part I Information About the Corporation

A Corporation's employer identification number
46-4407593

B Corporation's name, address, city, state, and ZIP code
CAPITAL COURT AUTHORITY LLC
100 EAST MAIN STREET
FRANKFORT KY 40601

C IRS Center where corporation filed return
E-FILE

Part II Information About the Shareholder

D Shareholder's identifying number
403-08-0327

E Shareholder's name, address, city, state, and ZIP code
KYLE THOMPSON
157 NORTHWOOD
FRANKFORT KY 40601

F Shareholder's percentage of stock ownership for tax year. 50.000

For IRS Use Only

* See attached statement for additional information.

you

US 1120S

K-1 Attachment

2019

Shareholder: KYLE THOMPSON

50.000 %

ID: 403-08-0327

9a Unrecaptured 1250 gain included in line 9 and 10b			
10 Other income (loss)			
a Other portfolio income (loss)			
b Involuntary conversions			
Form 4684, gain at 28%			
c 1256 contracts and straddles			
d Mining exploration costs and recapture			
e Section 951A income			
f Section 965(a) inclusion			
g Subpart F income other than sections 951A and 965 inclusion			
h Other income (loss). Type and amount			
11a Section 179 deduction for ordinary income or loss			
b Section 179 deduction for rental real estate income or loss			
12 Other deductions			
a Cash contributions-50%		i Deductions - portfolio (other)	
b Cash contributions-30%		m Preproductive period expenses	
c Noncash contributions-50%		n Commercial revitalization deduction	
d Noncash contributions-30%		from rental real estate activities	
e Cap. gain property to a 50% org.-30%		o Reforestation expense deduction	
f Capital gain property-20%		p Reserved	
g Contributions 100%		q Reserved	
h Investment interest expense		r Reserved	
i Deductions - royalty income		s Other deductions	
j Section 59(e)(2) expenditures		Form 4684, line 32	
k Section 965(c) deduction			
13 Credits and credit recapture			
a Low-income housing credit - section 42(j)(5), from pre-2008 buildings			
b Low-income housing credit - other, from pre-2008 buildings			
c Low-income housing credit - section 42(j)(5), from post-2007 buildings			
d Low-income housing credit - other, from post-2007 buildings			
e Qualified rehabilitation expenditures, rental real estate			
f Other rental real estate credits			
g Other rental credits			
h Undistributed capital gains credit			
i Alcohol and cellulosic biofuel fuels credit			
j Work opportunity credit			
k Disabled access credit			
l Empowerment zone and renewal community employment credit			
m Credit for increasing research activities		If Checked, credit is from an eligible small business: <input type="checkbox"/>	
n Credit for employer social security and Medicare taxes			
o Backup withholding			
p Other credits - see information below			
Reserved			
Form 3468, line 9 and 13, credit from cooperatives			
Form 5884B			
Form 8820			
Form 8835			
Form 8845			
Form 8874			
Form 8881			
Form 8882			
Form 8908			
Form 8910			
Form 8936			
Form 8941			
Other credits			

Shareholder: KYLE THOMPSON

50.000 %

ID: 403-08-0327

14	Foreign transactions	
	a Name of foreign country or U.S. possession	
	b Gross income from all sources	
	c Gross income sourced at shareholder level	
	Foreign gross income sourced at corporate level	
	d RESERVED.	
	e Foreign branch category	
	f Passive category	
	g General category	
	h Other	
	Deductions allocated and apportioned at shareholder level	
	i Interest expense	
	j Other	
	Deductions allocated and apportioned at corporate level to foreign source income	
	k RESERVED.	
	l Foreign branch category	
	m Passive category	
	n General category	
	o Other	
	Other information	
	p Total foreign taxes paid	
	q Total foreign taxes accrued	
	r Reduction in taxes available for credit	
	Other foreign tax information	
	s Foreign trading gross receipts	
	t Extraterritorial income exclusion	
	u Section 965 information	
	v Other foreign transactions	
15	Alternative minimum tax (AMT) items	
	a Post-1986 depreciation adjustment	
	Ordinary income _____ Rental _____	
	b Adjusted gain or loss	
	Ordinary income _____ Rental _____	
	c Depletion other than oil and gas	
	d Oil, gas, or geothermal properties - gross income	
	e Oil, gas, or geothermal properties - deductions	
	f Other AMT items. Pre-1987 depreciation adjustment included in line 15f	
	Ordinary income _____ Rental _____	
	Other - type _____ Amount _____	
16	Items affecting shareholder basis	
	a Tax-exempt interest income	
	b Other tax-exempt income	
	c Nondeductible expenses	340
	d Distributions	24,799
	e Repayment of loans from shareholders	

Shareholder: KYLE THOMPSON

50.000 %

ID: 403-08-0327

17 Other information

- a Investment income
- b Investment expenses
- c Qualified rehabilitation expenditures, other than rental real estate
- d Basis of energy property
- e Recapture of low-income housing credit, section 42(j)(5) applies
- f Rcapture of low-income housing credit - other
- g Recapture of investment credit
- h Recapture of other credits
- i Look-back interest - completed long-term contracts
- j Look-back interest - income forecast method
- k Dispositions of property with section 179 deductions
- l Recapture of section 179 deduction
- m Section 453(l)(3) information
- n Section 453A(c) information
- o Section 1260(b) information
- p Interest allocable to production expenditures
- q CCF nongualified withdrawels
- r Depletion information - oil and gas
- s Reserved
- t Section 108(j) information
- u Net investment income
- v Section 199A information
- Section 199A income
- Section 199A W-2 wages
- Section 199A unadjusted basis
- Section 199A REIT dividends
- Section 199A PTP income

24,239
226,520

Is this a specified service trade or business? Yes No

- aa Excess taxable income
- ab Excess business interest income
- ac Other information
- a
- b
- c
- d
- e
- f
- g
- h

Shareholder: KYLE THOMPSON

50.000 %

ID: 403-08-0327

Basis Computation

		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Totals for year	Stock basis	Loan basis	Loan face amount
A	Beginning balance				32,384		
B	Contributions to capital						
C	New loans to the corporation						
D	Ordinary income			24,239			
E	Separately stated income				24,239		
F	Subtotal				56,623		
G	Distributions			24,799	24,799		
H	Loan repayments - principal						
I	Nondeductible expenses			340	340		
J	Ordinary loss						
K	Separately stated losses and deductions						
L	Other adjustments						
M	Ending balance				31,484		

Supplemental information for page 2, lines 17c and 17d

17c Qualified rehabilitation expenses, other than rental real estate			
Rehabilitation credit (Part III)			
Form 3468, line 11e, qualified rehabilitation expenditures			
Form 3468, line 11f, qualified rehabilitation expenditures			
Form 3468, line 11g, qualified rehabilitation expenditures			
17d Basis of energy property			
Qualifying advanced coal project credit			
Form 3468, line 5a, qualified investment			
Form 3468, line 5b, qualified investment			
Form 3468, line 5c, qualified investment			
Qualifying gasification project credit			
Form 3468, line 6a, qualified investment			
Form 3468, line 6b, qualified investment			
Qualifying advanced energy project credit			
Form 3468, line 7, qualified investment			
Reserved			
Energy credit (Part III)			
Form 3468, line 12a, qualified basis		Form 3468, line 12n, kilowatt capacity	
Form 3468, line 12b, qualified basis		Form 3468, line 12p, qualified basis	
Form 3468, line 12c, qualified basis		Form 3468, line 12s, qualified basis	
Form 3468, line 12d, qualified basis		Form 3468, line 12u, qualified basis	
Form 3468, line 12e, kilowatt capacity		Form 3468, line 12v, qualified basis	
Form 3468, line 12g, qualified basis		Form 3468, line 12w, qualified basis	
Form 3468, line 12h, kilowatt capacity		Form 3468, line 12x, qualified basis	
Form 3468, line 12j, qualified basis		Form 3468, line 12y, qualified basis	
Form 3468, line 12k, kilowatt capacity		Form 3468, line 12z, qualified basis	
Form 3468, line 12m, qualified basis		Form 3468, line 12aa, qualified basis	

Final K-1 Amended K-1

Schedule K-1
(Form 1120-S)
Department of the Treasury
Internal Revenue Service

2019

For calendar year 2019, or tax year

beginning ending

Shareholder's Share of Income, Deductions, Credits, etc.

▶ See back of form and separate instructions.

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss)	13	Credits
	24,239		
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
11	Section 179 deduction	16	Items affecting shareholder basis
		C	340
12	Other deductions	D	23,871
		17	Other information
		V	
18	<input type="checkbox"/> More than one activity for at-risk purposes*		
19	<input type="checkbox"/> More than one activity for passive activity purposes*		
* See attached statement for additional information.			

Part I Information About the Corporation

A Corporation's employer identification number
46-4407593

B Corporation's name, address, city, state, and ZIP code
CAPITAL COURT AUTHORITY LLC
100 EAST MAIN STREET
FRANKFORT KY 40601

C IRS Center where corporation filed return
E-FILE

Part II Information About the Shareholder

D Shareholder's identifying number
407-04-3277

E Shareholder's name, address, city, state, and ZIP code
ASHLEY SUTPHIN
735 WINTERHAVEN
FRANKFORT KY 40601

F Shareholder's percentage of stock ownership for tax year. 50.000

For IRS Use Only

you

US 1120S

K-1 Attachment

2019

Shareholder: ASHLEY SUTPHIN

50.000 %

ID: 407-04-3277

9a Unrecaptured 1250 gain included in line 9 and 10b			
10 Other income (loss)			
a Other portfolio income (loss)			
b Involuntary conversions			
Form 4684, gain at 28%			
c 1256 contracts and straddles			
d Mining exploration costs and recapture			
e Section 951A income			
f Section 965(a) inclusion			
g Subpart F income other than sections 951A and 965 inclusion			
h Other income (loss). Type and amount			
11a Section 179 deduction for ordinary income or loss			
b Section 179 deduction for rental real estate income or loss			
12 Other deductions		l Deductions - portfolio (other)	
a Cash contributions-50%		m Preproductive period expenses	
b Cash contributions-30%		n Commercial revitalization deduction	
c Noncash contributions-50%		from rental real estate activities	
d Noncash contributions-30%		o Reforestation expense deduction	
e Cap. gain property to a 50% org.-30%		p Reserved	
f Capital gain property-20%		q Reserved	
g Contributions 100%		r Reserved	
h Investment interest expense		s Other deductions	
i Deductions - royalty income		Form 4684, line 32	
j Section 59(e)(2) expenditures			
k Section 965(c) deduction			
13 Credits and credit recapture			
a Low-income housing credit - section 42(j)(5), from pre-2008 buildings			
b Low-income housing credit - other, from pre-2008 buildings			
c Low-income housing credit - section 42(j)(5), from post-2007 buildings			
d Low-income housing credit - other, from post-2007 buildings			
e Qualified rehabilitation expenditures, rental real estate			
f Other rental real estate credits			
g Other rental credits			
h Undistributed capital gains credit			
i Alcohol and cellulosic biofuel fuels credit			
j Work opportunity credit			
k Disabled access credit			
l Empowerment zone and renewal community employment credit			
m Credit for increasing research activities		If Checked, credit is from an eligible small business: <input type="checkbox"/>	
n Credit for employer social security and Medicare taxes			
o Backup withholding			
p Other credits - see information below			
Reserved			
Form 3468, line 9 and 13, credit from cooperatives			
Form 5884B			
Form 8820			
Form 8835			
Form 8845			
Form 8874			
Form 8881			
Form 8882			
Form 8908			
Form 8910			
Form 8936			
Form 8941			
Other credits			

Shareholder: ASHLEY SUTPRIN

50.000 %

ID: 407-04-3277

14	Foreign transactions	
a	Name of foreign country or U.S. possession	
b	Gross income from all sources	
c	Gross income sourced at shareholder level	
	Foreign gross income sourced at corporate level	
d	RESERVED	
e	Foreign branch category	
f	Passive category	
g	General category	
h	Other	
	Deductions allocated and apportioned at shareholder level	
i	Interest expense	
j	Other	
	Deductions allocated and apportioned at corporate level to foreign source income	
k	RESERVED	
l	Foreign branch category	
m	Passive category	
n	General category	
o	Other	
	Other information	
p	Total foreign taxes paid	
q	Total foreign taxes accrued	
r	Reduction in taxes available for credit	
	Other foreign tax information	
s	Foreign trading gross receipts	
t	Extraterritorial income exclusion	
u	Section 965 information	
v	Other foreign transactions	
15	Alternative minimum tax (AMT) items	
a	Post-1986 depreciation adjustment	
	Ordinary income	Rental
b	Adjusted gain or loss	
	Ordinary income	Rental
c	Depletion other than oil and gas	
d	Oil, gas, or geothermal properties - gross income	
e	Oil, gas, or geothermal properties - deductions	
f	Other AMT items. Pre-1987 depreciation adjustment included in line 15f	
	Ordinary income	Rental
	Other - type	Amount
16	Items affecting shareholder basis	
a	Tax-exempt interest income	
b	Other tax-exempt income	
c	Nondeductible expenses	340
d	Distributions	23,871
e	Repayment of loans from shareholders	

