


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

Applicant/Program: West Louisville Youth Space

Executive Summary of Request: District Four is allocating funds to support the annual community recognition and breakfast fundraiser that celebrates leaders in the community who work with the youth.

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.

Is this program/project a fundraiser?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Is this applicant a faith based organization?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does this application include funding for sub-grantee(s)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

<u>4</u>		<u>\$3000</u>	<u>6/5/2015</u>
District #	Primary Sponsor Signature	Amount	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. NA

Approved by:

_____	_____
Appropriations Committee Chairman	Date

Clerk's Office Only:

Request Amount: _____	Committee Amended Appropriation: _____
Original Appropriation: _____	Council Amended Appropriation: _____

**OFFICE OF METRO COUNCIL CLERK
REVIEWED**

DATE 7/16/15 TIME 9:28

3802 West Market St
P. O. Box 11580
Louisville, KY 40251
Telephone 502-776-9126
Fax - 502- 776-9159



Fax

To: Hydro King From: Margaret

Fax: 594-3363 Pages: 4

Phone: _____ Date: 7/13/15

Re: _____ cc: _____

- Urgent
- For Review
- Please Comment
- Please Reply
- Please Recycle

• Comments:

If you need anything else, please let me know

M

Margaret Kaelin

From: District 4 [District4@louisvilleky.gov]
Sent: Thursday, January 29, 2015 11:30 AM
To: margaret.outreach@Mw.twcbc.com
Subject: FW: 4 district NDF CIF Request 2015 (Boxes)
Attachments: NDF APPLICATION EFFECTIVE APRIL 2014.pdf

From: District 4
Sent: Wednesday, January 28, 2015 11:27 PM
To: 'margaret.outreach@insightbb.com'
Subject: RE: 4 district NDF CIF Request 2015 (Boxes)

Hello Margret,
President Tandy agreed to commit \$3,000 to the fundraiser. Please fill out the attached NDF request and submit it back to our office with the proper document.

Yours in Service,

Keidra D.C. King
Metro Council District Four
Councilman David Tandy
601 West Jefferson Street
Louisville, Kentucky 40202
Office: 502.574.1104



**All meeting and public appearance request should be sent to District4@louisvilleky.gov **

From: District 4
Sent: Monday, January 26, 2015 4:05 PM
To: margaret.outreach@insightbb.com
Subject: RE: 4 district NDF CIF Request 2015 (Boxes)

Thanks Margaret!

Yours in Service,

Keidra D.C. King
Metro Council District Four
Councilman David Tandy
601 West Jefferson Street
Louisville, Kentucky 40202
Office: 502.574.1104





LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 -- 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 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.
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 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.

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 7 -- 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>Philla Von Kanel</i>		Date: <i>7-29-15</i>
Legal Signatory: (please print): Philla "Sis" Von Kanel		Title: Director
Phone: 776-9126	Extension:	Email: sis.outreach@mw.twcbc.com



**P. O. Box 11580
Louisville, KY 40251
Phone: 502 776-9126
Fax: 502 776-9159**

Formally St. Anthony Community Outreach Center

July 13, 2015

TO WHOM IT MAY CONCERN:

West Louisville Youth Space Board of Directors do not have a set term and elections are held only if a person who is an Officer would like to step-down and be a Board Member.

An election is then held to fill the vacancy that is created.

Respectfully,

A handwritten signature in cursive script that reads "Margaret Kaelin".

**Margaret Kaelin
Administrative Assistant**



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization:		West Louisville Youth Space, Inc.	
<small>(as listed on: http://www.sos.ky.gov/business/records)</small>			
Main Office Street & Mailing Address: 3802 W. Market St., Louisville, KY 40212; P. O. Box 11580 Louisville, KY 40251			
Website: N/A			
Applicant Contact:	Margaret Kaelin	Title:	Administrative Assistant
Phone:	776-9126	Email:	margaret.outreach@mw.twcbc.com
Financial Contact:	Philla "Sis" Von Kanel	Title:	Director
Phone:	776-9126	Email:	sis.outreach@mw.twcbc.com
Organization's Representative who attended NDF Training: Margaret Kaelin & Philla Von Kanel			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	3802 W. Market St		
Council District(s):	5	Zip Code(s):	40212
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: West-End Community Breakfast			
Total Request: (\$)	\$3000.00	Total Metro Award (this program) in previous year: (\$)	\$3000.00
Purpose of Request (check all that apply):			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current Year Projected Budget <input checked="" type="checkbox"/> List of Board of Directors (include term & term limits) <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 <input type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense		<input 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 required <input checked="" type="checkbox"/> Staff including the 3 highest paid staff	
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:	Family Service Fund	Amount: (\$)	5,200.00
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Has the applicant met the BBB Charity Review Standards? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

West Louisville Youth Space, Inc., formally St. Anthony Community Outreach Center is an afterschool program whose vision is to help the children achieve their goals and overcome the hardship of growing up in less than desirable condition and become productive adults.

