

**NEIGHBORHOOD DEVELOPMENT FUND
Not-for-Profit Transmittal and Approval Form**

^{1st Annual}

Applicant/Program: California Neighborhood Leadership Council, Inc./Historical Neighborhood Storytelling Forum
Applicant Requested Amount: 3,548.00
Appropriation Request Amount: 3,548.00

Executive Summary of Request

The 1st Annual Historical Neighborhood Storytelling Forum was an opportunity for residents of the California neighborhood to come together and share their stories to help future generations understand the richness of the community they call home.

Is this program/project a fundraiser? Yes No
Is this applicant a faith based organization? Yes No
Does this application include funding for sub-grantee(s)? Yes No

I have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I have read the organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required.

4 District #  Primary Sponsor Signature 3,548.00 Amount Nov 7, 2022 Date

Primary Sponsor Disclosure

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

Approved by:

Appropriations Committee Chairman Date
Final Appropriations Amount: _____

sh

Applicant/Program:

California Neighborhood Leadership Council Inc/ 1st Annual Historical Neighborhood Storytelling Forum

Additional Disclosure and Signatures

Additional Council Office Disclosure

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

Council Member Signature and Amount

District 1	_____	\$ _____
District 2	_____	\$ _____
District 3	_____	\$ _____
District 4	_____	\$ _____
District 5	_____	\$ _____
District 6	_____	\$ _____
District 7	_____	\$ _____
District 8	_____	\$ _____
District 9	_____	\$ _____
District 10	_____	\$ _____
District 11	_____	\$ _____
District 12	_____	\$ _____
District 13	_____	\$ _____
District 14	_____	\$ _____
District 15	_____	\$ _____

Applicant/Program:

Additional Disclosure and Signatures

Additional Council Office Disclosure
List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

- District 16 _____ \$ _____
- District 17 _____ \$ _____
- District 18 _____ \$ _____
- District 19 _____ \$ _____
- District 20 _____ \$ _____
- District 21 _____ \$ _____
- District 22 _____ \$ _____
- District 23 _____ \$ _____
- District 24 _____ \$ _____
- District 25 _____ \$ _____
- District 26 _____ \$ _____

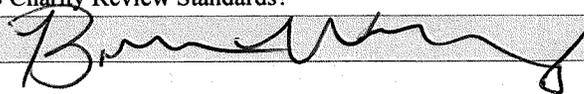
LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Legal Name of Applicant Organization California Neighborhood Leadership Council Inc

Program Name and Request Amount 1st Annual Historical Neighborhood Storytelling Forum | 3,548.00

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	<input type="checkbox"/> Yes
Is the funding proposed by Council Member(s) less than or equal to the request amount?	<input type="checkbox"/> Yes
Is the proposed public purpose of the program viable and well-documented?	<input type="checkbox"/> Yes
Will all of the funding go to programs specific to Louisville/Jefferson County?	<input type="checkbox"/> Yes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	<input type="checkbox"/> N/A
Has prior Metro Funds committed/granted been disclosed?	<input type="checkbox"/> N/A
Is the application properly signed and dated by authorized signatory?	<input type="checkbox"/> Yes
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	<input type="checkbox"/> Yes
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	<input type="checkbox"/> N/A
Is the entity in good standing with: <ul style="list-style-type: none"> ▶ Kentucky Secretary of State? ▶ Louisville Metro Revenue Commission? ▶ Louisville Metro Government? ▶ Internal Revenue Service? ▶ Louisville Metro Human Relations Commission? 	<input type="checkbox"/> Yes
Is the current Fiscal Year Budget included?	<input type="checkbox"/> N/A
Is the entity's board member list (with term length/term limits) included?	<input type="checkbox"/> Yes
Is recommended funding less than 33% of total agency operating budget?	<input type="checkbox"/> N/A
Does the application budget reflect only the revenue and expenses of the project/program?	<input type="checkbox"/> Yes
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	<input checked="" type="checkbox"/> Yes NA
Is the most recent annual audit (if required by organization) included?	<input type="checkbox"/> N/A
Is a copy of Signed Lease (if rent costs are requested) included?	<input type="checkbox"/> N/A
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	<input type="checkbox"/> N/A
Are the Articles of Incorporation of the Agency included?	<input type="checkbox"/> Yes
Is the IRS Form W-9 included?	<input type="checkbox"/> Yes
Is the IRS Form 990 included?	<input type="checkbox"/> Yes
Are the evaluation forms (if program participants are given evaluation forms) included?	<input type="checkbox"/> N/A
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	<input type="checkbox"/> N/A
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	<input checked="" type="checkbox"/> N/A No

Prepared by:



Date: Nov 7, 2022

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 - APPLICANT INFORMATION

Legal Name of Applicant Organization:
(as listed on: <http://www.sos.ky.gov/business/records>) California Neighborhood Leadership Council Inc.

Main Office Street & Mailing Address: 1632 Hale Ave., Louisville, Ky. 40210

Website: N/A

Applicant Contact:	Yolanda Walker	Title:	President
Phone:	771-5745	Email:	cnlcl1600@gmail.com
Financial Contact:	Yolanda Walker	Title:	President
Phone:	771-5745	Email:	cnlcl1600@gmail.com

Organization's Representative who attended NDF Training: Yolanda Walker

GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED

Program Facility Location(s):	2304 Crums Lane		
Council District(s):	3 (4)	Zip Code(s):	40216

SECTION 2 - PROGRAM REQUEST & FINANCIAL INFORMATION

PROGRAM/PROJECT NAME: 1st Annual Historical Neighborhood Storytelling Forum

Total Request: (\$)	\$ 3,548.00	Total Metro Award (this program) in previous year: (\$)	\$ 0.00
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Purpose of Request (check all that apply):

- Operating Funds (generally cannot exceed 33% of agency's total operating budget)
- Programming/services/events for direct benefit to community or qualified individuals
- Capital Project of the organization (equipment, furnishing, building, etc)

The Following are Required Attachments:

<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input type="checkbox"/> Current year projected budget <input checked="" type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation (current & signed) <input type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense	<input checked="" type="checkbox"/> Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 <input type="checkbox"/> Evaluation forms if used in the proposed program <input type="checkbox"/> Annual audit (if required by organization) <input type="checkbox"/> Faith Based Organization Certification Form, if applicable
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For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.