Shareholder: ASHLEY SUTPHIN

50.000 %

ID: 407-04-3277

17 Other information

- a Investment income
- b Investment expenses
- c Qualified rehabilitation expenditures, other than rental real estate
- d Basis of energy property
- e Recapture of low-income housing credit, section 42(j)(5) applies
- f Recapture of low-income housing credit - other
- g Recapture of investment credit
- h Recapture of other credits
- i Look-back interest - completed long-term contracts
- j Look-back interest - income forecast method
- k Dispositions of property with section 179 deductions
- l Recapture of section 179 deduction
- m Section 453(j)(3) information
- n Section 453A(c) information
- o Section 1260(b) information
- p Interest allocable to production expenditures
- q CCF nonqualified withdrawals
- r Depletion information - oil and gas
- s Reserved
- t Section 108(i) information
- u Net investment income
- v Section 199A information
- Section 199A income 24,239
- Section 199A W-2 wages 226,520
- Section 199A unadjusted basis
- Section 199A REIT dividends
- Section 199A PTP income
- Is this a specified service trade or business? Yes No

24,239
226,520

- aa Excess taxable income
- ab Excess business interest income
- ac Other information
- a
- b
- c
- d
- e
- f
- g
- h

Shareholder: ASHLEY SUTPHIN

50.000 %

ID: 407-04-3277

Basis Computation

<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Totals for year	Stock basis	Loan basis	Loan face amount
A Beginning balance		32,384		
B Contributions to capital				
C New loans to the corporation				
D Ordinary income	24,239			
E Separately stated income		24,239		
F Subtotal		56,623		
G Distributions	23,871	23,871		
H Loan repayments - principal				
I Nondeductible expenses	340	340		
J Ordinary loss				
K Separately stated losses and deductions				
L Other adjustments				
M Ending balance		32,412		

Supplemental information for page 2, lines 17c and 17d

17c Qualified rehabilitation expenses, other than rental real estate				
Rehabilitation credit (Part III)				
	Form 3468, line 11e, qualified rehabilitation expenditures			
	Form 3468, line 11f, qualified rehabilitation expenditures			
	Form 3468, line 11g, qualified rehabilitation expenditures			
17d Basis of energy property				
Qualifying advanced coal project credit				
	Form 3468, line 5a, qualified investment			
	Form 3468, line 5b, qualified investment			
	Form 3468, line 5c, qualified investment			
Qualifying gasification project credit				
	Form 3468, line 6a, qualified investment			
	Form 3468, line 6b, qualified investment			
Qualifying advanced energy project credit				
	Form 3468, line 7, qualified investment			
Reserved				
Energy credit (Part III)				
	Form 3468, line 12a, qualified basis		Form 3468, line 12n, kilowatt capacity	
	Form 3468, line 12b, qualified basis		Form 3468, line 12p, qualified basis	
	Form 3468, line 12c, qualified basis		Form 3468, line 12s, qualified basis	
	Form 3468, line 12d, qualified basis		Form 3468, line 12u, qualified basis	
	Form 3468, line 12e, kilowatt capacity		Form 3468, line 12v, qualified basis	
	Form 3468, line 12g, qualified basis		Form 3468, line 12w, qualified basis	
	Form 3468, line 12h, kilowatt capacity		Form 3468, line 12x, qualified basis	
	Form 3468, line 12j, qualified basis		Form 3468, line 12y, qualified basis	
	Form 3468, line 12k, kilowatt capacity		Form 3468, line 12z, qualified basis	
	Form 3468, line 12m, qualified basis		Form 3468, line 12aa, qualified basis	



See instructions. Taxable period beginning JAN 01, 20 19, and ending DEC 31, 20 19.

A LLET Exemption Code Enter Code B Income Tax Exemption Code Enter Code C Number of Shareholders (Attach K-1s) 2 Number of QSSSs included in This Return (Attach Schedule)	D Federal Identification Number <u>46-4407593</u> Name of S Corporation <u>CAPITAL COURT AUTHORITY LLC</u> Number and Street <u>100 EAST MAIN STREET</u> City <u>FRANKFORT</u> State <u>KY</u> ZIP Code <u>40601</u> Telephone Number _____ F Check if applicable: <input type="checkbox"/> Qualified investment partnership <input type="checkbox"/> Final return (Complete Part IV) <input type="checkbox"/> Initial return <input type="checkbox"/> Short-period return (Complete Part IV) <input type="checkbox"/> LLC <input type="checkbox"/> Change of accounting period <input type="checkbox"/> Amended return (Complete Part V)	E Kentucky Corporation/LLET Account Number (Required) <u>087371</u> <input type="checkbox"/> Change of Name Taxable Year Ending <u>12</u> <u>19</u> State and Date of Incorporation <u>KY</u> <u>01/02/2014</u> Principal Business Activity in KY <u>COURT MONITORIN</u> NAICS Code Number in KY (See www.census.gov) <u>541190</u> G Provider 3-Factor Apporntment Code
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PART I — LLET COMPUTATION			PART II — INCOME TAX COMPUTATION		
1 Schedule L, Section D, line 1 (Page 6)	1	175 00	1 Excess net passive income tax	1	00
2 Tax credit recapture	2	00	2 Built-in gains tax	2	00
3 Total (add lines 1 and 2)	3	175 00	3 Tax installment on LIFO recapture	3	00
4 Nonrefundable LLET credit from Kentucky Schedule(s) K-1	4	00	4 Total (add lines 1 through 3)	4	00
5 Nonrefundable tax credits (attach Schedule TCS)	5	00	5 Estimated tax payments	5	00
6 LLET liability (greater of line 3 less lines 4 and 5 or \$175 minimum)	6	175 00	6 Extension payment	6	00
7 Estimated tax payments	7	00	7 Prior year's tax credit	7	00
8 Certified rehabilitation tax credit	8	00	8 LLET overpayment from Part I, line 17	8	00
9 Film industry tax credit	9	00	9 Income tax paid on original return	9	00
10 Extension payment	10	00	10 Income tax overpayment on original return	10	00
11 Prior year's tax credit	11	00	11 Income tax due (lines 4 and 10 less lines 5 through 9)	11	00
12 Income tax overpayment from Part II, line 13	12	00	12 Income tax overpayment (lines 5 through 9 less lines 4 and 10)	12	00
13 LLET paid on original return	13	00	13 Credited to 2019 LLET	13	00
14 LLET overpayment on original return	14	00	14 Credited to 2019 interest	14	00
15 LLET due (lines 6 and 14 less lines 7 through 13)	15	175 00	15 Credited to 2019 penalty	15	00
16 LLET overpayment (lines 7 through 13 less lines 6 and 14)	16	00	16 Credited to 2020 corporation income tax	16	00
17 Credited to 2019 income tax	17	00	17 Amount to be refunded	17	00
18 Credited to 2019 interest	18	00			
19 Credited to 2019 penalty	19	00			
20 Credited to 2020 LLET	20	00			
21 Amount to be refunded	21	00			

TAX PAYMENT SUMMARY				OFFICIAL USE ONLY	
LLET	INCOME				
1 LLET due (Part I, Line 15) \$ <u>175</u>	1 Income tax due (Part II, Line 11) \$ _____			P	
2 Interest \$ _____	2 Interest \$ _____			W	
3 Penalty \$ _____	3 Penalty \$ _____			2	
4 Subtotal \$ <u>175</u>	4 Subtotal \$ _____			0	
TOTAL PAYMENT (Add Subtotals) \$ <u>175</u>				4	
				V	
				A	
				L	
				#	



PART III—ORDINARY INCOME (LOSS) COMPUTATION

1 Federal ordinary income (loss) (see instructions)	1	48478	00
ADDITIONS			
2 State taxes based on net/gross income	2		00
3 Federal depreciation (do not include IRC §179 expense deduction)	3	17297	00
4 Related party expenses (attach Schedule RPC)	4		00
5 Other (attach Schedule O-PTE)	5		00
6 Total (add lines 1 through 5)	6	65775	00
SUBTRACTIONS			
7 Federal work opportunity credit	7		00
8 Kentucky depreciation (do not include IRC §179 expense deduction)	8		00
9 Other (attach Schedule O-PTE)	9		00
10 Kentucky ordinary income (loss) (line 6 less lines 7 through 9)	10	65775	00

PART IV—EXPLANATION OF FINAL RETURN AND/OR SHORT-PERIOD RETURN

- | | |
|---|--|
| <input type="checkbox"/> Ceased operations in Kentucky | <input type="checkbox"/> Change in filing status |
| <input type="checkbox"/> Change of ownership | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Successor to previous business | <input type="checkbox"/> Other _____ |

PART V—EXPLANATION OF AMENDED RETURN CHANGES

OFFICER INFORMATION

Attach a schedule listing the name, home address, and Social Security number of the vice president, secretary, and treasurer.

Has the attached officer information changed from the last return filed? Yes No

President's Name KYLE THOMPSON

President's Home Address 100 EAST MAIN

President's Social Security Number 403-08-0327

Date Became President 01/02/2014

FRANKFORT

KY 40601-

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of Officer	Date
	Name of Officer <u>KYLE THOMPSON</u>	Title
Paid Preparer Use	Signature of Preparer	Date
	Name of Preparer or Firm <u>RICK R WADDLE JR CPA PLLC</u>	<u>03/14/2020</u>
	ID Number	<u>030376671</u>
	Email and/or Telephone No. <u>RICKWADDLE@GMAIL.COM</u> <u>502-352-2950</u>	May the DOR discuss this return with this preparer? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Enclose	Include federal Form 1120S with all supporting schedules and statements.	Refund or No Payment	Kentucky Department of Revenue P. O. Box 856905 Louisville, KY 40285-6905
Payment	Check Payable: Kentucky State Treasurer E-Pay Options: www.revenue.ky.gov	With Payment	Kentucky Department of Revenue P. O. Box 856910 Louisville, KY 40285-6910



SCHEDULE Q — KENTUCKY S CORPORATION QUESTIONNAIRE

IMPORTANT: Questions 3—12 must be completed by all S corporations. If this is the S corporation's initial return or if the S corporation did not file a return under the same name and same federal I.D. number for the preceding year, questions 1 and 2 must be answered. **Failure to do so may result in a request for a delinquent return.**

1 Indicate whether: (a) new business; (b) successor to previously existing business which was organized as:
 (1) corporation; (2) partnership; (3) sole proprietorship; or (4) other _____

If successor to previously existing business, give name, address, and federal I.D. number of the previous business organization.

2 If a foreign S corporation, enter the date qualified to do business in Kentucky. _____

3 List the following **Kentucky** account numbers. Enter N/A for any number not applicable.

KY Secretary of State Organization 087371

Nonresident Income Tax Withholding _____

Employer Withholding 357545

Sales and Use Tax Permit _____

Consumer Use Tax _____

Unemployment Insurance 00-237673-9

Coal Severance and/or Processing Tax _____

4 The S corporation's books are in care of: (name and address)

ASHLEY SUTPHIN

100 EAST MAIN STREET

FRANKFORT

5 Are disregarded entities included in this return?

Yes No. If yes, list name, address, and federal I.D. number of each entity.

6(a) Was the S corporation a partner or member in a pass-through entity doing business in Kentucky? Yes No. If yes, list name and federal I.D. number of each pass-through entity.

6(b) Was the S corporation doing business in Kentucky other than through its interest held in a pass-through entity doing business in Kentucky? Yes No

7 Are related party costs per KRS 141.205(1)(f) included in this return? Yes No. If yes, attach Schedule RPC, Related Party Costs Disclosure Statement, and enter any related party cost additions on Form 720S, Part III, Line 4.

8 Is the entity filing this Kentucky tax return organized as a limited cooperative association per KRS Chapter 272A? Yes No

9 Is the entity filing this Kentucky tax return organized as a statutory trust or a series statutory trust per KRS Chapter 386A? Yes No

If yes, is the entity filing this Kentucky tax return a series within statutory trust? Yes No

If yes, enter the name, address, and federal I.D. number of the statutory trust registered with the Kentucky Secretary of State:

10 Was this return prepared on: (a) cash basis, (b) accrual basis, (c) other _____

11 Did the S corporation file a Kentucky tangible personal property tax return for January 1, 2020? Yes No

If yes, list the name and federal I.D. number of entity(ies) filing return(s):

12 Is the S corporation currently under audit by the Internal Revenue Service? Yes No

If yes, enter years under audit _____

If the Internal Revenue Service has made final and unappealable adjustments to the corporation's taxable income which have not been reported to the department, check here and file an amended Form 720S for each year adjusted. **Attach a copy of the final determination to each amended return.**



SCHEDULE K—SHAREHOLDERS' SHARES OF INCOME, CREDITS, DEDUCTIONS, ETC.

SECTION A	Pro Rata Share Items	Total Amount
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Income (Loss) and Deductions

1 Kentucky ordinary income (loss) from trade or business activities (page 2, Part III, line 10)	1	65775	00
2 Net income (loss) from rental real estate activities (attach federal Form 8825)	2		00
3 (a) Gross income from other rental activities	3(a)		00
(b) Less expenses from other rental activities (attach schedule)	(b)		00
(c) Net income (loss) from other rental activities (line 3(a) less line 3(b))	3(c)		00
4 Portfolio income (loss):			
(a) Interest income	4(a)		00
(b) Dividend income	(b)		00
(c) Royalty income	(c)		00
(d) Net short-term capital gain (loss) (attach federal Schedule D and Kentucky Schedule D, if applicable)	(d)		00
(e) Net long-term capital gain (loss) (attach federal Schedule D and Kentucky Schedule D, if applicable)	(e)		00
(f) Other portfolio income (loss) (attach schedule)	(f)		00
5 IRC §1231 net gain (loss) (other than due to casualty or theft) (attach federal Form 4797 and Kentucky Form 4797)	5		00
6 Other income (loss) (attach schedule)	6		00
7 Charitable contributions (attach schedule)	7		00
8 IRC §179 expense deduction (attach federal Form 4562 and Kentucky Form 4562)	8		00
9 Deductions related to portfolio income (loss) (attach schedule)	9		00
10 Other deductions (attach schedule)	10		00

Investment Interest

11 (a) Interest expense on investment debts	11(a)		00
(b) (1) Investment income included on lines 4(a), 4(b), 4(c), and 4(f) above	(b)(1)		00
(b) (2) Investment expenses included on line 9 above	(b)(2)		00

Tax Credits (see instructions)

12 Enter the applicable tax credit			
(a) >	12(a)		00
(b) >	(b)		00
(c) >	(c)		00
(d) >	(d)		00
(e) >	(e)		00



SCHEDULE K—SHAREHOLDERS' SHARES OF INCOME, CREDITS, DEDUCTIONS, ETC.