Our mission is "People helping people succeed" is reflected in the vision because by helping these youth reach productive adulthood we have given them the tools to achieve their goals.

West Louisville Youth Space offers help to any child in Metro Louisville between the ages of five through eighteen with their school work, school projects and assignments. In the Computer Lab the youth can access the special programs that is connected to Jefferson County Public School to receive tutoring on subjects that they are having problems with in school. Their teacher can check on the progress of the child the next day in school. We have a volunteer who has agreed to teach the youth ages nine and up the basic of sewing. There are board games available for some of the recreational features of the program since with the relocation we no longer have a gym.

Arrangement are in the stages to use a gym in the area one day a week.

The center is open three days a week from 4:00 - 7:30 PM Tuesday, Wednesday and Thursday. The children are served a hot evening meal before on each of those days.

The center can accommodate up to seventy-five youth each of the days we are open.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 – 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.):

West-End Community Breakfast will be held on March 6, 2015 at 7:30 AM until 9:00 AM. The breakfast is designed to unite the local businesses and organization in the community identify potential partners and to make those attending aware of some of the issues facing the youth attending the center. With the relocation of the center it is important to make those in the community of what we are doing to help the youth in the area.

The breakfast also recognizes the contribution of individuals who have been exemplary in the task of helping our children and the community.

The breakfast will be held this year at the new location at 3802 W. Market Street which is part of the Portland Memorial Baptist Church.

The West-End Community Breakfast serves as a fund raiser to generate funding the programs and recreation activities at West Louisville Youth Space.

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

The requested funds that are received will be utilized to help offset the expenses associated with the breakfast including the advertising, catering, decor, entertainment, etc.

With our new location we would like to make the new community as well as those in the area we left aware of what help is available to the youth.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

All the proceeds that are gained from this fundraiser will be use for the programs that are offered to the youth who attend our facility.

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:

Effective October 24, 2013, reimbursements should not be made 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.

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.



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:

With the funds gained by this program, it will insure that the services that are offered each of the three day the center will have the adequate supplies. This will include some supplies that are given to the youth whose parent's can not buy school supplies for assignments, some food to feed them since with the relocation at the present we don't have the Kids Cafe program until we can show that our number of youth are attending.

We can best measure the outcome by the number of people who have made a reservation to join the center for the celebration.

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.

Besides the congregation of Portland Memorial Baptist Church who is providing us with space for the breakfast as well as a place for our youth,



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 – 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	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (Attach Detailed List)			
G: Professional Service Contracts			
H: Program Materials	3,000.00	1930.00	4930.00
I: Community Events & Festivals (Attach Detail List)			
J: Small Equipment			
K: Capital Equipment			
L: Other Expenses (Attach Detail List)			
*TOTAL PROGRAM/PROJECT FUNDS	3,000.00	1930.00	4930.00
% of Program Budget	60 %	40 %	100%

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

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	1930.00
Fees Collected from Program Participants	
Other (please specify)	
Total Revenue for Columns 2 Expenses **	

**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 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
<p align="center"><i>Total Value of In-Kind</i> (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)</p>		0

*** 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: July 1, 2015

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

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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.

Anthony Williams Metro Parks Dept. Board Member

SECTION 7 – 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>Shella West Kassel</i>	Date:	
Legal Signatory: (please print):	Title:	
Phone:	Extension:	Email:

WEST-END COMMUNITY BREAKFAST
MARCH 6, 2015

PROPOSED BUDGET

ITEMS	METRO AMOUNT	NON METRO AMOUNT	TOTAL COST
Printing material & mailing	\$290.00	\$180.00	\$470.00
Table covers, table decoration & favors	350.00	550.00	900.00
Food	1,800.00	500.00	2,300.00
Music & sound system	600.00	700.00	1,300.00
TOTAL	\$3,040.00	\$1,930.00	\$4,970.00



Department of the Treasury
Internal Revenue Service

P.O. Box 2508, Room 4010
Cincinnati OH 45201

In reply refer to: 4077550279

Mar. 04, 2013 LTR 4168C 0

000000 00

00029303

BODC: TE

WEST LOUISVILLE YOUTH SPACE INC
PO BOX 11580
LOUISVILLE KY 40251-0580



038158

Employer Identification Number: [REDACTED]
Person to Contact: Sophia Brown
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Jan. 07, 2013, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in March 1994.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

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

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

Form 990 header section including: For the 2012 calendar year, or tax year beginning 07/01/12, and ending 06/30/13; Name of organization: WEST LOUISVILLE YOUTH SPACE, INC.; Gross receipts: 139,192; Form of organization: Corporation; State of legal domicile: KY.