Source:	N/A	Amount: (\$)	\$ 0.00
Source:	N/A	Amount: (\$)	\$ 0.00
Source:	N/A	Amount: (\$)	\$ 0.00

Has the applicant contacted the BBB Charity Review for participation? Yes No

Has the applicant met the BBB Charity Review Standards? Yes No

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

Mission Statement & Objectives

The Mission Statement of the California Neighborhood Leadership Council, Inc. is to revitalize, renew and reestablish our community.

Our objectives are:

To enhance the livability of the area by establishing and maintaining an open line of communication between neighborhood residents, governmental agencies and other neighborhoods;

To maintain the quality of life and home values of our neighborhood by involving ourselves in property maintenance and neighborhood beautification, while working together as neighbors and friends;

To bring together dedicated and concerned California residents to renew, revitalize and reestablish our neighborhood through community and economic development; and

To establish partnerships with other Louisville area schools, churches, businesses and neighborhood groups.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Michael L. Brooks	N/A
Yolanda M. Walker	N/A
Jane E. Grady	N/A
Virginia M. Cox	N/A
Carol Travis Clark	N/A
Deathra Shipley	N/A
Wilma E. Voorhies	N/A
Michael A. Dean	N/A
Debra Suzanne Eades	N/A

Describe the Board term limit policy:
 N/A

Three Highest Paid Staff Names	Annual Salary
N/A	\$ 0.00
N/A	\$ 0.00
N/A	\$ 0.00

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 PROGRAM/PROJECT NARRATIVE

A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.):

Program start date: April 9, 2022 Program start time: 6:00pm
Program end date: April 9, 2022 Program end time: 10:00pm

Brief description of the event:

By the 1940s, West Louisville had grown into a rich array of distinctive black neighborhoods including California. California has a rich history that should not be lost.

This historical forum event is to provide a little normalcy during this pandemic crisis, where many have lost loved ones to covid-19 and obtain a recorded historical documentation of the lives of descendants that lived or currently living in our community.

The forum will consist of descendants and families sharing their stories about the blocks they lived/live on and their recollection of this striving community. Along with bringing pictures to help reminisce and provide recorded history of our senior's, youth and residents to help our future generations understand the richness of the community they will call home.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s):

How the funds will be spent:

- The funding will be used for building rental for a safe place for the event.
- The funding will be used for audio, recording and entertainment.
- The funding will be used for advertisement of the event.
- The funding will be used for mementos, and keepsake photos from the event.
- The funding will be used for Food and refreshments.
- The funding will be used for pickup and delivery services of goods and equipment to the event activities.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

C: If this request is a fundraiser, please detail how the proceeds will be spent:

N/A

D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:

The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:

- ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.

The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.

Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):

- ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
- ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served:

How the program's benefit the quality of life of those being served:

This program is to provide a little normalcy during this pandemic crisis, where many have lost loved ones to covid-19.

This program is to help with health and wellness to the community, and release unhealthy stress and depression what has occur and currently turmoil through our community.

This program is to relief endorphins that natural occur through the brain and give the community a sense of well-being by, (enjoying music, food, family photos, and sharing their stories) with other residents in the community.

This program is away to obtain a recorded historical documentation of the lives of descendants that lived or currently living in our community.

This program is a moment to capture some oral history and let down the community hair together in a safe atmosphere.

The collecting of data: A short survey will be given to all participants of the event. The survey will include the following questions: 1. Please rate your enjoyment of this event, (1-5). 2. Would you come back to next year event, (yes/no). 3. What if anything need to be change or added to this event.

F: Briefly describe any existing collaborative relationships the organization has with other community organizations. Describe what those partners are bringing to the relationship in general and to this program/project specifically.

The California Neighborhood Leadership Council Inc. collaborates and support all Metro Louisville neighborhoods and communities. Ms.

To this proram Ms. Mary Hall, (MARY'S BRIGHT IDEA LLC.) shared and collaborated with the CNLCI to bring the 1st Annual Historical Neighborhood Storytelling Forum Event to help provide a long time healing to the California residents by sharing her family story.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 - PROGRAM/PROJECT BUDGET SUMMARY

THE PROGRAM/PROJECT BUDGET SHOULD REALISTICALLY ESTIMATE WHAT AMOUNT IS NEEDED FROM METRO GOVERNMENT AND WHAT IS EXPECTED FROM OTHER SOURCES.