SECTION A — continued Pro Rata Share Items Total Amount

Other Items		
13 (a) Type of IRC §59(e)(2) expenditures >	13(a)	
(b) Amount of IRC §59(e)(2) expenditures	(b)	00
14 Tax-exempt interest income	14	00
15 Other tax-exempt income	15	00
16 Nondeductible expenses	16	680 00
17 Total property distributions (including cash) other than dividends reported on line 19 below	17	00
18 Other items and amounts required to be reported separately to shareholders (attach schedule)	18	
19 Total dividend distributions paid from accumulated earnings and profits.....	19	00

SECTION B—LLET Pass-through Items (Required)

1 Kentucky gross receipts from Schedule L, Section A, Column A, line 2	1	00
2 Total gross receipts from Schedule L, Section A, Column B, line 2	2	00
3 Kentucky gross profits from Schedule L, Section A, Column A, line 5	3	00
4 Total gross profits from Schedule L, Section A, Column B, line 5	4	00
5 Limited liability entity tax (LLET) nonrefundable credit from page 1, Part I, the total of lines 4 and 6, less \$175	5	00

SECTION C—Apportionment Pass-through Items

1 Kentucky receipts from Schedule A, Part I, line 1	1	00
2 Total receipts from Schedule A, Part I, line 2	2	00

SECTION D—Apportionment for Providers (KRS 141.121 (1)(e))

1 Kentucky property from Schedule A, Part I, line 5	1	00
2 Total property from Schedule A, Part I, line 6	2	00
3 Kentucky payroll from Schedule A, Part I, line 8	3	00
4 Total payroll from Schedule A, Part I, line 9	4	00



➤ See instructions.

Shareholder's identifying number 403-08-0327	S corporation's FEIN 46-4407593	Kentucky Corporation/LLET Account Number 087371
Shareholder's name, address, and ZIP code KYLE THOMPSON 157 NORTHWOOD FRANKFORT KY 40601		S corporation's name, address, and ZIP code <i>Check if applicable:</i> <input type="checkbox"/> Qualified investment pass-through entity CAPITAL COURT AUTHORITY LLC 100 EAST MAIN STREET FRANKFORT KY 40601

- A Shareholder's percentage of stock ownership for tax year ➤ 50.000
- B (1) Resident shareholder's taxable percentage of pro rata share items ➤ 100.00%
 (2) Nonresident shareholder's taxable percentage of pro rata share items (see Schedule A instructions) ➤ _____
- C What type of entity is this shareholder? Individual Estate Trust Single Member LLC
 ESOP Tax Exempt _____
- D Check the box if nonresident shareholder's income is reported on:
 Kentucky Nonresident Income Tax Withholding on Distributive Share Income Report and Composite Income Tax Return (Form 740NP-WH and Form PTE-WH)
- E Check if applicable: (1) Final K-1 (2) Amended K-1

IMPORTANT: Refer to Shareholder's Instructions for Schedule K-1 before entering information from Schedule K-1 on your tax return.

SECTION A	Pro Rata Share Items	Total Amount
Income (Loss) and Deductions		
1	Kentucky ordinary income (loss) from trade or business activities	1 32888 00
2	Net income (loss) from rental real estate activities	2 00
3	Net income (loss) from other rental activities	3 00
4	Portfolio income (loss):	
	(a) Interest income	4(a) 00
	(b) Dividend income	(b) 00
	(c) Royalty income	(c) 00
	(d) Net short-term capital gain (loss)	(d) 00
	(e) Net long-term capital gain (loss)	(e) 00
	(f) Other portfolio income (loss) (attach schedule)	(f) 00
5	IRC §1231 net gain (loss) (other than due to casualty or theft)	5 00
6	Other income (loss) (attach schedule)	6 00
7	Charitable contributions (attach schedule)	7 00
8	IRC §179 expense deduction (attach federal Form 4562 and Kentucky Form 4562)	8 00
9	Deductions related to portfolio income (loss) (attach schedule)	9 00
10	Other deductions (attach schedule)	10 00
Investment Interest		
11	(a) Interest expense on investment debts	11(a) 00
	(b) (1) Investment income included on lines 4(a), 4(b), 4(c), and 4(f) above	(b)(1) 00
	(b) (2) Investment expenses included on line 9 above	(b)(2) 00
Tax Credits (see instructions)		
12	Enter the applicable tax credit	
	(a) ➤	12(a) 00
	(b) ➤	(b) 00
	(c) ➤	(c) 00
	(d) ➤	(d) 00
	(e) ➤	(e) 00



SHAREHOLDER'S SHARE OF INCOME, CREDITS, DEDUCTIONS, ETC.

SECTION A—continued		Pro Rata Share Items	Total Amount
Other Items			
13	(a) Type of IRC §59(e)(2) expenditures	13(a)	
	(b) Amount of IRC §59(e)(2) expenditures	(b)	00
14	Tax-exempt interest income	14	00
15	Other tax-exempt income	15	00
16	Nondeductible expenses	16	340 00
17	Property distributions (including cash) other than dividend distributions reported to you on Form 1099-DIV	17	24799 00
18	Supplemental information required to be reported to each shareholder (attach schedule)	18	
19	Total dividend distributions paid from accumulated earnings and profits	19	00

SECTION B—LLET Pass-through Items (Required)		SHAREHOLDER'S SHARE	
1	Kentucky gross receipts	1	00
2	Total gross receipts	2	00
3	Kentucky gross profits	3	00
4	Total gross profits	4	00
5	Limited liability entity tax (LLET) nonrefundable credit	5	00

SECTION C—Apportionment Pass-through Items		SHAREHOLDER'S SHARE	
1	Kentucky receipts	1	00
2	Total receipts	2	00

SECTION D—Apportionment for Providers (KRS 141.121(1)(e))		SHAREHOLDER'S SHARE	
1	Kentucky property	1	00
2	Total property	2	00
3	Kentucky payroll	3	00
4	Total payroll	4	00

SECTION E—Resident Shareholder Adjustment			
1	Combination of Kentucky Schedule K-1, lines 1 through 5, 8, and portions of lines 6 and 10. Add income amounts and subtract (loss) and deduction amounts (see instructions)	1	32888 00
2	Combination of federal Schedule K-1, lines 1 through 9, 11, and portions of lines 10 and 12. Add income amounts and subtract (loss) and deduction amounts (see instructions)	2	24239 00
3	Enter the difference of lines 1 and 2 here and on appropriate line on Schedule M (see instructions)	3	8649 00



➤ See instructions.

Shareholder's identifying number 407-04-3277	S corporation's FEIN 46-4407593	Kentucky Corporation/LLET Account Number 087371
Shareholder's name, address, and ZIP code ASHLEY SUTPHIN 735 WINTERHAVEN FRANKFORT KY 40601		S corporation's name, address, and ZIP code <i>Check if applicable:</i> <input type="checkbox"/> Qualified investment pass-through entity CAPITAL COURT AUTHORITY LLC 100 EAST MAIN STREET FRANKFORT KY 40601

A Shareholder's percentage of stock ownership for tax year ➤ 50.000

B (1) Resident shareholder's taxable percentage of pro rata share items ➤ 100.00%

(2) Nonresident shareholder's taxable percentage of pro rata share items (see Schedule A instructions) ➤ _____

C What type of entity is this shareholder? Individual Estate Trust Single Member LLC
 ESOP Tax Exempt _____

D Check the box if nonresident shareholder's income is reported on:
 Kentucky Nonresident Income Tax Withholding on Distributive Share Income Report and Composite Income Tax Return (Form 740NP-WH and Form PTE-WH)

E Check if applicable: (1) Final K-1 (2) Amended K-1

IMPORTANT: Refer to Shareholder's Instructions for Schedule K-1 before entering information from Schedule K-1 on your tax return.

SECTION A	Pro Rata Share Items	Total Amount
Income (Loss) and Deductions		
1	Kentucky ordinary income (loss) from trade or business activities	1 32888 00
2	Net income (loss) from rental real estate activities	2 00
3	Net income (loss) from other rental activities	3 00
4	Portfolio income (loss):	
(a)	Interest income	4(a) 00
(b)	Dividend income	(b) 00
(c)	Royalty income	(c) 00
(d)	Net short-term capital gain (loss)	(d) 00
(e)	Net long-term capital gain (loss)	(e) 00
(f)	Other portfolio income (loss) (attach schedule)	(f) 00
5	IRC §1231 net gain (loss) (other than due to casualty or theft)	5 00
6	Other income (loss) (attach schedule)	6 00
7	Charitable contributions (attach schedule)	7 00
8	IRC §179 expense deduction (attach federal Form 4562 and Kentucky Form 4562)	8 00
9	Deductions related to portfolio income (loss) (attach schedule)	9 00
10	Other deductions (attach schedule)	10 00
Investment Interest		
11	(a) Interest expense on investment debts	11(a) 00
	(b) (1) Investment income included on lines 4(a), 4(b), 4(c), and 4(f) above	(b)(1) 00
	(b) (2) Investment expenses included on line 9 above	(b)(2) 00
Tax Credits (see instructions)		
12	Enter the applicable tax credit	
(a)	.....	12(a) 00
(b)	.....	(b) 00
(c)	.....	(c) 00
(d)	.....	(d) 00
(e)	.....	(e) 00



SHAREHOLDER'S SHARE OF INCOME, CREDITS, DEDUCTIONS, ETC.

SECTION A—continued		Pro Rata Share Items	Total Amount
Other Items			
13	(a) Type of IRC §59(e)(2) expenditures	13(a)	
	(b) Amount of IRC §59(e)(2) expenditures	(b)	00
14	Tax-exempt interest income	14	00
15	Other tax-exempt income	15	00
16	Nondeductible expenses	16	340 00
17	Property distributions (including cash) other than dividend distributions reported to you on Form 1099-DIV	17	23871 00
18	Supplemental information required to be reported to each shareholder (attach schedule)	18	
19	Total dividend distributions paid from accumulated earnings and profits	19	00

SECTION B—LLET Pass-through Items (Required)		SHAREHOLDER'S SHARE	
1	Kentucky gross receipts	1	00
2	Total gross receipts	2	00
3	Kentucky gross profits	3	00
4	Total gross profits	4	00
5	Limited liability entity tax (LLET) nonrefundable credit	5	00

SECTION C—Apportionment Pass-through Items		SHAREHOLDER'S SHARE	
1	Kentucky receipts	1	00
2	Total receipts	2	00

SECTION D—Apportionment for Providers (KRS 141.121(1)(e))		SHAREHOLDER'S SHARE	
1	Kentucky property	1	00
2	Total property	2	00
3	Kentucky payroll	3	00
4	Total payroll	4	00

SECTION E—Resident Shareholder Adjustment			
1	Combination of Kentucky Schedule K-1, lines 1 through 5, 8, and portions of lines 6 and 10. Add income amounts and subtract (loss) and deduction amounts (see instructions)	1	32888 00
2	Combination of federal Schedule K-1, lines 1 through 9, 11, and portions of lines 10 and 12. Add income amounts and subtract (loss) and deduction amounts (see instructions)	2	24239 00
3	Enter the difference of lines 1 and 2 here and on appropriate line on Schedule M (see instructions)	3	8649 00

Depreciation and Amortization

(Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

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

Name(s) shown on return CAPITAL COURT AUTHORITY LLC	Business or activity to which this form relates CAPITAL COURT AUTHORITY	Identifying number 46-4407593
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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 2018 Form 4562.	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions.	11	
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13 Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	▶ 13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	11,816
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2019	17	5,481
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 <input type="checkbox"/>		

Section B - Assets Placed in Service During 2019 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
19 a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	
			0.0	MM	S/L	

Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

20 a Class life					
b 12-year			12 yrs.		S/L
c 30-year			30 yrs.	MM	S/L
d 40-year			40 yrs.	MM	S/L

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	17,297
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	



SCHEDULE L—LIMITED LIABILITY ENTITY TAX COMPUTATION

Check this box and complete Schedule L-C, Limited Liability Entity Tax—Continuation Sheet, if the corporation or limited liability pass-through entity filing this tax return is a partner or member of a limited liability pass-through entity or general partnership doing business in Kentucky. Enter the total amounts from Schedule L-C in Section A of this schedule.