Part I Summary table with columns for Prior Year and Current Year. Rows include: 1. Mission statement (VARIOUS PROGRAMS FOR A SAFE AFTER-SCHOOL PROGRAM ENVIRONMENT); 2-7. Governance and membership data; 8-12. Revenue (Total revenue: 198,052); 13-19. Expenses (Total expenses: 119,847); 20-22. Net assets or fund balances (Total assets: 73,426).

Part II Signature Block. Includes signature of PHILLA "SIS" UPON KANEL, Director, dated 2-11-14. Preparer: Thomas I. Adkisson, DePrie & Adkisson, CPA's, Louisville, KY. Date: 02/08/14.

Form 990 (2012) WEST LOUISVILLE YOUTH SPACE, INC.

Part III Statement of Program Service Accomplishments

X

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:

VARIOUS PROGRAMS FOR A SAFE AFTER-SCHOOL PROGRAM ENVIRONMENT

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

Yes No

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

Yes No

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

4a (Code:) (Expenses \$ 13,822 including grants of \$) (Revenue \$) RECREATIONAL PROGRAMS: BASKETBALL ACADEMY-2 WEEK PROGRAM THAT INCLUDES A CONFLICT RESOLUTION AND MANAGEMENT ACTIVITY. GYM ACTIVITIES-YEAR ROUND ACTIVITIES SUCH AS VOLLEYBALL, KICKBALL, BASKETBALL, BOARD GAMES, ROLLER SKATING AND MOVIES. FITNESS PROGRAM-NUTRITION PROGRAMS AND EXERCISE PROGRAMS. TEEN ROOM-(13 AND OVER) SELF-ESTEEM ACTIVITIES

4b (Code:) (Expenses \$ 31,748 including grants of \$) (Revenue \$) ACADEMIC PROGRAMS: COMPUTER LABS-HANDS ON INSTRUCTION TRAINING TO STUDENTS IN CREATIVE AND PRACTICAL COMPUTER SKILLS. KIDS TRAX-CONNECTS TO LOCAL SCHOOL SYSTEM TO KNOW WHERE KIDS NEED HELP. LIBRARY-TEACHING AND RESEARCH NEEDED TO DO HOMEWORK. STUDY LAB-ONE ON ONE TUTORING

4c (Code:) (Expenses \$ 7,539 including grants of \$) (Revenue \$) ENLIGHTENMENT PROGRAMS: ARTS AND CRAFTS-CREATIVE OUTLET TO SUPPORT INTELLECTUAL GROWTH. EFFECTIVE PARENTING-OPPORTUNITIES FOR PARENTS TO GET THE TOOLS AND SKILLS OF TIME, BUDGET, STRESS MANAGEMENT, DISCIPLINE AND COMMUNICATION. FIELD TRIPS-REWARDS FOR CENTER PARTICIPANT WHO HAVE FULLY INTEGRATED WITHIN THE PROGRAM. COMMUNITY EVENTS-VALENTINE DANCE, EASTER EGG HUNT, DERBY PARTY, HEALTH FAIR, BACK TO SCHOOL CELEBRATIONS, HALLOWEEN HAUNTED HOUSE, THANKSGIVING DINNER, CHRISTMAS PARTY WITH SANTA.

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

(Expenses \$ 10,100 including grants of \$) (Revenue \$)

4e Total program service expenses 63,209

Form 990 (2012) **WEST LOUISVILLE YOUTH SPACE, INC.**

Part IV Checklist of Required Schedules

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

Form 990 (2012) **WEST LOUISVILLE YOUTH SPACE, INC.**

Part IV Checklist of Required Schedules (continued)

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

orm 990 (2012) WEST LOUISVILLE YOUTH SPACE, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
5a	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
5b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5c	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Form 990 (2012) WEST LOUISVILLE YOUTH SPACE, INC.

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

Section A. Governing Body and Management

Table with 4 columns: Question ID, Question Text, Yes, No. Rows include 1a, 1b, 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 4 columns: Question ID, Question Text, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed None
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: THE ORGANIZATION 2234 WEST MARKET STREET KY 40212 502-776-9126 LOUISVILLE