Program/Project Expenses	Column 1 Proposed Metro Funds	Column 2 Non- Metro Funds	Column (1+2)=3 Total Funds
A: Personnel Costs Including Benefits	\$ 0.00	\$ 0.00	\$ 0.00
B: Rent/Utilities	\$ 0.00	\$ 0.00	\$ 0.00
C: Office Supplies	\$ 0.00	\$ 0.00	\$ 0.00
D: Telephone	\$ 0.00	\$ 0.00	\$ 0.00
E: In-town Travel	\$ 0.00	\$ 0.00	\$ 0.00
F: Client Assistance (See Detailed List on Page 8)	\$ 0.00	\$ 0.00	\$ 0.00
G: Professional Service Contracts	\$ 0.00	\$ 0.00	\$ 0.00
H: Program Materials	\$ 0.00	\$ 0.00	\$ 0.00
I: Community Events & Festivals (See Detailed List on Page 8)	\$ 3,548.00	\$ 200.00	\$ 3,748.00
J: Machinery & Equipment	\$ 0.00	\$ 0.00	\$ 0.00
K: Capital Project	\$ 0.00	\$ 0.00	\$ 0.00
L: Other Expenses (See Detailed List on Page 8)	\$ 0.00	\$ 0.00	\$ 0.00
*TOTAL PROGRAM/PROJECT FUNDS	\$ 3,548.00	\$ 200.00	\$ 3,748.00
% of Program Budget	100.00%	0.00%	100%

List funding sources for total program/project costs in Column 2, Non-Metro Funds:

Other State, Federal or Local Government	\$ 0.00
United Way	\$ 0.00
Private Contributions (do not include individual donor names)	\$ 0.00 \$200
Fees Collected from Program Participants	\$ 0.00
Other (please specify)	\$ 0.00
Total Revenue for Columns 2 Expenses **	\$ 0.00 \$200

*Total of Column 1 MUST match "Total Request on Page 1, Section 2"

**Must equal or exceed total in column 2.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7 (circle one and use multiple sheets if necessary)	Column 1	Column 2	Column (1 + 2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
Building Rental	\$ 675.00	\$ 200.00	\$ 875.00
Entertainment (DJ)	\$ 300.00	\$ 0.00	\$ 300.00
Photographer	\$ 200.00	\$ 0.00	\$ 200.00
Advertisement, Flyers, Banners, Printing, Radio Time	\$ 1,050.00	\$ 0.00	\$ 1,050.00
Mementos: \$3.00 per person (capacity 125)	\$ 375.00	\$ 0.00	\$ 375.00
Food and refreshments	\$ 798.00	\$ 0.00	\$ 798.00
Pickup and Delivery Services	\$ 150.00	\$ 0.00	\$ 150.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
Total	\$ 3,548.00	\$ 200.00	\$ 3,748.00

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Detail of In-Kind Contributions for this PROGRAM only: Includes Volunteers, Space, Utilities, etc. (Include anything not bought with cash revenues of the agency).

Donor / Type of Contribution	Value of Contribution	Method of Valuation
N/A		
<p align="center"><i>Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)</i></p>	<p align="center">\$ 0.00</p>	

* DONOR INFORMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION. VOLUNTEERS NEED NOT BE LISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NOTING HOW MANY HOURS PER PERSON PER WEEK

Agency Fiscal Year Start Date: **May 1, 2022**

Does your Agency anticipate a significant increase or decrease in your budget from the current fiscal year to the budget projected for next fiscal year? NO YES

If YES, please explain:

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 7 – CERTIFICATIONS & ASSURANCES

By signing Section 7 of the Grant Application, the authorized official signing for the applicant organization certifies and assures to the best of his or her knowledge and/or belief the following Assurances and Certifications. If there is any reason why one or more of the assurances or certifications listed cannot be certified or assured, please explain in writing and attach to this application.

Standard Assurances

1. Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
2. Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the approval is automatically revoked and the funds will not be disbursed to our organization.
3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
6. Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
7. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end.
8. Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
10. Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
11. Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

Standard Certifications

1. The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
2. The Agency has a written Affirmative Action/Equal Opportunity Policy.
3. The Agency does not discriminate in employment or in provision of any service/program/activity/event based on age, color, disabled status, national origin, race, religion, sex, gender identity or sexual orientation, or Vietnam era veteran status.
4. The Agency certifies it will not require clients, recipients, or beneficiaries to participate in religious, political, fraternal or like activities in order to receive services/benefits provided with Louisville Metro Government funds.
5. The Agency understands the Americans with Disabilities Act (ADA) and makes reasonable accommodations.

Relationship Disclosure: List below any relationship you or any member of your Board of Directors or employees has with any Councilperson, Councilperson's family, Councilperson's staff or any Louisville Metro Government employee.

SECTION 8 – CERTIFICATIONS & ASSURANCES

I certify under the penalty of law the information in this application (including, without limitation, "Certifications and Assurances") is accurate to the best of my knowledge. I am aware my organization will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. I further certify that I am legally authorized to sign this application for the applying organization and have initialed each page of the application.

Signature of Legal Signatory:	<i>Yolanda Walker</i>	Date:	04/04/2022
Legal Signatory: (please print):	Yolanda Walker	Title:	President
Phone:	771-5745	Extension:	
Email:	cnlci1600@gmail.com		



Louisville Metro Government
Office of Management and Budget

Neighborhood Development Fund Training Attestation

Grantee Organization Name: California Neighborhood Leadership Council Inc.

Grantee Representative Name: Yolanda Walker

I agree that I am an authorized representative and/or signatory of the organization named above and attest to having viewed the Neighborhood Development Fund training presentation. I understand the reporting requirements of the Neighborhood Development Fund grant. Additionally, after viewing the presentation, I have correctly answered the below questions.

Please check:



I viewed the NDF training material on the website

Answer the following questions before signing (Circle or write in the correct answer).

1. The NDF funding your agency received is a gift from LMG? True or False
2. Name the three budget categories that require a detail list.
client assistance, community events and other expenses
3. If your agency charged gross pay to NDF, you are required to provide additional documentation to satisfy reporting requirements. True or False
4. Which four questions should your financial support documentation answer at all times?
who, what, when and where
5. Your agency is considered noncompliant if you do not account for funds received and/or your financial report is missing support documentation? True or False
6. Canceled check, bank statement, invoice and receipt are considered proof of payment. True or False.