SECTION A—Computation of Gross Receipts and Gross Profits

	Column A Kentucky	Column B Total
1(a) Gross receipts less returns and allowances	1(a) 00	993577 00
(b) Kentucky statutory gross receipts reductions (see instructions)	(b) 00	
2 Adjusted gross receipts (line 1(a) less line 1(b))	2 00	993577 00
3(a) Cost of goods sold (attach Schedule COGS)	3(a) 00	244561 00
(b) Kentucky statutory cost of goods sold reductions (see instructions)	(b) 00	
4 Adjusted cost of goods sold (line 3(a) less line 3(b))	4 00	244561 00
5 Gross profits (line 2 less line 4)	5 00	749016 00



If Section A, Column B, Line 2 or 5 is \$3,000,000 or less, STOP and enter \$175 in Section D, line 1 below.

SECTION B—Computation of Gross Receipts LLET

1 If gross receipts from all sources (Column B, line 2) are greater than \$3,000,000, but less than \$6,000,000, enter the following: (Column A, line 2 x 0.00095) - [$\frac{\$2,850 \times (\$6,000,000 - \text{Column A, line 2})}{\$3,000,000}$] but in no case shall the result be less than zero	1	00
2 If gross receipts from all sources (Column B, line 2) are \$6,000,000 or greater, enter the following: Column A, line 2 x 0.00095	2	00
3 Enter the amount from line 1 or line 2	3	00

SECTION C—Computation of Gross Profits LLET

1 If gross profits from all sources (Column B, line 5) are greater than \$3,000,000, but less than \$6,000,000, enter the following: (Column A, line 5 x 0.0075) - [$\frac{\$22,500 \times (\$6,000,000 - \text{Column A, line 5})}{\$3,000,000}$] but in no case shall the result be less than zero	1	00
2 If gross profits from all sources (Column B, line 5) are \$6,000,000 or greater, enter the following: Column A, line 5 x 0.0075	2	00
3 Enter the amount from line 1 or line 2	3	00

SECTION D—Computation of LLET

1 Enter the lesser of Section B, line 3 or Section C, line 3 here and on Page 1, Part I, Line 1. If less than \$175, enter the minimum of \$175 here and on Page 1, Part I, line 1	1	175 00
--	---	--------

Cost of Goods Sold

▶ **Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.**
 ▶ **Go to www.irs.gov/Form1125A for the latest information.**

Name CAPITAL COURT AUTHORITY LLC	Employer identification number 46-4407593
--	---

1	Inventory at beginning of year	1	
2	Purchases	2	234,233
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule)	5	10,328
6	Total. Add lines 1 through 5	6	244,561
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions	8	244,561

- 9 a** Check all methods used for valuing closing inventory:
- (i) Cost
 - (ii) Lower of cost or market
 - (iii) Other (Specify method used and attach explanation.) ▶ _____
- b** Check if there was a writedown of subnormal goods ▶
- c** Check if the LIFO inventory method was adopted this tax year for any goods (If checked, attach Form 970) ▶
- d** If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO **9d** _____
- e** If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions Yes No
- f** Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation Yes No

CAPITAL COURT AUTHORITY, LLC

RFP # 20-2021

**PROOF OF INSURANCE
COVERAGE**



Phone: 800.906.9654
 Fax: 888.647.7445
 2100 Covington Centre
 Covington, LA 70455
 GilsbarPRO.com

Hanover Miscellaneous Professional Liability Quote

Insured: Capital Court Authority, LLC
 100 East Main Street
 Frankfort, KY 40601

Proposed Policy Period: 05/19/2021 to 05/19/2022 **Quote Valid Through:** 05/19/2021

Insurer: The Hanover Insurance Group – Admitted – A (Excellent) rating by A.M.Best

Select Option	1
Limits:	\$1,000,000 Per Claim / \$1,000,000 Aggregate
Deductible:	\$5,000 Per Claim
Premium:	\$2,028.00
Kentucky Surcharge:	\$36.50
Kentucky Municipal Tax:	\$121.68
Total Amount :	\$2,186.18

Scanned 4/21/21 with initial check (\$19) Waiting to see when to mail premium

Conditions:

- Named Insured's Business / Professional Service: Court Reporting Services
- Claims Expense Inside Limits
- The carrier assumes there are no known potential claims which have not been reported to the current insurance carrier.
- The underwriter reserves the right to amend or withdraw terms upon review of the below quote subject to information.
- In the event of any material change in underwriting information before coverage is bound, terms may be modified or withdrawn by the underwriter.

Retroactive Date: 05/19/2014

Schedule of Forms and Endorsements: (Applicable forms are available on request)

- 910-1002 05/19 Miscellaneous Advantage Professional Liability Declarations
- 910-1001 05/19 MPL Adv Base Policy Form
- 910-1800 PHN 05/19 U.S. Treasury Department's Office of Foreign Assets Control ("OFAC") Advisory Notice to Policyholders
- 910-1801 PHN 05/19 Customer Notice of Privacy Policy and Producer Compensation Practices Disclosures Privacy Policy Disclosure
- 910-1805 PHN 05/19 Information Regarding Extended Reporting Period Endorsement ("ERP Coverage")
- 910-1809KY PHN 05/19 Kentucky Addendum to Declarations - Local - County - State - Government Taxes
- 910-1820 PHN 05/19 Summary of Form Changes
- 910-1825 PHN 11/19 Cyber Risk Management Resources Policyholder Notice
- 910-1826 PHN 01/20 HPP Risk Management Resources
- 910-1003 05/19 Schedule of Forms
- 910-1106 05/19 Cyber First Party Coverages
- 910-1140 05/19 Professional Liability Enhancements
- 910-1417 05/19 Legal Services Exclusion
- 910-1619 05/19 Kentucky State Amendatory Endorsement

This quote is subject to and cannot be bound until receipt of the following:

- This Quote - signed and dated
- Written request to bind
- Submitted Application must be currently signed and dated with Question 13 answered.
- Payment of Premium (Financing Available)



Coverage Is Provided In:
West American Insurance Company

Policy Number:
BZW(22) 57 14 97 20
Policy Period:
From 06/16/2021 To 06/16/2022
12:01 am Standard Time
at Insured Mailing Location

**Commercial Protector
Policy Declarations**

Named Insured	Agent
CAPITAL COURT AUTHORITY LLC	(502) 875-2244 CHENAULT AND HOGE

SUMMARY OF LIMITS AND CHARGES

Businessowners Liability Limits of Insurance	DESCRIPTION	LIMIT
	Liability and Medical Expenses - Occurrence	1,000,000
	Aggregate Limits of Insurance	
	Products-Completed Operations	2,000,000
	Other than Products-Completed Operations	2,000,000
	Broadened Coverage For Damage To Premises Rented To You	1,000,000
	Medical Expenses (Any One Person)	15,000

Explanation of Charges	DESCRIPTION	PREMIUM
	Businessowners Location(s) Total	\$2,380.00
	Businessowners Other Coverage(s) Total	\$397.00
	KY Municipal Town Tax	\$193.53
	KY Dept. of Revenue Surcharge	\$50.24
	Certified Acts of Terrorism Coverage	\$14.00

Total Charges: \$3,034.77

Note: This is not a bill

To report a claim, call your Agent or 1-844-325-2467

DS 70 22 01 08



Coverage Is Provided In:
West American Insurance Company

Policy Number:
B2W(22) 57 14 97 20
Policy Period:
From 06/16/2021 To 06/16/2022
12:01 am Standard Time
at Insured Mailing Location

Commercial Protector Declarations Schedule

Named Insured	Agent
CAPITAL COURT AUTHORITY LLC	(502) 875-2244 CHENAULT AND HOGE

SUMMARY OF COVERAGES BY LOCATION - CONTINUED

Continuation of 0001 100 E Main St, Frankfort, KY 40601-2314

Business Personal Property Coverage	Occupancy: Law Offices	
	DESCRIPTION	
	Limit of Insurance - Replacement Cost	\$33,631
	Covered Causes of Loss	
	Special Form	
	Earthquake and Volcanic Eruption including Masonry Veneer	
		Full Business Personal Property Limits
	Deductible	\$500
	Deductible - Earthquake and Volcanic Eruption	10%
	Automatic Increase Business Personal Property	2%
		Premium
		\$278.00

Mortgage Holder(s)	INDEPENDENCE BANK OF KENTUCKY, ISAO/ATIMA	PO BOX 445 OWENSBORO, KY 42302 Loan#
-------------------------------	--	--

0002 223 S Main St Ste A, Versailles, KY 40383-1581

Property Characteristics	Description:
	Construction: Frame

To report a claim, call your Agent or 1-844-325-2467

DS.70 23 01 08



Coverage Is Provided In:
West American Insurance Company

Policy Number:
BZW(22) 57 14 97 20
Policy Period:
From 06/16/2021 To 06/16/2022
12:01 am Standard Time
at Insured Mailing Location

Commercial Protector Declarations Schedule

Named Insured	Agent
CAPITAL COURT AUTHORITY LLC	(502) 875-2244 CHENAULT AND HOGE

SUMMARY OF OTHER COVERAGES - continued

Hired and Non-Owned Auto Liability	DESCRIPTION		
	Coverage Characteristics		See Endorsement
		<i>Premium</i>	\$325.00
Property Extension Endorsement	DESCRIPTION		
	See Endorsement		
		<i>Premium</i>	\$11.00
Identity Recovery Coverage for Defined Individuals	DESCRIPTION		
	See Endorsement		
		<i>Premium</i>	\$11.00
Businessowners Location(s) Total			\$2,380.00
Businessowners Other Coverage(s) Total			\$397.00
Businessowners Schedule Total			\$2,777.00

To report a claim, call your Agent or 1-844-325-2467

DS 70 23 01 08

THE CINCINNATI INSURANCE COMPANY

A Stock Insurance Company

COMMERCIAL PROPERTY COVERAGE PART DECLARATIONS

Attached to and forming part of POLICY NUMBER: **EPP 047 65 00**

Named Insured is the same as it appears on the Common Policy Declarations unless otherwise stated here.

Loc. (address)
REFER TO IA904

COVERAGE PROVIDED						OPTIONAL COVERAGES Applicable only when an entry is made						
Item	Coverage	Limits	Coin- surance	Covered Cause Of Loss	Business Income Indemnity							
					Inflation Guard (%)	Replac- ment Cost (X)	Replac- ment Cost Ind. Stock (X)	Agreed Value (X)	Monthly Limit (fraction)	Maximum Period (X)	Extended Period (Days)	
1-1	BUSINESS PERSONAL PROPERTY	5,000	80%	SPECIAL		X						
2-1	BUSINESS PERSONAL PROPERTY	2,500	80%	SPECIAL		X						
3-1	BUSINESS PERSONAL PROPERTY	5,000	80%	SPECIAL		X						
4-1	BUSINESS PERSONAL PROPERTY	2,500	80%	SPECIAL		X						

DEDUCTIBLE: \$500.00 unless otherwise stated \$

MORTGAGE HOLDER

Item Name and Address

FORMS AND / OR ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART:

FM101 05/16 BUILDING AND PERSONAL PROPERTY COVERAGE FORM (INCLUDING SPECIAL CAUSES OF LOSS)
FA450 05/16 COMMERCIAL PROPERTY CONDITIONS

THE CINCINNATI INSURANCE COMPANY

A Stock Insurance Company

COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

Attached to and forming part of POLICY NUMBER: EPP 047 65 00

Named Insured is the same as it appears in the Common Policy Declarations

LIMITS OF INSURANCE

EACH OCCURRENCE LIMIT	\$ 1,000,000	
GENERAL AGGREGATE LIMIT	\$ 1,000,000	
PRODUCTS-COMPLETED OPERATIONS AGGREGATE LIMIT	\$ EXCLUDE	
PERSONAL & ADVERTISING INJURY LIMIT	\$ 1,000,000	ANY ONE PERSON OR ORGANIZATION
DAMAGE TO PREMISES RENTED TO YOU LIMIT		ANY ONE
\$100,000 limit unless otherwise indicated herein:	\$ SEE GA227	PREMISES
MEDICAL EXPENSE LIMIT		
\$5,000 limit unless otherwise indicated herein:	\$	ANY ONE PERSON

CLASSIFICATION	CODE NO.	PREMIUM BASE	RATE		ADVANCE PREMIUM	
			Products / Completed Operations	All Other	Products / Completed Operations	All Other
MEDICAL OFFICES INCL PROD AND/OR COMP OP	66561 A 600	A - Area B - Payroll C - Gross Sales D - Unlts E - Other	95.619			57
LOC. 2 - KY MEDICAL OFFICES INCL PROD AND/OR COMP OP	66561 A 750		95.619			72
LOC. 3 - KY LAWYERS OFFICES - OT NFP INCL PROD AND/OR COMP OP	66122 A 500		25.576			13
LOC. 4 - KY LAWYERS OFFICES - OT NFP INCL PROD AND/OR COMP OP	66122 A 500		25.576			13
EXTENDED LIABILITY	20296			2%		125MP
PREMIUM TO MEET COVERAGE PART MINIMUM						345

The General Liability Coverage Part is subject to an annual minimum premium.