Form 990 (2012) **WEST LOUISVILLE YOUTH SPACE, INC.**

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

Check if Schedule O contains a response to any question in this Part VII

Section A: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DIANNE HOBB EXECUTIVE DIRECTOR	40.00 0.00	X		X			40,000	0	0	
(2) PHILLA "SIS" VON KANEL	32.00 0.00	X					25,000	0	0	
(3) FATHER JOHN BURKE	0.00 0.00	X					0	0	0	
(4) JOE HAMMELL	0.00 0.00	X					0	0	0	
(5) MICHAEL HASKEN	0.00 0.00	X					0	0	0	
(6) ROBERT HATFIELD	0.00 0.00	X					0	0	0	
(7) DAVE HIGGINS	0.00 0.00	X					0	0	0	
(8) KEVIN GRAY	0.00 0.00	X					0	0	0	
(9) JULIE ICE	0.00 0.00	X					0	0	0	
(10) KIMBLE JOHNSON	0.00 0.00	X					0	0	0	
(11) TONY RATTERMAN	0.00 0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) TOM SHANNON	0.00 0.00	X						0	0	0
(13) AL SAUNDERS	0.00 0.00	X						0	0	0
(14) ANTHONY WILLIAMS	0.00 0.00	X						0	0	0
(15) JEANNINE WISE	0.00 0.00	X						0	0	0
(16) ROBERT PILLISCHAFSKE	0.00 0.00	X						0	0	0
(17)										
(18)										
(19)										
1b Sub-total								65,000		
c Total from continuation sheets to Part VII, Section A								65,000		
d Total (add lines 1b and 1c)								65,000		

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

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

Section B. Independent Contractors

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

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

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

Form 990 (2012) **WEST LOUISVILLE YOUTH SPACE, INC.**

Part VIII Statement of Revenue
 Check if Schedule O contains a response to any question in this Part VIII.

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	5,000			
	1b Membership dues				
	1c Fundraising events				
	1d Related organizations				
	1e Government grants (contributions)	3,750			
	1f All other contributions, gifts, grants, and similar amounts not included above	84,496			
	g Noncash contributions included in lines 1a-1f: \$		93,246		
h Total. Add lines 1a-1f					
Program Service Revenue	2a				
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1	1	
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6a Gross rents				
	b Less: rental exps.				
	c Rental inc. or (loss)				
	d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory				
	b Less: cost or other basis & sales exps.				
	c Gain or (loss)				
	d Net gain or (loss)				
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a 44,645			
	b Less: direct expenses	b			
	c Net income or (loss) from fundraising events		44,645		
	9a Gross income from gaming activities. See Part IV, line 19	a			
b Less: direct expenses	b				
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a				
b Less: cost of goods sold	b				
c Net income or (loss) from sales of inventory					
Miscellaneous Revenue					
11a MISCELLANEOUS		1,300	1,300		
b					
c					
d All other revenue		1,300			
e Total. Add lines 11a-11d		139,192	1,301	0	
12 Total revenue. See instructions.				0	

WEST LOUISVILLE YOUTH SPACE, INC.

Form 990 (2012)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).
 Check if Schedule O contains a response to any question in this Part IX

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	68,162	25,047	43,115	
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,123		1,123	
9 Other employee benefits	5,218	1,916	3,302	
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal	495		495	
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	3,476	401	3,075	
13 Office expenses				
14 Information technology	5,622		5,622	
15 Royalties				
16 Occupancy	479		479	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,364		3,364	
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROGRAM SUPPLIES	42,626	34,563		8,063
b CONTRACT LABOR	18,096		18,096	
c REPAIRS AND MAINTENANCE	2,908		2,908	
d TELEPHONE EXPENSE	2,429		2,429	
e All other expenses	5,819	1,282	4,537	
25 Total functional expenses. Add lines 1 through 24e	159,817	63,209	88,545	8,063
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Form 990 (2012) **WEST LOUISVILLE YOUTH SPACE, INC.**

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X

		(A) Beginning of year		(B) End of year
		77,019	1	54,150
			2	
			3	
		133	4	133
			5	
			6	
			7	
			8	
			9	
			10c	
			11	
			12	
			13	
			14	
			15	
		77,152	16	54,283
		3,726	17	1,482
			18	
			19	
			20	
			21	
			22	
			23	
			24	
			25	
		3,726	26	1,482
			27	
		73,426	27	52,801
			28	
			29	
			30	
			31	
			32	
		73,426	33	52,801
		77,152	34	54,283

Form 990 (2012) **WEST LOUISVILLE YOUTH SPACE, INC.**

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	139,192
2	Total expenses (must equal Part IX, column (A), line 25)	159,817
3	Revenue less expenses. Subtract line 2 from line 1	-20,625
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	73,426
5	Net unrealized gains (losses) on investments	
6	Donated services and use of facilities	
7	Investment expenses	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain in Schedule O)	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	52,801

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b		X
2c		
3a		
3b		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990 or Form 990-EZ. See separate instructions.

Name of the organization

WEST LOUISVILLE YOUTH SPACE, INC.

Employer identification number

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
a Type I b Type II c Type III—Functionally integrated d Type III—Non-functionally integrated
e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
(ii) A family member of a person described in (i) above?
(iii) A 35% controlled entity of a person described in (i) or (ii) above?