Yolanda Walker
Grantee Representative Signature

4-4-2022
Date

NOTE: Please return to Roxanne Steele

E-mail address: Roxanne.Steele@louisvilleky.gov

Fax: 502-574-3219

Mailing Address: Louisville Metro Government
ATTN: NDF Coordinator
611 West Jefferson St.
Louisville, KY 40202

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

DEPARTMENT OF THE TREASURY

Date: **APR 05 2017**

CALIFORNIA NEIGHBORHOOD LEADERSHIP
COUNCIL INC
4402 SUNSET CIRCLE
LOUISVILLE, KY 40216-3500

Employer Identification Number:
46-0929908
DLN:
26053489003067
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
March 28, 2017
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947

CALIFORNIA NEIGHBORHOOD LEADERSHIP

Sincerely,

Stephen A. Martin

Director, Exempt Organizations
Rulings and Agreements

COMMONWEALTH OF KENTUCKY
FINANCE AND ADMINISTRATION CABINET
DEPARTMENT OF REVENUE
FRANKFORT
40601-2103

September 12, 2017

CALIFORNIA NBRHD LEADERSHIP COUNCIL INC
ATTN: MICHAEL BROOKS
4402 SUNSET CIRCLE
LOUISVILLE, KY 40216-3500

LOCATION ADDRESS

4402 SUNSET CIRCLE
LOUISVILLE, KY 40216-3500

PURCHASE EXEMPTION NUMBER: B28184

EFFECTIVE DATE: 09/12/2017

Dear Sir or Madam:

Based on the information submitted in your Application for Purchase Exemption -- Sales and Use Tax, you are hereby authorized to purchase tangible personal property or services, including utilities, without paying or reimbursing the vendor for the sales or use tax with respect to such purchases.

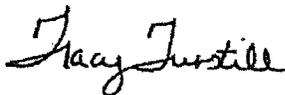
Your vendor is hereby authorized to sell tangible personal property or services, including accommodations and utilities, to you without receipt of sales or use tax, provided the vendor receives a copy of your purchase exemption certificate, Revenue Form 51A126, and retains the copy in the business's records. Every invoice should show that delivery was made to you and should bear the exemption permit number shown above. The vendor may deduct receipts from these sales on Line 4 of his/her return.

If any of the property purchased is not used within the exempt function of your charitable, educational, or religious institution, you will immediately report and pay the required tax measured by the purchase price of the property (you must contact the Department of Revenue immediately if such a situation arises). Any official or employee of the institution who uses official position to make tax-free purchases for personal use, or that of any other person, will be subject to the penalties provided in KRS 139.990 and other applicable laws.

This exemption authorization applies only to purchases made by your organization. If you are a nonprofit charitable, educational, or religious institution making retail sales of tangible personal property, a sales and use tax permit must be obtained for reporting and remitting the tax on such sales. For further information refer to the enclosed fact sheet. In addition, this authorization does not exempt your agency/organization from motor vehicle usage tax when purchasing a vehicle or u-drive-it tax when renting a motor vehicle.

In the event there is a change in your name, address, or operations from the information submitted in your application, you must notify the Department of Revenue in writing of the change immediately.

If you require additional information or assistance in this matter, please contact the undersigned at: Department of Revenue, Division of Sales and Use Tax, Station 67, PO Box 181, Frankfort, KY 40602-0181, or call 502-564-5170.



Tracy Tunstill, Supervisor
Certification Section
Division of Sales and Use Tax

Enclosure



It's just easier here.™

RepublicBank.com Member FDIC

601 West Market Street
Louisville, KY 40202-2700

CALIF NEIGH LDRSHP Council Inc
4402 Sunset Cir
Louisville KY 40216-3500

Account: #####7141
Statement Date: 10/31/22 Page 1

Your Account Managed By
CORPORATE CENTER BANKING CTR
(502) 588-1524
STACI BENTON
Sales & Service Manager

YOUR ACCOUNTS AT A GLANCE	
Checking Balance	\$ 193.47

ACCOUNT STATEMENT

REMINDER: IF THE BANK IS PRESENTED WITH THE SAME ITEM MULTIPLE TIMES (FOR EXAMPLE, BY A MERCHANT) AND RETURNS THAT SAME ITEM DUE TO INSUFFICIENT FUNDS, A \$36 RETURNED ITEM FEE WILL BE ASSESSED EACH TIME THE ITEM IS RETURNED. REFER TO YOUR DEPOSIT ACCOUNT RULES FOR DETAILS.

MONEYMGR FREE BUSINESS

Account #####7141

Beginning Balance on 10/01/22	\$	193.47		
+ Deposits and other Credits (0)	\$	0.00		
Interest Paid	\$	0.00	Average Daily Balance	193.00
- Checks and other Debits (0)	\$	0.00		
Service Charges	\$	0.00		
Ending Balance on 10/31/22	\$	193.47		

Information Copy.

Do not send to IRS.

Form **990-N**

Department of the Treasury Internal Revenue Service

Electronic Notice (e-Postcard)

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

OMB No. 1545-2085

2021

Open to Public Inspection

A For the **2021** Calendar year, or tax year beginning **2021-01-01** and ending **2021-12-31**

B Check if available

- Terminated for Business
- Gross receipts are normally \$50,000 or less

C Name of Organization: **CALIFORNIA NEIGHBORHOOD LEADERSHIP COUNCIL INC**
4402 SUNSET CIR, LOUISVILLE, KY, US, 40216

D Employee Identification Number **46-0929908**

E Website:

F Name of Principal Officer: **Michael Brooks**

4402 SUNSET CIR, LOUISVILLE, KY, US, 40216

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times is 15 minutes.

Note: This image is provided for your records only. Do Not mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.

ARTICLES OF INCORPORATION
OF

CALIFORNIA NEIGHBORHOOD LEADERSHIP COUNCIL, INC.