TOTAL ANNUAL PREMIUM \$ 625

FORMS AND / OR ENDORSEMENTS APPLICABLE TO COMMERCIAL GENERAL LIABILITY COVERAGE PART:

GA101	12/04	COMMERCIAL GENERAL LIABILITY COVERAGE FORM
GA4251	01/06	NOTICE TO POLICYHOLDERS - MOBILE EQUIPMENT SUBJECT TO MOTOR VEHICLE INSURANCE LAWS
CG2104	11/85	EXCLUSION--PRODUCTS--COMPLETED OPERATIONS HAZARD

GA 532 07 08

EPP 047 65 00

FORMS AND / OR ENDORSEMENTS APPLICABLE TO COMMERCIAL GENERAL LIABILITY COVERAGE PART:

CG2244	04/13	EXCLUSION - SERVICES FURNISHED BY HEALTH CARE PROVIDERS
GA227	09/17	COMMERCIAL GENERAL LIABILITY EXTENDED ENDORSEMENT
GA3024	05/14	EXCLUSION - ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION AND DATA-RELATED LIABILITY - WITH LIMITED BODILY INJURY EXCEPTION
GA308	10/01	CONTRACTUAL LIABILITY EXCLUDING PRODUCTS-COMPLETED OPERATIONS
GA396	09/17	EXCLUSION - LAWYERS PROFESSIONAL
GA4250	11/05	MOBILE EQUIPMENT SUBJECT TO MOTOR VEHICLE INSURANCE LAWS

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**EXCLUSION - SERVICES FURNISHED BY
HEALTH CARE PROVIDERS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Description Of Operations:

ALL MEDICAL PROCEDURES INCLUDING TESTING

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following exclusion is added to Paragraph 2. Exclusions of Section I - Coverage A - Bodily Injury And Property Damage Liability and Paragraph 2. Exclusions of Section I - Coverage B - Personal And Advertising Injury Liability:

With respect to any operation shown in the Schedule, this insurance does not apply to "bodily injury", "property damage" or "personal and advertising injury" arising out of:

- 1. The rendering of or failure to render:
 - a. Medical, surgical, dental, X-ray or nursing service, treatment, advice or instruction, or the related furnishing of food or beverages;
 - b. Any health or therapeutic service, treatment, advice or instruction; or

- c. Any service, treatment, advice or instruction for the purpose of appearance or skin enhancement, hair removal or replacement or personal grooming;

- 2. The furnishing or dispensing of drugs or medical, dental or surgical supplies or appliances; or
- 3. The handling or treatment of dead bodies, including autopsies, organ donation or other procedures.

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage", or the offense which caused the "personal and advertising injury", involved that which is described in Paragraph 1., 2. or 3.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

COMMERCIAL GENERAL LIABILITY EXTENDED ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

A. Endorsement - Table of Contents:

<u>Coverage:</u>	<u>Begins on Page:</u>
1. Employee Benefit Liability Coverage.....	3
2. Unintentional Failure To Disclose Hazards.....	9
3. Damage To Premises Rented To You.....	9
4. Supplementary Payments.....	10
5. 180 Day Coverage For Newly Formed Or Acquired Organizations.....	10
6. Waiver Of Subrogation.....	10
7. Automatic Additional Insured - Specified Relationships:.....	11
• Managers Or Lessors Of Premises;	
• Lessor Of Leased Equipment;	
• Vendors;	
• State Or Governmental Agency Or Subdivision Or Political Subdivision - Permits Or Authorizations Relating To Premises; and	
• Mortgagee, Assignee Or Receiver	
8. Property Damage To Borrowed Equipment.....	14
9. Employees As Insureds - Specified Health Care Services And Good Samaritan Services.....	15
10. Broadened Notice Of Occurrence.....	15
11. Nonowned Aircraft.....	15
12. Bodily Injury Redefined.....	15
13. Expected Or Intended Injury Redefined.....	15
14. Former Employees As Insureds.....	15

B. Limits Of Insurance:

The Commercial General Liability Limits of Insurance apply to the insurance provided by this endorsement, except as provided below:

1. Employee Benefit Liability Coverage

Each Employee Limit: \$1,000,000
Aggregate Limit: \$3,000,000
Deductible Amount: \$ 1,000

3. Damage To Premises Rented To You

The lesser of:

- The Each Occurrence Limit shown in the Declarations; or
- \$500,000 unless otherwise stated \$ _____

4. Supplementary Payments

- Bail Bonds: \$2,500
- Loss Of Earnings: \$ 500

8. Property Damage To Borrowed Equipment

Each Occurrence Limit: \$10,000

Deductible Amount: \$ 250



Kentucky Employers' Mutual Insurance



00072100
00072

250 West Main Street, Suite 900 Lexington, KY 40507-1724 859-425-7800 www.kemi.com

May 13, 2019

00072



Capital Court Authority LLC
100 E Main St
Frankfort, KY 40601

INFORMATION PAGES
FOR POLICY NUMBER -- 398151
KEMI 007

1. Policyholder:

Capital Court Authority LLC
100 E Main St

Frankfort, KY 40601

Federal ID: 464407593

Entity type: Limited Liability Company (LLC)

2. Policy Period:

Effective:

12:01 AM 05/12/2019

Expires:

12:01 AM 05/12/2020

3. Coverage, Limits and Endorsements:

A. Part One of this policy applies only to the Workers' Compensation Laws of the Commonwealth of Kentucky.

B. Part Two of this policy (Employers' Liability Insurance) is subject to the limits of our liability listed below:

Bodily Injury by Accident	\$100,000	each accident
Bodily Injury by Disease	\$500,000	policy limit
Bodily Injury by Disease	\$100,000	each employee

This policy includes these endorsements:

ENDORSEMENT CODE	ENDORSEMENT DESCRIPTION
KEMI 001 02	Special Fund Assessment
KEMI 002 03	Schedule of Additional Locations
KEMI 012 02	Premium Discount Endorsement
KEMI 034 03	Experience Rating for Modification Factor Endorsement
KEMI_044_05	Terrorism Risk Insurance Program reauthorization Act Disclosure Endorsement
KEMI 045 02	Catastrophe (Other than Certified Acts of Terrorism)Endorsement
KEMI 053	Application of Premium Payments Endorsement
KEMI 060	Officers and Other Owners Exclusion Endorsement

4. Classifications

7720-000	Police Officers & Drivers
----------	---------------------------

CLASS RATING AND MANUAL PREMIUM DETAIL	EXPOSURE	RATE	PREMIUM
Capital Court Authority LLC			
05/12/2019 - 05/12/2020			
7720-000	128,000	3.96	\$5,069.00

Total Manual Premium:
\$5,069.00

PREMIUM CALCULATION DETAIL	TYPE	FACTOR	AMOUNT
05/12/2019 - 05/12/2020	Total Manual Premium		\$5,069.00
	Total Subject Premium		\$5,069.00
	Total Modified Premium		\$5,069.00
Final Estimate	Total Standard Premium		\$5,069.00
	Premium Discount		-\$8.00
	Expense Constant		\$260.00
	Terrorism Charge		\$13.00
	Estimated Annual Premium		\$5,334.00
	Kentucky Special Fund Assessment		\$341.91
	Total Amount Due		\$5,675.91



00072300
00072

The INFORMATION PAGES and all the forms and endorsements and included with it, along with the policy document, complete this policy. Insurance under this policy is provided to the policyholder(s) listed in section 1 of the INFORMATION PAGES. In witness whereof the undersigned executed and attested this policy.

Jon Stewart

CAPITAL COURT AUTHORITY, LLC

RFP # 20-2021

**DOCUMENTATION OF
CONTACTING MWDBE FIRMS**



Kyle Thompson <cca.kyle@gmail.com>

LFUCG RFP Inquiry

4 messages

Randy Jones <cca.randyjones@gmail.com>

Fri, Jul 9, 2021 at 3:22 PM

To: smiller@lexingtonky.gov, tlyra@commercelexington.com, smarston@tsmsdc.com, shawn.rogers@tsmsdc.com, palcorn@cvky.org, Melvin.bynes@ky.gov, Shella.Eagle@ky.gov, smixon@arvzbc.org, Yvette.Smith@ky.gov, janet@nwbc.org, robertcoffey@sba.gov, lavozdeky@yahoo.com, production@keynewsjournal.com
Bcc: cca.kyle@gmail.com

Good afternoon,

My name is Randy Jones, I am the Supervisor of the Lexington office for Capital Court Authority LLC. We are a private probation company based out of Frankfort. I have been directed by our corporate owner and Director of Operations, Mr. Kyle Thompson to submit this inquiry. Our company is currently a registered vendor with the LFUCG. We are drafting a response for an RFP bid to become the drug testing service provider for the Division of Community Corrections.


In accordance with the parameters established in the RFP for this bid we are seeking information on businesses that meet the LFUCG requirements as certified MBE, WBE and DBE companies who can provide the following services.

- Lab based drug testing services for 12-15 panel tests for marijuana, cocaine, fentanyl, alcohol, amphetamines, opiates, oxycodone, benzodiazepine, suboxone, methadone, barbiturates and synthetics.
- Drug testing supplies (i.e. sample cups, chain of custody forms, onsite test kits adaptable to standards set by the KY Administrative Office of the Courts)
- Internet based reporting system with capability for third party / client access.

If there are no companies that provide these services and items within the scope of your respective organizations, please respond with "non-applicable" or "none available". Thank you for your time and attention to this request.

Respectfully,

--
Randy Jones

 Capital Court Authority
Lexington Office Supervisor
1021 Majestic Dr. Ste. 150
Lexington Kentucky 40513
859-368-7161 Office

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Randy Jones <cca.randyjones@gmail.com>

Mon, Jul 12, 2021 at 8:49 AM

To: Susan Marston <smarston@tsmsdc.net>

Cc: Cheri Henderson <chenderson@tsmsdc.net>, Derrick Dowell <ddowell@tsmsdc.net>, Kyle Thompson <cca.kyle@gmail.com>

Good morning Ms. Marston,

Thank you for your response. I am copying our company owner and Chief Operations Officer Kyle Thompson on this email. He would be the point of contact to establish a partnership as you describe. Thanks again for your assistance.

Best regards,
Randy Jones - Supervisor
CCA - Lexington

On Fri, Jul 9, 2021 at 4:43 PM Susan Marston <smarston@tsmsdc.net> wrote:

Good afternoon Randy...

Thank you for your e-mail regarding your request for a list of our certified MBE suppliers that provide the services you have outlined.

7/27/2021

Gmail - LFUCG RFP inquiry

Our policy, which is driven by the National Minority Supplier Development Council (our headquarters), is that we may share our list of certified companies with our corporate members. We would welcome a discussion with Capital Court Authority (CCA) regarding how they could become a corporate member so that we could make available information relative to certified companies.

Please have a representative of CCA contact me at their earliest possible convenience to further discuss the criteria for membership.

Regards...

SUSAN A. L. MARSTON, MBA
REGIONAL VICE PRESIDENT - KENTUCKY AND WEST VIRGINIA
TriState Minority Supplier Development Council (TSMDC)
One Riverfront Plaza
401 W. Main St., Suite 1706
Louisville, KY 40202

T: 502.365.9762
TF: 844.793.1289
F: 502.365.9450
E: smarston@tsmsdc.net
W: tsmsdc.net



CERTIFY | DEVELOP | CONNECT | ADVOCATE

An Affiliate of NMSDC - W: nmsdc.org

THIS MESSAGE MAY CONTAIN CONFIDENTIAL AND/OR PROPRIETARY INFORMATION AND IS INTENDED FOR THE PERSON/ENTITY TO WHO IT WAS ORIGINALLY ADDRESSED. ANY USE BY OTHERS IS STRICTLY PROHIBITED.

From: Randy Jones <cca.randyjones@gmail.com>

Sent: Friday, July 9, 2021 3:22 PM

To: smiller@lexingtonky.gov <smiller@lexingtonky.gov>; tlyra@commercelexington.com <tlyra@commercelexington.com>; Susan Marston <smarston@tsmsdc.net>; shawn.rogers@tsmsdc.com <shawn.rogers@tsmsdc.com>; palcom@cvky.org <palcom@cvky.org>; Melvin.bynes@ky.gov <Melvin.bynes@ky.gov>; Shella.Eagle@ky.gov <Shella.Eagle@ky.gov>; smixon@orwbc.org <smixon@orwbc.org>; Yvette.Smith@ky.gov <Yvette.Smith@ky.gov>; janet@nwbc.org <janet@nwbc.org>; robertcoffey@sba.gov <robertcoffey@sba.gov>; lavozdeky@yahoo.com <lavozdeky@yahoo.com>; production@keynewsjournal.com <production@keynewsjournal.com>

Subject: LFUCG RFP inquiry

[Quoted text hidden]

[Quoted text hidden]

Randy Jones <cca.randyjones@gmail.com>

To: Kyle Thompson <cca.kyle@gmail.com>

Tue, Jul 27, 2021 at 3:05 PM

----- Forwarded message -----

From: Smith, Yvette (Finance) <Yvette.Smith@ky.gov>

Date: Fri, Jul 9, 2021 at 3:30 PM

Subject: RE: LFUCG RFP inquiry

To: Randy Jones <cca.randyjones@gmail.com>

Good afternoon. A copy of our current certified list is attached.