Table with 2 columns: Yes, No. Rows: 11g(i), 11g(ii), 11g(iii)

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

Table with 7 main columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization in col. (i) listed in your governing document?, (v) Did you notify the organization in col. (i) of your support?, (vi) Is the organization in col. (i) organized in the U.S., (vii) Amount of monetary support. Sub-columns for Yes/No are provided for (iv), (v), and (vi).

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

Schedule A (Form 990 or 990-EZ) 2012

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	209,859	109,070	134,659	158,665	93,246	705,499
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	209,859	109,070	134,659	158,665	93,246	705,499
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						705,499

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	209,859	109,070	134,659	158,665	93,246	705,499
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	114	1,552	8	1	1	1,676
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						707,175
12 Gross receipts from related activities, etc. (see instructions)					12	176,273
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	99.76%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	99.72%
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%

- 19a **33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
- b **33 1/3% support tests—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions



Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Area with horizontal dotted lines for supplemental information.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 8a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

WEST LOUISVILLE YOUTH SPACE, INC.

Employer identification number

[REDACTED]

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	Revenue	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>BREAKFAST/GOLF</u> (event type)	(event type)	<u>None</u> (total number)	(add col. (a) through col. (c))
1	Gross receipts	44,645			44,645
2	Less: Contributions				
3	Gross income (line 1 minus line 2)	44,645			44,645
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
10	Direct expense summary. Add lines 4 through 9 in column (d)				
11	Net income summary. Combine line 3, column (d), and line 10				44,645

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	Revenue	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
1	Gross revenue				
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
6	Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities:

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

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain:



- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity operated in:

		%
a	The organization's facility	13a
b	An outside facility	13b
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
- c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

WEST LOUISVILLE YOUTH SPACE, INC.



Form 990, Part III, Line 4d - All Other Accomplishment

OTHER KIDS PROGRAMS.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

No documents available to the public

Request for Taxpayer Identification Number and Certification

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

Name (as shown on your income tax return)
West Louisville Youth Space, Inc.

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:
 Individual/sole proprietor C Corporation S Corporation Partnership Trust/estate
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ C
 Other (see instructions) ▶

Exemptions (see instructions):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____

Address (number, street, and apt. or suite no.)
P. O. Box 11580
 City, state, and ZIP code
Louisville, KY 40251

Requester's name and address (optional)

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

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Employer identification number

Note. If the account is in more than one name, see the chart on page 4 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 on page 3.

Sign Here Signature of U.S. person ▶ Philip "Dix" VanKanal Date ▶ 6-11-14

General Instructions

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

Future developments. The IRS has created a page on www.irs.gov/w9 for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

1. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

Our Board Members

Board President	Tony Ratterman	Ratterman Funeral Home
Board Treasurer	Julie Ice	Doe Anderson
Board Member	Anthony Williams	Metro Parks
Board Member	Father John Burke	Priest – Good Shepherds
Board Member	Kevin Gray	UPS
Board Member	Joe Hammell	Retired –Whayne Supply
Board Member	Robert Pillischasske	Hershey Company
Board Member	Robert Hatfield	Retired Ford Motor Company
Board Member	David Higgins	Retired – Brown Forman
Board Member	Kimble Johnson	LPL Financial
Board Member	Al Saunders	Retired – DJJ
Board Member	Tom Shannon	Retired Executive Net Work
Board Member	Michael Hasken	Hasken Properties
Board Member	Jeannine Wise	Brown Forman

RECEIVED & FILED

ARTICLES OF INCORPORATION
OF
ST. ANTHONY COMMUNITY OUTREACH CENTER, INC. JUN 18 10 02 AM '93

\$ 8.00

BOB BARRAGE
SECRETARY OF THE STATE
COMM. OF KENTUCKY
BY Bob Barrage

The undersigned Incorporator, Tom Shannon, executes these Articles of Incorporation for the purpose of forming and does hereby form a nonprofit corporation under the laws of the Kentucky Nonprofit Corporation Act, KRS 273.161 et seq., in accordance with the following provisions:

ARTICLE 1.

Name

The name of the Corporation is St. Anthony Community Outreach Center, Inc. (the "Corporation").

ARTICLE 2.