WE THE UNDERSIGNED, for purposes of forming a non-profit, non-stock corporation, under and pursuant to the laws of the Commonwealth of Kentucky, and more particularly Chapter 273, Kentucky Revised Statutes (KRS), hereby certify as follows:

ARTICLE I

The name of the Corporation shall be California Neighborhood Leadership Council, Inc.

ARTICLE II

The duration of the Corporation shall be perpetual.

ARTICLE III

The address of the registered office of the corporation is:

1705 West Oak Street
Louisville, KY 40210

The name of the initial registered agent for service of process, located at such address is:

Michael L. Brooks

The principal office of the Corporation is located at:

1600 West St. Catherine Street
Louisville, KY 40210

Other places of business in said city or elsewhere may be designated by resolution of the Board of Directors.

ARTICLE IV

The corporation is organized and shall be operated exclusively for charitable and educational purposes as described within Section 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), including for such purposes the making of distributions to organizations and individuals for the purpose of engaging in activity falling

within the purposes of the Corporation and permitted for an organization exempt under said Section 501(c)(3).

More specifically, the purposes of the Corporation shall be as follows:

1. To foster comprehensive community and neighborhood revitalization in the California neighborhood of Louisville, Kentucky.
2. To engage in community building and social capital development to support revitalization in the California neighborhood.
3. To educate the California community about neighborhood revitalization strategies, opportunities and activities, and to maximize the capacity of neighborhood residents to initiate and manage positive neighborhood change.
4. To increase positive perception of the California neighborhood, increase resident satisfaction with the quality of life, and increase residents' perception of safety and security in the neighborhood.
5. To engage in other educational and charitable activities consistent with these purposes.

ARTICLE V

The Corporation shall be irrevocably dedicated to, and operated exclusively for, non-profit purposes. No part of the net earnings of the Corporation shall inure to the benefit of or be distributable to its members, if any, directors, officers, or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article IV hereof.

ARTICLE VI

In carrying out the corporate purposes described in Article IV, the Corporation shall have all the powers granted by the laws of the Commonwealth of Kentucky, including in particular those listed in KRS 273.171 (or corresponding provision of any later Kentucky statute), except as follows and as otherwise stated in these Articles:

- A. No substantial part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing or distribution of statements), any political campaign on behalf of any candidate for public office.

B. Notwithstanding any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on by (1) a corporation exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code, or the corresponding provisions of any subsequent Federal tax laws, or (2) a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws.

C. If and so long as the Corporation is a private foundation as defined in Section 509(a) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws:

(1) the Corporation shall distribute its income for each taxable year at such time and in such manner as not to become subject to the tax on undistributed income imposed by Section 4942 of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws;

(2) the Corporation shall not engage in any act of self-dealing as defined in Section 4941(d) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws;

(3) the Corporation shall not retain any excess business holdings as defined in Section 4943(c) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws;

(4) the Corporation shall not make any investments in such manner as to subject it to tax under Section 4944 of the Internal Revenue Code, or corresponding provisions of any later tax laws; and

(5) the Corporation shall not make any taxable expenditures as defined in Section 4945(d) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws.

ARTICLE VII

The names and addresses of the incorporators are:

Michael L. Brooks
1705 West Oak St.
Louisville, KY 40210

Virginia M. Cox
901 South 17th St.
Louisville, KY 40210

Michael A. Dean
2200 Greenwood Ave.
Louisville, KY 40210

Debra Suzanne Eades
1758 Dumesnil St.
Louisville, KY 40210

Jane E. Grady
1554 W. Breckinridge St.
Louisville, KY 40210

ARTICLE VIII

The initial Board of Directors shall consist of five (5) Directors. The names and addresses of the members of the initial Board of Directors are:

Michael L. Brooks
1705 West Oak St.
Louisville, KY 40210

Virginia M. Cox
901 South 17th St.
Louisville, KY 40210

Michael A. Dean
2200 Greenwood Ave.
Louisville, KY 40210

Debra Suzanne Eades
1758 Dumesnil St.
Louisville, KY 40210

Jane E. Grady
1554 W. Breckinridge St.
Louisville, KY 40210

ARTICLE IX

The initial By-Laws shall be adopted by the initial Board of Directors. Thereafter, the Corporation shall be governed by the By-Laws.

Any director may be removed from office by the Board of Directors whenever in the Board's judgment the best interests of the corporation will be served thereby. Notice of intent to remove must be sent to the director in question at least forty-five (45) days prior to the meeting at which the action is to be taken. Said notice shall give the reasons for removal. The director to be removed may attend the meeting and address the Board prior to the taking of a vote on

removal. A majority vote of the directors present in a secret ballot, a quorum being present, shall be required for removal.

ARTICLE X

A director, officer, employee or member of the Corporation shall not be personally liable for the acts or debts of the Corporation, except insofar as the member may become personally liable by reason of his or her own acts or conduct pursuant to KRS 273.187 (or corresponding provision of any later Kentucky statute).

No director of the Corporation shall be held personally liable to the corporation for monetary damages for breach of his or her duties as a director, except for under the following circumstances:

- (A) For any transaction in which the director's personal financial interest is in conflict with the financial interests of the corporation;
- (B) For acts or omissions not in good faith or which involve intentional misconduct or are known to the director to be a violation of law; or
- (C) For any transaction from which the director derived an improper personal benefit.

ARTICLE XI

The Corporation may indemnify any director or officer or former director or officer of the Corporation against any expenses actually and reasonably incurred by him or her in connection with the defense of any action, suit or proceeding, civil or criminal, in which she or he is made a party by reason of being or having been such director or officer, except in relation to matters as to which she or he shall be adjudged in such action, suit or proceeding to be liable for negligence or misconduct in the performance of duty to the Corporation. The Corporation may make any other indemnification permitted by law and authorized by its Articles of Incorporation, or its By-laws or a resolution adopted after notice to members, if any, entitled to vote.