7/27/2021

Gmail - LFUCG RFP inquiry

From: Randy Jones <cca.randyjones@gmail.com>
Sent: Friday, July 9, 2021 3:22 PM
To: smiller@lexingtonky.gov; llyra@commercelexington.com; smarston@tsmsdc.com; shawn.rogers@tsmsdc.com; palcorn@cvky.org; Melvin.bynes@ky.gov; Eagle, Shella Jarvis (KYTC) <Shella.Eagle@ky.gov>; smixon@orvwbc.org; Smith, Yvette (Finance) <Yvette.Smith@ky.gov>; janet@nwbc.org; robertcoffey@sba.gov; lavozdeky@yahoo.com; production@keynewsjournal.com
Subject: LFUCG RFP inquiry

Good afternoon,

[Quoted text hidden]
[Quoted text hidden]
[Quoted text hidden]

 **MWBE Certified Listng_ (2).xlsx**
78K

Randy Jones <cca.randyjones@gmail.com>
To: Kyle Thompson <cca.kyle@gmail.com>

Tue, Jul 27, 2021 at 3:06 PM

----- Forwarded message -----
From: Sherita Miller <smiller@lexingtonky.gov>
Date: Fri, Jul 9, 2021 at 4:45 PM
Subject: RE: LFUCG RFP inquiry
To: Randy Jones <cca.randyjones@gmail.com>

Good afternoon Randy,

Attached is a copy of LFUCG's certified list of minority, women and veteran owned businesses. This is an overall list of businesses with various specialties.

Thanks, Sherita

Sherita Miller

Minority Business Enterprise Liaison

Central Purchasing

859.258.3323 office
lexingtonky.gov

 **LEXINGTON**

From: Randy Jones <cca.randyjones@gmail.com>
Sent: Friday, July 9, 2021 3:22 PM
To: Sherita Miller <smiller@lexingtonky.gov>; llyra@commercelexington.com; smarston@tsmsdc.com; shawn.rogers@tsmsdc.com; palcorn@cvky.org; Melvin.bynes@ky.gov; Shella.Eagle@ky.gov; smixon@orvwbc.org; Yvette.Smith@ky.gov; janet@nwbc.org; robertcoffey@sba.gov; lavozdeky@yahoo.com; production@keynewsjournal.com
Subject: LFUCG RFP inquiry

[EXTERNAL] Use caution before clicking links and/or opening attachments.

7/27/2021

Gmail - LFUCG RFP inquiry

[Quoted text hidden]

[Quoted text hidden]

 **LFUCG Certified List_June 2021.xlsx**
153K



Kyle Thompson <cca.kyle@gmail.com>

FW: Inquiry

3 messages

cca.brandonh <cca.brandonh@gmail.com>

Fri, Jul 23, 2021 at 5:55 PM

To: Kyle Thompson <cca.kyle@gmail.com>, Randy Jones <CCA.RandyJones@gmail.com>, Ashley Sutphin <cca.ashley@gmail.com>

Brandon Horseman
Georgetown Probation Supervisor
Home Incarceration Supervisor
Office: 502.603.0045
Cell: 502.209.0982

----- Original message -----

From: Decia Stenzel <DStenzel@cordanths.com>

Date: 7/23/21 17:53 (GMT-05:00)

To: cca.brandonh@gmail.com

Cc: Tara Escobio <tescobio@cordanths.com>, Amanda Gibbs <AGibbs@cordanths.com>

Subject: FW: Inquiry

Hi Brandon,

Thank you for reaching out to Cordant. We are highly experienced in the Govt space and would be happy to talk more about what you are looking for.

I am having my operations team looking at the cut off levels, but I have little doubt we will not be able to accommodate.

Tara Escobio is our VP of Account Management and I am asking her to have a follow up call with you to better understand your requirements early next week.

Decia Stenzel
President of Behavioral Health Services
Cordant Health Solutions®
Cell: 612-616-5807
Fax: 888-289-5430
DStenzel@cordanths.com

To learn more about Cordant visit cordantsolutions.com.

7/27/2021

Gmail - FW: Inquiry

This e-mail and any attachments may contain CONFIDENTIAL information protected by state and/or federal law, PROTECTED HEALTH INFORMATION. This transmission is intended for the sole use of the individual or entity to whom it is addressed. If you are not the intended recipient, any use or disclosure of this information is strictly prohibited. You are requested to delete this e-mail and any attachments, notify the sender immediately, and notify the Cordant Health Solutions' Chief Compliance Officer at 1-303-749-0490.

From: Kali Tudela <ktudela@cordanths.com>
Sent: Friday, July 23, 2021 1:17 PM
To: Decia Stenzel <DStenzel@cordanths.com>; Amanda Gibbs <AGibbs@cordanths.com>
Subject: Fwd: Inquiry

Hi Decia and Amanda,

It seems like the inquiry below would be more up your alley. Would you like to have your team take a run at this one?

Thanks,

Kali

Kali Tudela

Sales Manager - Midwest

Cordant Health Solutions®

Cell:(952) 237-5464

ktudela@cordanths.com

As part of Cordant Health Solutions' ongoing commitment to compliance, employees are always encouraged to reach out to the Chief Compliance Officer with any compliance questions or concerns. Cordant also offers an anonymous and secure third-party hotline at 1-833-222-4169, for confidential compliance reporting or concerns.

From: Brandon Horseman <cca.brandonh@gmail.com>
Sent: Friday, July 23, 2021 9:56 AM
To: Kali Tudela
Subject: Inquiry

External e-mail. Use Caution.

Good morning,

My name is Brandon Horseman, I am a Supervisor with Capital Court Authority LLC. We are a private probation company based in Kentucky. We provide drug testing and probation supervision services to six judicial districts within the state of Kentucky as well as drug testing services in twenty six counties for the Kentucky Department of Community Based Services (KY DCBS). Currently, we have approximately 2800 defendants and / or Clients under supervision by one of our four offices.

I have been tasked by our company's owner and Director of Operations to make inquiries with select laboratories certified through the Federal Government that provide lab based drug testing verification services. Your respective companies have been identified as potentially being able to provide the services we are seeking.

In late 2020 our company was engaged by the Kentucky Administrative Office of the Courts (KY AOC) to provide RDS (random drug screening) services for the Pretrial Services Division of the KY AOC. The confirmation and cut off levels established by the KY AOC have been attached for your reference.

As you can see, the levels set forth are not consistent with current industry standards. Regardless, these are the parameters by which we are bound to adhere to in accordance with the MOU that established the foundation of our partnership with the KY AOC.

Essentially, what our company is looking for is a laboratory that can provide the following:

- We need a panel that meets the needs of the Kentucky AOC (Administrative Office of the Courts) testing requirements (see attachment).
- Secondly, we need a panel that can simply "detect" but not provide confirmation unless specifically asked for after the test for that particular set of drugs on that panel, (those levels are on the attachment).
- A quote with fentanyl without synthetics.
- A quote for fentanyl with synthetics.
- A quote without either fentanyl or synthetics but an "add-on" charge for those specific drugs
- Finally, a standard panel that can screen and provide confirmation for industry standard levels for a "bundled" price of both actions on the specimen.

I appreciate your time and attention to this inquiry. Please feel free to contact me with any questions or if additional information is needed.

Best regards,

Brandon Horseman
Capital Court Authority

7/27/2021

Gmail - FW: Inquiry

Home Incarceration Supervisor

Georgetown Office Supervisor

Office - 502.603.0045

Fax- 502.603.0076

Cell Phone - 502.209.0982

"Remember to look up at the stars and not down at your feet. Try to make sense of what you see and wonder about what makes the universe exist. Be curious. And however difficult life may seem, there is always something you can do and succeed at.

It matters that you don't just give up."

— Stephen Hawking

"If you fell down yesterday, stand up today."

- H.G. Wells

Confidentiality Notice: This e-mail message, including any attachment, is for the sole use of the intended recipient(s) and may contain confidential information. Any unauthorized review, use, disclosure or distribution is strictly prohibited. If you are not the intended recipient, please contact the sender, by e-mail, and destroy all copies of the original message.

 **AOC Test Panel with Cutoff Levels 07-2020 (3) (1).pdf**
266K

Kyle Thompson <cca.kyle@gmail.com>

To: "cca.brandonh" <cca.brandonh@gmail.com>

Cc: Randy Jones <cca.randyjones@gmail.com>, Ashley Sutphin <cca.ashley@gmail.com>

Fri, Jul 23, 2021 at 8:10 PM

Good job, B.

KT

Sent from my iPhone

On Jul 23, 2021, at 5:55 PM, cca.brandonh <cca.brandonh@gmail.com> wrote:

[Quoted text hidden]

<AOC Test Panel with Cutoff Levels 07-2020 (3) (1).pdf>

Ashley Sutphin <cca.ashley@gmail.com>

To: Kyle Thompson <cca.Kyle@gmail.com>

Cc: "cca.brandonh" <cca.brandonh@gmail.com>, Randy Jones <cca.randyjones@gmail.com>

Fri, Jul 23, 2021 at 10:50 PM

Thanks B!

Ashley Sutphin
Capital Court Authority
Director of Financial Operations
502.352.2552

7/27/2021

Gmail - FW: Inquiry

On Jul 23, 2021, at 8:10 PM, Kyle Thompson <cca.Kyle@gmail.com> wrote:

Good job, B.
[Quoted text hidden]

CAPITAL COURT AUTHORITY, LLC

RFP # 20-2021

**AFFIRMATIVE ACTION AND
WORKFORCE ANALYSIS FORM**

Affirmative Action Plan

All vendors must submit as a part of the proposal package the following items to the Urban County Government:

1. Affirmative Action Plan for his/her firm; *Attached kj*
2. Current Work Force Analysis Form; *Attached kj*

Failure to submit these items as required may result in disqualification of the submitter from award of the contract. All submissions should be directed to:

Director, Division of Central Purchasing
Lexington-Fayette Urban County Government
200 East Main Street, 3rd Floor
Lexington, Kentucky 40507

All questions regarding this proposal must be directed to the Division of Central Purchasing, (859)-258-3320.



Capital Court Authority

ANTI-DISCRIMINATION AND AFFIRMATIVE ACTION POLICY

I. POLICY STATEMENT:

Capital Court Authority, LLC (hereinafter CCA) is an Equal Employment Opportunity (EEO) and Affirmative Action (AA) Employer. It is the policy of CCA to provide affirmative action in all programs, activities, facilities, and employment practices, ensuring equitable access and nondiscrimination to all persons without regard for race, color, disability, religion, gender or gender expression, sexual orientation, age, national origin, marital or pregnancy status, any protected veteran status or military service, or genetic information. This policy applies to all terms of and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation, and training.

CCA is committed to building a diverse entry level staff and executive level staff and expressly prohibits any form of workplace harassment or discrimination based on race, color, disability, religion, gender or gender expression, sexual orientation, age, national origin, marital or pregnancy status, any protected veteran status or military service, or genetic information.

Improper interference with the ability of owners and/or executives of CCA to perform their job duties may result in corrective action up to and including a recommendation for termination. CCA will base employment decisions on the principles of equal employment opportunity consistent with local, state, and federal laws. All employment actions will be handled in full compliance with this policy. For specific guidance, please contact Ashley H. Sutphin, HR Operations Director.

CCA owners and Directors will ensure that all personnel actions such as compensation, benefits, transfers, layoffs, return from layoffs, as well as any company sponsored training, education, tuition assistance, and social/recreational programs, will be administered without regard to individuals on the basis of their race, color, disability, religion, gender or gender expression, sexual orientation, age, national origin, marital or pregnancy status, any protected veteran status or military service, or genetic information.

In compliance with state and federal law, CCA does not retaliate against individuals for:

- a) filing or encouraging one to file a good faith complaint of unlawful discrimination;
- b) participating in an investigation of unlawful discrimination; or
- c) opposing unlawful discrimination. This policy is intended as a guideline to align institutional practice with the University's commitment to diversity, equity, and inclusion.

II. ENTITIES AFFECTED:

This policy applies to all employees of Capital Court Authority, LLC including all Staff, Contract Labor, paid and unpaid Interns and people applying for employment at CCA.

III. AUTHORITY:

In addition to being a violation of CCA policy, discrimination against people based on any of the protected classes outlined in the previous sections is unlawful, in accordance with the following, and

other application Kentucky statutes and regulations: • Title VI and Title VII of the Civil Rights Act of 1964 • Vietnam Era Veterans Readjustment Assistance Act of 1974 (VEVRAA) • Section 7 of the Fair Labor Standards Act as amended (FLSA) • Executive Order 11246 • Genetic Information Nondiscrimination Act of 2008 (GINA) • Uniformed Services Employment and Reemployment Rights Act of 1994 as amended (USERRA) • KRS 207.130 through 207.240 and KRS Chapter 344.

IV. DEFINITIONS

- ***Affirmative Action*** is a policy of proactively seeking diversity for employment and educational opportunities.
- ***Discrimination*** is the unjust treatment of others. It is a behavior based on prejudice.
- ***Equal Employment Opportunity*** establishes a baseline for acceptable practices and behaviors in the workplace. It prohibits discrimination in the workplace.
- ***Retaliation*** includes any adverse employment action or act of revenge against an individual for filing or encouraging one to file a complaint of discrimination, participating in an investigation of discrimination, or opposing discrimination.

V. RESPONSIBILITIES

All employees, including Owners, Directors, Staff, and Interns, are responsible for adhering to this Equal Opportunity and Nondiscrimination policy and promoting a work environment free of discrimination and/or harassment as outlined in this policy. All CCA supervisors must be aware of their individual responsibility to ensure adherence to this policy. Supervisors are expected to read the policy, attend training as needed on the policy, and adhere to and support this policy. Owners, Thompson and Sutphin, have responsibility for implementing the policy, providing training as needed, and monitoring compliance with the policy.

VI. TRAINING

Compliance and diversity training are provided through the Office of Human Resources.

VII. COMMUNICATIONS

This policy should be communicated to Owners, Directors, all Staff members, potential employees, and paid/unpaid interns of CCA. This policy should further be communicated in all publications seeking applicants for employment to CCA.