Purposes and Powers

The purposes for which the Corporation is formed, the business and objects to be carried on and promoted by it, and the powers granted to it, are as follows:

A. The purposes of the Corporation include:

[1] To serve the citizens of the St. Anthony neighborhood, who are among the neediest citizens of the city of Louisville, by providing education through classes, tutoring and counselling for children, youth and adults; and by providing for the physical needs of the community through recreation, childcare, employment services, and a food shelter;

[2] In furtherance of the foregoing, to host Bible studies and prayer meetings, to develop and supervise West End

athletics events and leagues, to offer recreation to the youth of the area through basketball and other athletic competition, to offer adult literacy training and State approved GED diploma training, to offer grade school and high school tutoring and counseling, to offer chemical dependency recovery programs, to offer babysitting and nursery services and employment services, and to operate a food shelter for those in need;

[3] To minister to the general, salient needs of the St. Anthony Community (the "Community"), and to establish a volunteer network to provide members of the Community with resource and support persons who can guide and support them and assist them in realizing their goals;

[4] To utilize the existing resources and energies of the Community and the City of Louisville to benefit the Community by identifying persons with gifts and talents, and involving them in the needs of the Community, thereby maximizing the use of personal talents and minimizing the reliance financial gifts;

[5] In furtherance of the foregoing, to raise public awareness of the Community and its needs, and to be a cooperative member of the West End Community and a catalyst in the creation of a coalition of similar groups;

[6] To engage in activities properly relating to the foregoing.

B. The Corporation is irrevocably dedicated to and is organized and operated exclusively for charitable purposes within the meaning of Section 501(c)(3) of the Code (or its successor provision). The Corporation may receive contributions and fees, and shall distribute its funds for public, charitable, educational, cultural, humanitarian and/or scientific purposes, as set forth in these Articles. In carrying out its corporate purposes, the Corporation shall have all the powers allowed corporations by the Kentucky Nonprofit Corporation Act, KRS 273.161 et seq.; provided, however, that the Corporation shall not have or exercise any power inconsistent with or prohibited by the provisions of Paragraphs (B), (C), (D), and, if applicable, (E).

C. As limited by Section 501(c)(3) of the Code, it is expressly not the purpose of the Corporation, and the Corporation is not empowered, to participate or intervene in (including the publication or distributing of statements) any political campaign on behalf of any candidate for public office, nor to devote more than an insubstantial part of its activities to carrying on propaganda or otherwise attempting to influence legislation.

D. Any other provision of these Articles to the contrary notwithstanding, the Corporation shall have no capital stock and no power to issue certificates of stock nor to declare dividends; no part of the net earnings of the Corporation shall inure to the benefit of any private shareholder or individual; and the Corporation shall not carry on any activities denied to: [i] a corporation described in Section 501(c)(3) of the Code, including prohibited

transactions defined in Section 503 of the Code; or [ii] a corporation, contributions to which are deductible under Section 170(c)(2) of the Code.

E. Any other provision of these Articles to the contrary notwithstanding, this Corporation shall, if the following provisions of law are applicable to it: [i] distribute its income for each fiscal year at such time and in such manner as not to be subject to the tax under Section 4942 of the Code; [ii] not engage in any act of self dealing as defined in Section 4941 of the Code; [iii] not retain any excess business holdings as defined in Section 4943 of the Code; [iv] not make any investments in such manner as to subject the Corporation to tax under Section 4944 of the Code; and [v] not make any taxable expenditures as defined in Section 4945 of the Code.

ARTICLE 3.

Duration

The Corporation shall have perpetual existence.

ARTICLE 4.

Registered Office and Resident Agent

The street address of the initial registered office and principal place of business of the Corporation is 2222 West Market Street, Louisville, Kentucky 40212.

The name of the initial registered agent at that address is Father Killian Speckner.

ARTICLE 5.

Principal Office

The mailing address of the principal office of the Corporation is 2222 West Market Street, Louisville, Kentucky 40212.

ARTICLE 6.

Incorporator

The name and street address of the Incorporator is Tom Shannon, 7100 Grade Lane, Louisville, Kentucky 40213.

ARTICLE 7.

Directors

The affairs of the Corporation shall be managed by a Board of Directors in the manner provided in the Bylaws. In addition, the Bylaws shall provide the number and classes of directors, the term of office, method of election, removal procedures and such other matters pertaining or relating to the duties and office of director.

The nine (9) members of the initial Board of Directors of the Corporation shall serve until the first annual election of directors and until their successors are elected and qualified.

The names and addresses of the initial directors are:

Tom Shannon
7100 Grade Lane
Louisville, Kentucky 40213

Mark Buchter
122 South 24th Street
Louisville, Kentucky 40212

Father Killian Speckner
2222 West Market Street

Rudolf Davidson
201 No. 46th Street

Louisville, Kentucky 40212

Molly Leonard
2915 Portland Avenue
Louisville, Kentucky 40212

Jim Brangers
5505 Sterling Drive
Louisville, Kentucky 40216

Sister Rebecca Miles
2235 West Market Street
Louisville, Kentucky 40212

Louisville, Kentucky 40212

Chuck Williams
106 North 36th Street
Louisville, Kentucky 40212

Bill Howard
1128 West Main Street
Louisville, Kentucky 40203

ARTICLE 8.