ARTICLE XII

In the event of dissolution of the Corporation, the Board of Directors shall pay or make provision for the payment of all liabilities of the Corporation. The remaining assets, if any, shall be distributed to one or more organizations organized and operated exclusively for charitable or educational purposes that at the time qualify as an exempt organization under Section 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), or to a state or local government for a public purpose, as the board of directors shall determine.

email contract
open@qam

675
200dep
Check 875
#102 -200
675

In teamup!

Signature Venues

Private Party Hall Rental Agreement
Louisville, KY
502-996-0565 (Representative Brooke)

Date of Event: April 9, 2022 Hall: St. Paul

Responsible person(s): Mary Hall Yolanda Walker

Phone number(s): 502-807-0305 502 813-1720

Email address: rodneyllovescat@gmail.com

Number of people attending the event: 100 Event Type: Event for California Neighborhood

Price of hall: \$675 Room: Hall Time: 4hr 6p-10p

Save the date fee received: N/A (will be applied to your balance at final payment. Will be forfeited if event is cancelled) (Must be paid for events 3 months or more out) \$100 for an event \$500 or less \$200 for event \$501 and up

Hall Refundable cleaning/damage deposit received: \$200 Check # 102 Calif Neigh
Leadership

Call the Venue to set up a deposit pick up (5 days after the event date)

Non-refundable after 7 days of booking date (contract signed) if cancelled.

All other payments applied toward the event can be transferred to a new event (minus the deposit and save the date fee) if booked within 6 months.

Price of House: N/A Deposit for the House: N/A

Non-refundable cleaning fee for the House: \$125 N/A

For Weddings we request the information below.

Photographer: _____ phone number _____

Event Planner: _____ phone number _____

Half of the balance is due 6 months prior to the event.
Balance must be paid 30 days prior to the event.
Failure to pay balance 30 days prior to event can result in cancellation.

Client Initials MH

3-14-22

We supply
We supply 60" round tables and chairs. We supply 4-6 rectangle tables for large events, 3 to 4 for smaller events and seat 8 people per round table. Long tables are 4 to 6ft depending on what is available. We may be able to provide additional rectangle tables if they are available. We provide trash bags in the trash cans. You are responsible for any additional trash bags needed.

We have multiple halls at some locations and there can be other events going on at the same time. We do not have designated parking at our venues with multiple events.

Deposit will be refunded if there is no damage, and the following is completed:

Take all trash to the dumpster. Clean up the parking lot/patio area from your event.

No cooking inside of the building. You may only warm food in the kitchen. No grease laden vapors can be produced.

Only painters' tape or mounting putty may be used on the wall. No glitter, colored crepe paper or confetti.

ALL TABLES AND CHAIRS MUST BE PUT BACK TO THE ORIGINAL STATE AFTER EVENT. If they are damaged the cost will be deducted from your deposit.

(NO SMOKING) IF SMOKING IS DETECTED IN THE BUILDING, YOU WILL FORFEIT THE DEPOSIT.

Turn off all lights.

Turn off thermostats unless they are in locked box.

Clean up all spills and dropped food. Remove all food from stove, oven, refrigerator, counter tops, etc.

Any damage to the venues/halls beyond normal wear and tear will be billed to the Client or deducted from the deposit. Damage includes but is not limited to foreign objects, drinks, food, or bodily fluids. Vomit located in any building or the parking lot, or patio that is not properly cleaned up and removed will result in an automatic excessive cleaning fee and could forfeit your deposit.

Client Responsibilities:

Vendors/Client are responsible for providing all equipment needed to load-in and load-out of the building including but not limited to carts, dollies, ramps, etc. These items will not be provided by the venue/hall under any circumstance. The use of confetti, glitter, birdseed, rice, and/or anything of the sort are not allowed inside or outside the premise. The use of any of the prohibited items, previously listed, will result in an automatic excessive cleaning fee and could result in forfeiting your deposit.

All electrical and data cords must be properly secured.

All flames (candles) must be enclosed and clean burning. The Client is responsible for the actions of any vendors or other agents, including but not limited to caterers, photographers, entertainers, decorators, and audio-visual companies contracted or not contracted for the event. Any damages beyond normal wear and tear will be billed to the Client, even if caused by an event vendor. Any event vendor causing damage will not be allowed back in the facility until damage, repairs, and payments are complete.

All guests must be in the event hall. Gatherings outside or in the parking lot/area is NOT permitted. Always keep children in the Hall unless arriving or departing from the event. Do not enter another Hall that is not being used for your event.

General:

Signature Venues, Time to Be Free, Koppel Building & Construction, Oliva Properties, Koppel Holdings, Dayrl Koppel, Maureen Oliva (Koppel), Valley Hope Center, or any other business entity owned/operated by said companies/parties and its employees, are not responsible for lost or damaged items during your event. Please know the Client is responsible for all actions of their guests and vendors. Any damages caused by guests or vendors will be the responsibility of the Client. You may use your own caterer and alcohol may be brought in. **NO GLASS BEER BOTTLES.** If you are serving alcohol, we recommend a certified bartender to serve it. All arrangements with caterers/bar services are the responsibility of the client.

If the Client's event requires a permit or license/insurance from any local or state government entity, the Client agrees they will secure all necessary permits/licenses/insurance at the Client's expense. Furthermore, it is the responsibility of Client to know if a permit/license is needed for the hosted event. According to Kentucky State's Alcohol Beverage Law, it is illegal to serve alcoholic beverages to anyone under 21. **Selling of alcohol requires a liquor license. Licenses must be provided to us prior to the event. Failure to do so can and will result in a non-refundable cancellation/shut down of event.**

The Client renting the Hall is responsible for observing and enforcing all alcohol related laws; Signature Venues, Time to Be Free, Koppel Building & Construction, Oliva Properties, Koppel Holdings, Dayrl Koppel, Maureen Oliva (Koppel), Valley Hope Center, or any other business entity owned/operated by said companies/parties and its employees are not responsible. Alcoholic beverages are not to be taken outside. All alcohol beverages should be served by licensed and insured caterer and/or bar service.