VII. REFERENCES AND RELATED MATERIALS RELATED POLICIES

ADA (Americans with Disabilities Act) - <http://www.ada.gov>

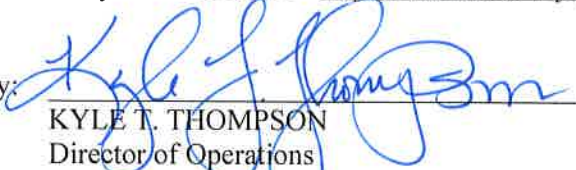
AFFIRMATIVE ACTION – <https://www.dol.gov> (Department of Labor – U.S.)

TITLE VII OF THE CIVIL RIGHTS ACT OF 1964 - <https://www.eeoc.gov/statutes/title-vii-civil-rights-act-1964>

KRS Chapter 344 - <https://apps.legislature.ky.gov/law/statutes/chapter.aspx?id=38920>

Kentucky Labor Cabinet – <https://www.labor.ky.gov>

Approved by:


KYLE T. THOMPSON
Director of Operations
Capital Court Authority, LLC

Date: 7/1/2021

WORKFORCE ANALYSIS FORM

Name of Organization: Capital Court Authority, LLC

Categories	Total	White (Not Hispanic or Latino)		Hispanic or Latino		Black or African- American (Not Hispanic or Latino)		Native Hawaiian and Other Pacific Islander (Not Hispanic or Latino)		Asian (Not Hispanic or Latino)		American Indian or Alaskan Native (not Hispanic or Latino)		Two or more races (Not Hispanic or Latino)		Total		
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Administrators																		
Professionals	2	1	1														1	1
Superintendents																		
Supervisors	4	2	1				1										2	2
Foremen																		
Technicians																		
Protective																		
Para-																		
Office/Clerical	6	1	5														1	5
Skilled Craft																		
Service/Maintena																		
Total:	12	4	7				1										4	8

Prepared by: Ashley Sutphin, partner Date: 07, 21, 21

(Name and Title)

Revised 2015-Dec-15

CAPITAL COURT AUTHORITY, LLC

RFP # 20-2021

**EXECUTED LFUCG DOCUMENTS
FOR SUBMISSION OF BID**

AFFIDAVIT

Comes the Affiant, Kyle T. Thompson, and after being first duly sworn, states under penalty of perjury as follows:

1. His/her name is Kyle Thomas Thompson and he/she is the individual submitting the proposal or is the authorized representative of Capital Court Authority, LLC, the entity submitting the proposal (hereinafter referred to as "Proposer").

2. Proposer will pay all taxes and fees, which are owed to the Lexington-Fayette Urban County Government at the time the proposal is submitted, prior to award of the contract and will maintain a "current" status in regard to those taxes and fees during the life of the contract.

3. Proposer will obtain a Lexington-Fayette Urban County Government business license, if applicable, prior to award of the contract.

4. Proposer has authorized the Division of Central Purchasing to verify the above-mentioned information with the Division of Revenue and to disclose to the Urban County Council that taxes and/or fees are delinquent or that a business license has not been obtained.

5. Proposer has not knowingly violated any provision of the campaign finance laws of the Commonwealth of Kentucky within the past five (5) years and the award of a contract to the Proposer will not violate any provision of the campaign finance laws of the Commonwealth.

6. Proposer has not knowingly violated any provision of Chapter 25 of the Lexington-Fayette Urban County Government Code of Ordinances, known as "Ethics Act."

Continued on next page

7. Proposer acknowledges that "knowingly" for purposes of this Affidavit means, with respect to conduct or to circumstances described by a statute or ordinance defining an offense, that a person is aware or should have been aware that his conduct is of that nature or that the circumstance exists.

Further, Affiant sayeth naught.

Kyle T. Thompson

STATE OF Kentucky

COUNTY OF Franklin

The foregoing instrument was subscribed, sworn to and acknowledged before me

by Kyle T. Thompson on this the 27th day
of July, 2021.

My Commission expires: 12/28/24

Jana McCarty
NOTARY PUBLIC, STATE AT LARGE

EQUAL OPPORTUNITY AGREEMENT

Standard Title VI Assurance

The Lexington Fayette-Urban County Government, (hereinafter referred to as the "Recipient") hereby agrees that as a condition to receiving any Federal financial assistance from the U.S. Department of Transportation, it will comply with Title VI of the Civil Rights Act of 1964, 78Stat.252, 42 U.S.C. 2000d-4 (hereinafter referred to as the "Act"), and all requirements imposed by or pursuant to Title 49, Code of Federal Regulations, U.S. Department of Transportation, Subtitle A, Office of the Secretary, (49 CFR, Part 21) Nondiscrimination in Federally Assisted Program of the Department of Transportation – Effectuation of Title VI of the Civil Rights Act of 1964 (hereinafter referred to as the "Regulations") and other pertinent directives, no person in the United States shall, on the grounds of race, color, national origin, sex, age (over 40), religion, sexual orientation, gender identity, veteran status, or disability be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Recipient receives Federal financial assistance from the U.S. Department of Transportation, including the Federal Highway Administration, and hereby gives assurance that will promptly take any necessary measures to effectuate this agreement. This assurance is required by subsection 21.7(a) (1) of the Regulations.

The Law

- Title VII of the Civil Rights Act of 1964 (amended 1972) states that it is unlawful for an employer to discriminate in employment because of race, color, religion, sex, age (40-70 years) or national origin.
- Executive Order No. 11246 on Nondiscrimination under Federal contract prohibits employment discrimination by contractor and sub-contractor doing business with the Federal Government or recipients of Federal funds. This order was later amended by Executive Order No. 11375 to prohibit discrimination on the basis of sex.
- Section 503 of the Rehabilitation Act of 1973 states:

The Contractor will not discriminate against any employee or applicant for employment because of physical or mental handicap.

- Section 2012 of the Vietnam Era Veterans Readjustment Act of 1973 requires Affirmative Action on behalf of disabled veterans and veterans of the Vietnam Era by contractors having Federal contracts.
- Section 206(A) of Executive Order 12086, Consolidation of Contract Compliance Functions for Equal Employment Opportunity, states:

The Secretary of Labor may investigate the employment practices of any Government contractor or sub-contractor to determine whether or not the contractual provisions specified in Section 202 of this order have been violated.

The Lexington-Fayette Urban County Government practices Equal Opportunity in recruiting, hiring and promoting. It is the Government's intent to affirmatively provide employment opportunities for those individuals who have previously not been allowed to enter into the mainstream of society. Because of its importance to the local Government, this policy carries the full endorsement of the Mayor, Commissioners, Directors and all supervisory personnel. In following this commitment to Equal Employment Opportunity and because the Government is the benefactor of the Federal funds, it is both against the Urban County Government policy and illegal for the Government to let contracts to companies which knowingly or unknowingly practice discrimination in their employment practices. Violation of the above mentioned ordinances may cause a contract to be canceled and the contractors may be declared ineligible for future consideration.

Please sign this statement in the appropriate space acknowledging that you have read and understand the provisions contained herein. Return this document as part of your application packet.

Bidders

I/We agree to comply with the Civil Rights Laws listed above that govern employment rights of minorities, women, Vietnam veterans, handicapped and aged persons.

Hale J. Johnson
Signature

Capital Court Authority, LLC
Name of Business

**DIRECTOR, DIVISION OF CENTRAL PURCHASING
LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT
200 EAST MAIN STREET
LEXINGTON, KENTUCKY 40507**

NOTICE OF REQUIREMENT FOR AFFIRMATIVE ACTION TO ENSURE EQUAL EMPLOYMENT OPPORTUNITIES AND DBE CONTRACT PARTICIPATION

Notice of requirement for Affirmative Action to ensure Equal Employment Opportunities and Disadvantaged Business Enterprises (DBE) Contract participation. Disadvantaged Business Enterprises (DBE) consists of Minority-Owned Business Enterprises (MBE) and Woman-Owned Business Enterprises (WBE).

The Lexington-Fayette Urban County Government has set a goal that not less than ten percent (10%) of the total value of this Contract be subcontracted to Disadvantaged Business Enterprises, which is made up of MBEs and WBEs. The Lexington Fayette Urban County Government also has set a goal that not less than three percent (3%) of the total value of this Contract be subcontracted to Veteran-owned Small Businesses. The goal for the utilization of Disadvantaged Business Enterprises as well Veteran –owned Small Businesses as subcontractors is a recommended goal. Contractor(s) who fail to meet such goal will be expected to provide written explanations to the Director of the Division of Purchasing of efforts they have made to accomplish the recommended goal, and the extent to which they are successful in accomplishing the recommended goal will be a consideration in the procurement process. Depending on the funding source, other DBE goals may apply.

For assistance in locating Disadvantaged Business Enterprises Subcontractors contact:

Sherita Miller, MPA, Division of Central Purchasing
Lexington-Fayette Urban County Government
200 East Main Street, 3rd Floor, Room 338
Lexington, Kentucky 40507
smiller@lexingtonky.gov

Firm Submitting Proposal: Capital Court Authority, LLC

Complete Address: 100 E. Main St. Frankfort, KY 40601
Street City Zip

Contact Name: Kyle Thompson Title: Owner/Director of Operations

Telephone Number: (502) 352-2550 Fax Number: (502) 352-2552

Email address: cca.kyle@gmail.com



LFUCG MWDBE PARTICIPATION FORM
Bid/RFP/Quote Reference # 20-2021

The MWDBE and/or veteran subcontractors listed have agreed to participate on this Bid/RFP/Quote. If any substitution is made or the total value of the work is changed prior to or after the job is in progress, it is understood that those substitutions must be submitted to Central Purchasing for approval immediately. **Failure to submit a completed form may cause rejection of the bid.**

MWDBE Company, Name, Address, Phone, Email	MBE WBE or DBE	Work to be Performed	Total Dollar Value of the Work	% Value of Total Contract
1. None				
2.				
3.				
4.				

The undersigned company representative submits the above list of MWDBE firms to be used in accomplishing the work contained in this Bid/RFP/Quote. Any misrepresentation may result in the termination of the contract and/or be subject to applicable Federal and State laws concerning false statements and false claims.

Capital Court Authority, LLC
Company

7/27/21
Date

[Signature]
Company Representative

Owner / Dir. of Operations
Title



LFUCG MWDBE SUBSTITUTION FORM
 Bid/RFP/Quote Reference # 20-2021

The substituted MWDBE and/or veteran subcontractors listed below have agreed to participate on this Bid/RFP/Quote. These substitutions were made prior to or after the job was in progress. These substitutions were made for reasons stated below and are now being submitted to Central Purchasing for approval. By the authorized signature of a representative of our company, we understand that this information will be entered into our file for this project.

SUBSTITUTED MWDBE Company Name, Address, Phone, Email	MWDBE Formally Contracted/ Name, Address, Phone, Email	Work to Be Performed	Reason for the Substitution	Total Dollar Value of the Work	% Value of Total Contract
1. <i>None</i>					
2.					
3.					
4.					

The undersigned acknowledges that any misrepresentation may result in termination of the contract and/or be subject to applicable Federal and State laws concerning false statements and false claims.

Capital Court Authority, LLC Kyle Thompson
 Company Company Representative
7/27/21 Owner/Dir. of Operations
 Date Title



MWDBE QUOTE SUMMARY FORM

Bid/RFP/Quote Reference # 20-2021

The undersigned acknowledges that the minority and/or veteran subcontractors listed on this form did submit a quote to participate on this project. Failure to submit this form may cause rejection of the bid.

Company Name <u>Capital Court Authority, LLC</u>	Contact Person <u>Kyle T. Thompson</u>
Address/Phone/Email <u>100 E. Main St. Frankfort, KY 40601 (502) 352-2550 cca.kyle@gmail.com</u>	Bid Package / Bid Date <u>7/28/21</u>

MWDBE Company Address	Contact Person	Contact Information (work phone, Email, cell)	Date Contacted	Services to be performed	Method of Communication (email, phone meeting, ad, event etc)	Total dollars \$\$ Do Not Leave Blank (Attach Documentation)	MBE * AA HA AS NA Female	Veteran
<u>NONE</u>								

(MBE designation / AA=African American / HA= Hispanic American/AS = Asian American/Pacific Islander/ NA= Native American)

The undersigned acknowledges that all information is accurate. Any misrepresentation may result in termination of the contract and/or be subject to applicable Federal and State laws concerning false statements and claims.

Capital Court Authority, LLC
Company
7/27/2021
Date

Kyle T. Thompson
Company Representative
Owner / Director of Operations
Title



LFUCG SUBCONTRACTOR MONTHLY PAYMENT REPORT

The LFUCG has a 10% goal plan adopted by city council to increase the participation of minority and women owned businesses in the procurement process. The LFUCG also has a 3% goal plan adopted by cited council to increase the participation of veteran owned businesses in the procurement process. In order to measure that goal LFUCG will track spending with MWDBE and Veteran contractors on a monthly basis. By the signature below of an authorized company representative, you certify that the information is correct, and that each of the representations set forth below is true. Any misrepresentation may result in termination of the contract and/or prosecution under applicable Federal and State laws concerning false statements and false claims. Please submit this form monthly to the Division of Central Purchasing/ 200 East Main Street / Room 338 / Lexington, KY 40507.