Indemnification

Each person who is or was a member, trustee, officer or director of the Corporation, whether elected or appointed, and each person who is or was serving at the request of the Corporation as a member, trustee, officer or director of another corporation, whether elected or appointed, or of a partnership, joint venture, trust or other enterprise, including service with respect to employee benefit plans, including the heirs, executors, administrators or estate of any such person, shall be indemnified by the Corporation to the full amount against any liability, and the reasonable cost; or expense (including attorneys' fees, monetary or other judgments, fines, excise taxes or penalties and amounts paid or to be paid in settlement) incurred by such person in such person's capacity as a member, trustee, officer, director or employee or arising out of such person's status as a member, trustee, officer, director or employee; provided, however, no such person shall be indemnified against any such liability, cost or expense incurred in connection with any action, suit or proceeding

in which such person shall have been adjudged liable on the basis that personal benefit was improperly received by such person or if such indemnification would be prohibited by law. Such right shall be a contract right and shall include the right to be paid by the Corporation the reasonable expenses incurred in defending any threatened or pending action, suit or proceeding in advance of its final disposition; provided, however, that such advance payments of expenses shall be made only after delivery to the Corporation of an undertaking by or on behalf of such person to repay all amounts so advanced if it shall be determined that such person is not entitled to such indemnification. Any repeal or modification of this Article shall not affect any rights or obligations then existing. If any indemnification payment required by this Article is not paid by the Corporation within ninety (90) days after a written claim has been received by the Corporation, the member, trustee, officer, director or employee may at any time thereafter bring suit against the Corporation to recover the unpaid amount and, if successful in whole or in part, shall be entitled to be paid also the expense of prosecuting such claim. The Corporation may maintain insurance, at its own expense, to protect itself and any such person against any such liability, cost or expense, whether or not the Corporation would have the power to indemnify such person against such liability, cost or expense under the Kentucky Nonprofit Corporation Act or under this Article, but it shall not be obligated to do so. The indemnification provided by this Article shall not be deemed exclusive of any other rights which those seeking indemnification

may have or hereafter acquire under any bylaw, agreement, statute, vote of members or Board of Directors or otherwise. If this Article or any portion thereof shall be invalidated on any ground by any court of competent jurisdiction, then the Corporation shall nevertheless indemnify each such person, to the full extent permitted by any applicable portion of this Article that shall not have been invalidated or by any other applicable law. For the purpose of this Article, reference to "the Corporation" includes all constituents absorbed in a consolidation or merger as well as the resulting or surviving corporation.

ARTICLE 9.

Limitation of Director Liability

No director shall be personally liable to the Corporation for monetary damages for breach of his or her duties as a director except for liability:

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.

If the Kentucky Revised Statutes are amended after the effective date of these Articles of Incorporation to authorize

corporate action further eliminating or limiting the personal liability of directors, then the liability of a director of the Corporation shall be eliminated or limited to the fullest extent permitted by the Kentucky Revised Statutes, as so amended. Any repeal or modification of this Article shall not adversely affect any right or protection of a director of the Corporation existing at the time of such repeal or modification.

ARTICLE 10.

Membership

The Corporation shall have no voting members. Any provisions pertaining to nonvoting members shall be as set out in the Bylaws.

ARTICLE 11.

Dissolution

Dissolution shall be accomplished in accordance with Chapter 273 of the Kentucky Revised Statutes or its successor. Upon dissolution of the Corporation, the Board of Directors shall, after paying or making provisions for the payment of all liabilities of the Corporation, dispose of all corporate assets by distributing such assets to organizations that are organized and operated exclusively for charitable purposes and at the time qualify as exempt organizations under Section 501(c)(3) of the Code, or its successor provision, or to such organizations described under Section 170(c)(1) of the Code, or its successor

provision, as the Board of Directors shall determine. If possible, the purposes of such charitable donee or donees should be substantially similar to the charitable purposes of the Corporation. Any such assets not disposed of by the Board of Directors shall be disposed of by the Circuit Court of the County in which the principal office of the Corporation is then located, to such organization or organizations organized and operated exclusively for charitable, educational or scientific purposes as shall, at that time, qualify as exempt organizations or as organizations under Section 501(c)(3) of the Code, or its successor provision. If possible, the Court shall cause such remaining assets to be transferred to a donee or donees that have purposes that are substantially similar to the charitable purposes of the Corporation.

BOOK 452 PAGE 494

Signed by the Incorporator this 6/17/93 day of June, 1993.