Smoking or the use of e-cigarettes is not permitted anywhere inside the buildings. Deposit will be forfeited.

Each party shall indemnify and hold harmless, Signature Venues, Time To Be Free, Koppel Building & Construction, Oliva Properties, Koppel Holdings, Dayrl Koppel, Maureen Oliva (Koppel), or any other business entity owned/operated by said companies/parties and its employees, their agents and employees, against any and all damages, claims, or other liability due to personal injury or death, or damage to, or loss of, the property of others, arising out of its use of the venues/halls.

FORCE MAJEURE Should events beyond the reasonable control of Signature Venues, Time to Be Free, Koppel Building & Construction, Oliva Properties, Koppel Holdings, Dayrl Koppel, Maureen Oliva (Koppel), Valley Hope Center, or any other business entity owned/operated by said companies/parties and its employees and the Client, including but not limited to (1) acts of God, (2) war, including armed conflict, (3) government regulation or advisory (including travel advisory warnings by the government, World Health Organization, or limitations on gatherings), (4) quarantine, (5) civil disturbance in the local area, (6) strikes (7) terrorism or threats of terrorism in the United States as substantiated by governmental warnings or advisory notices, (8) curtailment of transportation services or facilities which would materially affect attendees from attending the event, (9) disaster, fire, earthquakes, tornados

(10) unseasonable extreme inclement weather (11) shortages or disruption of the electrical power supply causing blackouts or rolling blackouts or other essential utilities, or (12) any other comparable conditions that occur either in the location of the event or in the counties or states of origin of at least 40 percent of the guests or along their routes of travel, making the event commercially impracticable, impracticable to perform, illegal, or impossible to fully perform under these guidelines as the Parties originally contracted, the affected Party may choose to postpone the event to another available day adhering to the current guidelines and pricing at the time of rebooking. If the client chooses to not rebook within 6 months of the notice, all monies paid will be forfeited and not made available to be used on a new agreement.

Refunds: Signature Venues does not refund money. The Client may postpone their event and reschedule within 6 months (for the same event). If the Client cancels the event in its entirety all monies paid will be forfeited. Signature Venues may offer a credit towards a future event but absolutely no refunds will be given.

We did not offer Set the Date.

Thermostats will be set on 72 during the winter months and 68 during the summer months.

~~If you are selling tickets to an event, you will be required to purchase approved insurance coverage (event insurance policy) and provide proof of such coverage prior to the event. Failure to do so can and will result in cancellation.~~

PHOTO RELEASE Signature Venues reserve the right to use images of your event and/or guests for marketing purposes.

ACCEPTANCE I, the Client, have read the entire contents of these guidelines, and not relying on verbal statements not contained herein, understand, and accept this agreement.

~~We have signs posted within each Venue that specifies clean up, noise ordinance, table and chair information. Please review these signs before your event.~~

Signature required:

Signature Venues Representative Ashley B Johnson Date 3-14-22

Client signature Mary Hall Date 03-14-22

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Yolanda Walker

2 Business name/disregarded entity name, if different from above
California Neighborhood Leadership Council Inc.

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC

C Corporation

S Corporation

Partnership

Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Other (see Instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
1632 Hale Ave.

6 City, state, and ZIP code
Louisville, Kentucky, 40210

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN, later*.

Social security number

				-				
--	--	--	--	---	--	--	--	--

OR

Employer identification number

4	6	-	0	9	2	9	9	0	8
---	---	---	---	---	---	---	---	---	---

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ *Yolanda Walker*

Date ▶ **4-4-2022**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding, later*.



Kentucky Secretary of State

Michael G. Adams

CALIFORNIA NEIGHBORHOOD LEADERSHIP COUNCIL, INC.

File Annual Report	File Certificate of Assumed Name (DBA)	
Change Address or Registered Agent	File Dissolution	
Printable Forms	Subscribe to changes made to this entity	Certificates

General Information

Organization Number	0825129
Name	CALIFORNIA NEIGHBORHOOD LEADERSHIP COUNCIL, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	3/22/2012
Organization Date	3/22/2012
Last Annual Report	3/7/2022
Principal Office	4402 SUNSET CIRCLE LOUISVILLE LOUISVILLE, KY 40216
Registered Agent	MICHAEL L. BROOKS 4402 SUNSET CIRCLE LOUISVILLE, KY 40216

Current Officers

CEO	Michael L Brooks
President	Yolanda M Walker
Vice President	Jane E Grady
Director	Yolanda M Walker
Director	Michael L Brooks
Director	Jane E Grady

Director	Virginia M Cox
Director	Carol Travis Clark
Director	Deathra Shipley
Managing Member	Wilma E Voorhies
CFO	Carol Travis Clark
Executive	Michael L Brooks
Executive	Virginia M Cox
Executive	Deathra Shipley

Show Individuals / Entities listed at time Of formation

Director	MICHAEL L BROOKS
Director	MICHAEL A DEAN
Director	JANE E GRADY
Director	VIRGINIA M COX
Director	DEBRA SUZANNE EADES
Incorporator	MICHAEL L BROOKS
Incorporator	MICHAEL A DEAN
Incorporator	JANE E GRADY
Incorporator	VIRGINIA M COX
Incorporator	DEBRA SUZANNE EADES