Bid/RFP/Quote # 20-2021

Total Contract Amount Awarded to Prime Contractor for this Project _____

Project Name/ Contract #	Work Period/ From: _____ To: _____
Company Name: <u>Capital Court Authority, LLC</u>	Address: <u>100 E. Main St. Frankfort, KY 40601</u>
Federal Tax ID: <u>46-4407593</u>	Contact Person: <u>Kyle Thompson</u>

Subcontractor Vendor ID (name, address, phone, email)	Description of Work	Total Subcontract Amount	% of Total Contract Awarded to Prime for this Project	Total Amount Paid for this Period	Purchase Order number for subcontractor work (please attach PO)	Scheduled Project Start Date	Scheduled Project End Date
<u>None</u>							

By the signature below of an authorized company representative, you certify that the information is correct, and that each of the representations set forth below is true. Any misrepresentations may result in the termination of the contract and/or prosecution under applicable Federal and State laws concerning false statements and false claims.

Capital Court Authority, LLC
Company

7/27/21
Date

Kyle Thompson
Company Representative

Owner / Director of Operations
Title

LFUCG STATEMENT OF GOOD FAITH EFFORTS

Bid/RFP/Quote # 20-2021

By the signature below of an authorized company representative, we certify that we have utilized the following Good Faith Efforts to obtain the maximum participation by MWDBE and Veteran-Owned business enterprises on the project and can supply the appropriate documentation.

_____ Advertised opportunities to participate in the contract in at least two (2) publications of general circulation media; trade and professional association publications; small and minority business or trade publications; and publications or trades targeting minority, women and disadvantaged businesses not less than fifteen (15) days prior to the deadline for submission of bids to allow MWDBE firms and Veteran-Owned businesses to participate.

_____ Included documentation of advertising in the above publications with the bidders good faith efforts package

N/A Attended LFUCG Central Purchasing Economic Inclusion Outreach event

N/A Attended pre-bid meetings that were scheduled by LFUCG to inform MWDBEs and/or Veteran-Owned Businesses of subcontracting opportunities

_____ Sponsored Economic Inclusion event to provide networking opportunities for prime contractors and MWDBE firms and Veteran-Owned businesses

KJ Requested a list of MWDBE and/or Veteran subcontractors or suppliers from LFUCG and showed evidence of contacting the companies on the list(s).

_____ Contacted organizations that work with MWDBE companies for assistance in finding certified MWDBE firms and Veteran-Owned businesses to work on this project. Those contacted and their responses should be a part of the bidder's good faith efforts documentation.

KJ Sent written notices, by certified mail, email or facsimile, to qualified, certified MWDBEs soliciting their participation in the contract not less than seven (7) days prior to the deadline for submission of bids to allow them to participate effectively.

KJ Followed up initial solicitations by contacting MWDBEs and Veteran-Owned businesses to determine their level of interest.

KJ Provided the interested MWDBE firm and/or Veteran-Owned business with adequate and timely information about the plans, specifications, and requirements of the contract.

_____ Selected portions of the work to be performed by MWDBE firms and/or Veteran-Owned businesses in order to increase the likelihood of meeting the contract goals. This includes, where appropriate, breaking out contract work items

into economically feasible units to facilitate MWDBE and Veteran participation, even when the prime contractor may otherwise perform these work items with its own workforce

_____ Negotiated in good faith with interested MWDBE firms and Veteran-Owned businesses not rejecting them as unqualified without sound reasons based on a thorough investigation of their capabilities. Any rejection should be so noted in writing with a description as to why an agreement could not be reached.

_____ Included documentation of quotations received from interested MWDBE firms and Veteran-Owned businesses which were not used due to uncompetitive pricing or were rejected as unacceptable and/or copies of responses from firms indicating that they would not be submitting a bid.

✓ RF Bidder has to submit sound reasons why the quotations were considered unacceptable. The fact that the bidder has the ability and/or desire to perform the contract work with its own forces will not be considered a sound reason for rejecting a MWDBE and/or Veteran-Owned business's quote. Nothing in this provision shall be construed to require the bidder to accept unreasonable quotes in order to satisfy MWDBE and Veteran goals.

_____ Made an effort to offer assistance to or refer interested MWDBE firms and Veteran-Owned businesses to obtain the necessary equipment, supplies, materials, insurance and/or bonding to satisfy the work requirements of the bid proposal

_____ Made efforts to expand the search for MWBE firms and Veteran-Owned businesses beyond the usual geographic boundaries.

_____ Other--any other evidence that the bidder submits which may show that the bidder has made reasonable good faith efforts to include MWDBE **and Veteran participation.**

NOTE: Failure to submit any of the documentation requested in this section may be cause for rejection of bid. Bidders may include any other documentation deemed relevant to this requirement which is subject to approval by the MBE Liaison. Documentation of Good Faith Efforts must be submitted with the Bid, if the participation Goal is not met.

The undersigned acknowledges that all information is accurate. Any misrepresentations may result in termination of the contract and/or be subject to applicable Federal and State laws concerning false statements and claims.

Capital Court Authority LLC
Company
7/27/21
Date

Kyle J. Livingston
Company Representative
Owner / Director of Operations
Title

GENERAL PROVISIONS

1. Each Respondent shall comply with all Federal, State & Local regulations concerning this type of service or good.

The Respondent agrees to comply with all statutes, rules, and regulations governing safe and healthful working conditions, including the Occupational Health and Safety Act of 1970, 29 U.S.C. 650 *et. seq.*, as amended, and KRS Chapter 338. The Respondent also agrees to notify the LFUCG in writing immediately upon detection of any unsafe and/or unhealthful working conditions at the job site. The Respondent agrees to indemnify, defend and hold the LFUCG harmless from all penalties, fines or other expenses arising out of the alleged violation of said laws.

2. Failure to submit ALL forms and information required in this RFP may be grounds for disqualification.
3. Addenda: All addenda and IonWave Q&A, if any, shall be considered in making the proposal, and such addenda shall be made a part of this RFP. Before submitting a proposal, it is incumbent upon each proposer to be informed as to whether any addenda have been issued, and the failure to cover in the bid any such addenda may result in disqualification of that proposal.
4. Proposal Reservations: LFUCG reserves the right to reject any or all proposals, to award in whole or part, and to waive minor immaterial defects in proposals. LFUCG may consider any alternative proposal that meets its basic needs.
5. Liability: LFUCG is not responsible for any cost incurred by a Respondent in the preparation of proposals.
6. Changes/Alterations: Respondent may change or withdraw a proposal at any time prior to the opening; however, no oral modifications will be allowed. Only letters, or other formal written requests for modifications or corrections of a previously submitted proposal which is addressed in the same manner as the proposal, and received by LFUCG prior to the scheduled closing time for receipt of proposals, will be accepted. The proposal, when opened, will then be corrected in accordance with such written request(s), provided that the written request is contained in a sealed envelope which is plainly marked "modifications of proposal".
7. Clarification of Submittal: LFUCG reserves the right to obtain clarification of any point in a bid or to obtain additional information from a Respondent.
8. Bribery Clause: By his/her signature on the bid, Respondent certifies that no employee of his/hers, any affiliate or Subcontractor, has bribed or attempted to bribe an officer or employee of the LFUCG.

9. Additional Information: While not necessary, the Respondent may include any product brochures, software documentation, sample reports, or other documentation that may assist LFUCG in better understanding and evaluating the Respondent's response. Additional documentation shall not serve as a substitute for other documentation which is required by this RFP to be submitted with the proposal,
10. Ambiguity, Conflict or other Errors in RFP: If a Respondent discovers any ambiguity, conflict, discrepancy, omission or other error in the RFP, it shall immediately notify LFUCG of such error in writing and request modification or clarification of the document if allowable by the LFUCG.
11. Agreement to Bid Terms: In submitting this proposal, the Respondent agrees that it has carefully examined the specifications and all provisions relating to the work to be done attached hereto and made part of this proposal. By acceptance of a Contract under this RFP, proposer states that it understands the meaning, intent and requirements of the RFP and agrees to the same. The successful Respondent shall warrant that it is familiar with and understands all provisions herein and shall warrant that it can comply with them. No additional compensation to Respondent shall be authorized for services or expenses reasonably covered under these provisions that the proposer omits from its Proposal.
12. Cancellation: If the services to be performed hereunder by the Respondent are not performed in an acceptable manner to the LFUCG, the LFUCG may cancel this contract for cause by providing written notice to the proposer, giving at least thirty (30) days notice of the proposed cancellation and the reasons for same. During that time period, the proposer may seek to bring the performance of services hereunder to a level that is acceptable to the LFUCG, and the LFUCG may rescind the cancellation if such action is in its best interest.

A. Termination for Cause

- (1) LFUCG may terminate a contract because of the contractor's failure to perform its contractual duties
- (2) If a contractor is determined to be in default, LFUCG shall notify the contractor of the determination in writing, and may include a specified date by which the contractor shall cure the identified deficiencies. LFUCG may proceed with termination if the contractor fails to cure the deficiencies within the specified time.
- (3) A default in performance by a contractor for which a contract may be terminated shall include, but shall not necessarily be limited to:
 - (a) Failure to perform the contract according to its terms, conditions and specifications;
 - (b) Failure to make delivery within the time specified or according

- to a delivery schedule fixed by the contract;
- (c) Late payment or nonpayment of bills for labor, materials, supplies, or equipment furnished in connection with a contract for construction services as evidenced by mechanics' liens filed pursuant to the provisions of KRS Chapter 376, or letters of indebtedness received from creditors by the purchasing agency;
- (d) Failure to diligently advance the work under a contract for construction services;
- (e) The filing of a bankruptcy petition by or against the contractor; or
- (f) Actions that endanger the health, safety or welfare of the LFUCG or its citizens.

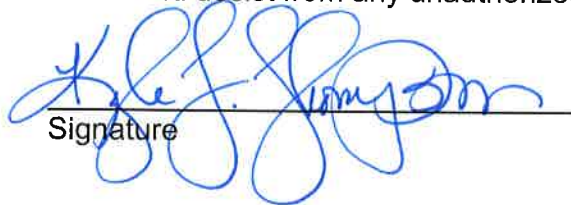
B. At Will Termination

Notwithstanding the above provisions, the LFUCG may terminate this contract at will in accordance with the law upon providing thirty (30) days written notice of that intent. Payment for services or goods received prior to termination shall be made by the LFUCG provided these goods or services were provided in a manner acceptable to the LFUCG. Payment for those goods and services shall not be unreasonably withheld.

13. **Assignment of Contract:** The contractor shall not assign or subcontract any portion of the Contract without the express written consent of LFUCG. Any purported assignment or subcontract in violation hereof shall be void. It is expressly acknowledged that LFUCG shall never be required or obligated to consent to any request for assignment or subcontract; and further that such refusal to consent can be for any or no reason, fully within the sole discretion of LFUCG.
14. **No Waiver:** No failure or delay by LFUCG in exercising any right, remedy, power or privilege hereunder, nor any single or partial exercise thereof, nor the exercise of any other right, remedy, power or privilege shall operate as a waiver hereof or thereof. No failure or delay by LFUCG in exercising any right, remedy, power or privilege under or in respect of this Contract shall affect the rights, remedies, powers or privileges of LFUCG hereunder or shall operate as a waiver thereof.
15. **Authority to do Business:** The Respondent must be a duly organized and authorized to do business under the laws of Kentucky. Respondent must be in good standing and have full legal capacity to provide the services specified under this Contract. The Respondent must have all necessary right and lawful authority to enter into this Contract for the full term hereof and that proper corporate or other action has been duly taken authorizing the Respondent to enter into this Contract. The Respondent will provide LFUCG with a copy of a corporate resolution authorizing this action and a letter from an attorney confirming that the proposer is authorized to do business in the State of Kentucky if requested. All proposals must

be signed by a duly authorized officer, agent or employee of the Respondent.

16. **Governing Law:** This Contract shall be governed by and construed in accordance with the laws of the Commonwealth of Kentucky. In the event of any proceedings regarding this Contract, the Parties agree that the venue shall be the Fayette County Circuit Court or the U.S. District Court for the Eastern District of Kentucky, Lexington Division. All parties expressly consent to personal jurisdiction and venue in such Court for the limited and sole purpose of proceedings relating to this Contract or any rights or obligations arising thereunder. Service of process may be accomplished by following the procedures prescribed by law.
17. **Ability to Meet Obligations:** Respondent affirmatively states that there are no actions, suits or proceedings of any kind pending against Respondent or, to the knowledge of the Respondent, threatened against the Respondent before or by any court, governmental body or agency or other tribunal or authority which would, if adversely determined, have a materially adverse effect on the authority or ability of Respondent to perform its obligations under this Contract, or which question the legality, validity or enforceability hereof or thereof.
18. Contractor understands and agrees that its employees, agents, or subcontractors are not employees of LFUCG for any purpose whatsoever. Contractor is an independent contractor at all times during the performance of the services specified.
19. If any term or provision of this Contract shall be found to be illegal or unenforceable, the remainder of the contract shall remain in full force and such term or provision shall be deemed stricken.
20. Contractor [or Vendor or Vendor's Employees] will not appropriate or make use of the Lexington-Fayette Urban County Government (LFUCG) name or any of its trade or service marks or property (including but not limited to any logo or seal), in any promotion, endorsement, advertisement, testimonial or similar use without the prior written consent of the government. If such consent is granted LFUCG reserves the unilateral right, in its sole discretion, to immediately terminate and revoke such use for any reason whatsoever. Contractor agrees that it shall cease and desist from any unauthorized use immediately upon being notified by LFUCG.


Signature

7/27/21
Date