Show Images

Show Assumed Names

Show Activities

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Kentucky Unbridled Spirit

0825129

Michael G. Adams
KY Secretary of State
Received and Filed

2/19/2021 9:58:22 PM

Fee receipt: \$15.00

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

Michael G. Adams
Secretary of State
P. O. Box 1150
Frankfort, KY 40602-1150
(502) 564-3490
<http://www.sos.ky.gov>

**Annual Report
Online Filing**

ARP

Company: CALIFORNIA NEIGHBORHOOD LEADERSHIP COUNCIL, INC.
Company ID: 0825129
State of origin: Kentucky
Formation date: 3/22/2012 12:00:00 AM
Date filed: 2/19/2021 9:58:22 PM
Fee: \$15.00

Principal Office

4402 SUNSET CIRCLE
LOUISVILLE
LOUISVILLE, KY 40216

Registered Agent Name/Address

MICHAEL L. BROOKS
4402 SUNSET CIRCLE
LOUISVILLE, KY 40216

Current Officers

Managing Member	Wilma E Voorhies	1600 West Garland Avenue, Louisville, KY 40210
CEO	Michael L Brooks	4402 Sunset Circle, Louisville, KY 40216
CFO	Carol Travis Clark	1645 Hale Avenue, Louisville, KY 40210
Vice President	Jane E Grady	1554 West Breckinridge Street, Louisville, KY 40210
President	Yolanda M Walker	1632 Hale Avenue, Louisville, KY 40210
Executive	Michael L Brooks	4402 Sunset Circle, Louisville, KY 40216
Executive	Virginia M Cox	901 South 17th Street, Louisville, KY 40210
Executive	Deathra Shipley	1644 Gallagher Street, Louisville, Ky 40210

Directors

Director	Yolanda M Walker	1632 Hale Avenue, Louisville, KY 40210
Director	Michael L Brooks	4402 Sunset Circle, Louisville, KY 40216
Director	Jane E Grady	1554 W Breckinridge Street, Louisville, KY 40210
Director	Virginia M Cox	901 South 17th Street, Louisville, KY 40210
Director	Carol Travis Clark	1645 Hale Avenue, Louisville, KY 40210
Director	Deathra Shipley	1644 Gallagher Street, Louisville, Ky 40210

County:	Jefferson
Business size:	Small
Business type:	Other

Signatures

Signature	yolanda walker
Title	President



CALLING ALL DESCENDANTS CALIFORNIA

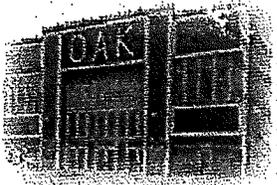
&

VICTORY PARK HISTORICAL FORUM

DRESS ATTIRE: BLUE JEANS



BRING YOUR NEIGHBORHOODS PICTURES



TELL US ABOUT YOUR BLOCK



1st Annual Historical Neighborhood Storytelling
Forum

Date: April 9, 2022

Time: 6:00-10:00 pm

St. Paul Hall

2304 Crums Lane

Louisville, Ky. 40216

All Monetary Donation Are Welcome

For Tickets Call: Ms. Mary Hall
(502) 807-0305

COME SHARE YOUR STORIES ABOUT THE NEIGHBORHOOD

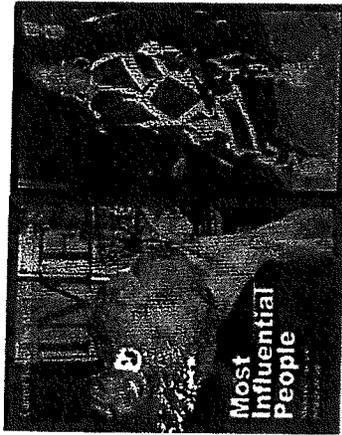


BRING YOUR FAMILY'S PICTURES



Ms. Mary Hall Founder:

"I am always trying to find away to get California & Victory Park back to being a sharing and caring neighborhood as a community."



Mary Hall was born, February 7, 1957 in Louisville, Kentucky. She was raised in the California and Victory Park Neighborhood where she still reside.

There 5 siblings, (Nath (deceased) Kenneth, Rose, Yvette, and Yvonne Hall in her family.

Her Father Lester Hall and Mother Mary Hall lived in the California & Victory Park Neighborhood since October of 1955.

They move from Ramer Alabama with her oldest brother Nath Hall.

Nath attended the California school that was located between 16th & 17th street on Kentucky.

Nath won the drawing contest for the crossing guard that Jefferson County Public School used for decades. Nath pictures that the family held so dear to their heart, (safety guard) was lost in a fire in 1995.

Mary Goal; is to make California and Victory Park the way it use to be, a place where people were proud of their homes, the whole neighborhood would take care of each other, raise their children, make sure everybody had fresh fruit, vegetables, meat and everything the community as a black family.

Agenda

WELCOME:

Mary Hall Founder & Organizer

VISION STATE:

Pastors Brenda Burney
(Rock Café Ministries)

All Pastors

&

Neighborhood Leaders

READING OF PROGRAM

Anna Weathers

ACTIVITIES OF THE NIGHT

Storytelling

Photo Sessions

Prayer

Dinner

"Enjoyment & Getting To Know Your Neighborhood"



ACTIONS ITEMS:

Historical Storytelling Forum

is calling for Board Members,

Committee Members or

Volunteers for next year event.

Petitions Signing

Brief description of this event:

This Historical Storytelling Forum Event is to provide a little normalcy during this pandemic crisis. Many have lost loved ones to Covid-19 and have gain a lot of unhealthy stress.

This event is to obtain a recorded historical documentation of the lives of descendants that has lived or is currently living in our community.

This forum consists of descendants and families sharing their stories about the blocks they lived/live on and their recollection of this striving community.

Along with bringing pictures to help reminisce and provide recorded history of our senior's, youth , stakeholders and residents to help our future generations understand the richness of the community they call home/will call home in future years to come.

California has a rich history that should not be lost.