Tom Shannon
Tom Shannon

THIS INSTRUMENT WAS PREPARED BY:

Martha Jo Klosterman
Martha Jo Klosterman, Esq.
WYATT, TARRANT & COMBS
Citizens Plaza
Louisville, Kentucky 40202
(502) 589-5235

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BOOK 452 PAGE 494

A 78540

Document No: 1993078540
Lodged By: KLOSTERMAN
Recorded On: Jun 22, 1993 12:41:16 P.M.
Total Fees: \$17.50
County Clerk: Rebecca Jackson
Deputy Clerk: STACIE2

END OF DOCUMENT

8

St Anthony Community Outreach Center

Philla "Sis" Von Kanel
Director

Bill Green
Program Director

Margaret Kaelin
Administrative Asst.

Ann Tobin
Study Room
Coordinator

Chris Manning
Cook

Margaret Kaelin

From: King, Keidra [Keidra.King@louisvilleky.gov]
Sent: Friday, March 06, 2015 9:52 AM
To: 'margaret.outreach@insightbb.com'; margaret.outreach@Mw.twcbc.com
Subject: follow-up
Attachments: President Tandy's Public Appearance Form.doc

Hello Margaret,

We did not have the event on the President Schedule to attend this Friday. Our office did not receive an invite for the breakfast. Only the NDF application. I did receive your email notifying us that the event had been moved to March 20th. Please fill out the attached public appearance form and submit it back to our office at your earliest convenience. Lisa Gray will follow-up with you if President Tandy is able to attend. Additionally, the following items were incorrect on your NDF application and need to be corrected.

On page one where it says , the following items are required attachments you did not mark

Current years projected budget —
Current financial statements —
Articles of incorporation —
Staff including the three highest paid staff —

Not only did you need to put a check mark on the boxes for the aforementioned items you need submit those items in your packet. They were not included, and they are required.

Additionally on page 6 in the area that said the total revenue for column 2 expense is blank and also where it said

List funding sources for the total program/project cost in column 2, non-metro funds you left that blank.

You need to specify how you got the \$1930 in the box above. Did that funding come from state, federal local government, united way, private contributions, fees collected from program participants or other. Lastly, on page 8 you need to disclose any one on your board or who works for your non-profit that is related to a metro government employee. If no one has a relative working for metro you need to mark N/A

Yours in Service,

Keidra D.C. King
Metro Council District Four
Councilman David Tandy
601 West Jefferson Street
Louisville, Kentucky 40202
Office: 502.574.1104



**All meeting and public appearance request should be sent to District4@louisvilleky.gov **

West Louisville Youth Space, Inc.
Profit & Loss
February 2015

	Feb 15
Ordinary Income/Expense	
Income	
Donations 1A--Public	85.00
Dave Higgins	85.00
Total Donations 1A--Public	85.00
Special Event	
Community Breakfast	2,936.00
Business	385.00
Individual	3,321.00
Total Community Breakfast	3,321.00
Total Special Event	3,321.00
Total Income	3,406.00
Expense	
Academics	109.37
Computer Lab	275.00
Homework Lab	384.37
Total Academics	375.00
Contract Labor	9.31
Enlightenment	9.31
Incentives	9.31
Total Enlightenment	9.31
Kitchen	
Food	90.45
DTC Kids Cafe Support	90.45
Total Food	18.93
Paper Products	109.38
Total Kitchen	24.99
Occupancy Exp	24.99
Hosting Fee	24.99
Total Occupancy Exp	24.99
People	
Payroll Expenses	1,041.67
Administrative Wages	1,041.67

West Louisville Youth Space, Inc.
Profit & Loss
February 2015

	Feb 15
FICA	<u>79.70</u>
Total Payroll Expenses	<u>1,121.37</u>
Total People	1,121.37
Support	
Flowers & Donations	80.56
Office Equip Maintenance	65.00
Office Equipment Lease	48.00
Office Supplies	11.98
Postage	<u>98.00</u>
Total Support	<u>303.54</u>
Total Expense	<u>2,327.96</u>
Net Ordinary Income	<u>1,078.04</u>
Net Income	<u><u>1,078.04</u></u>

West Louisville Youth Space, Inc.
 Budget
 July 2014 through June 2015

	Jul 14	Aug 14	Sep 14	Oct 14	Nov 14	Dec 14	Jan 15
Ordinary Income/Expense							
Income							
Community Events Donations							
Donations 1A--Public			1,200.00				
Civic				500.00	900.00		800.00
Corporate					500.00		
Computer Lab						4,000.00	
Corporate - Other						5,000.00	
Total Corporate					900.00	9,000.00	
Dave Higgins							3,500.00
Eid Humphries							1,800.00
Foundation							8,250.00
Individual	750.00				170.00		95.00
Pledge Cards							10.00
Raffle Proceeds				700.00			
Religious Org	961.94			80.00	3,105.00		440.00
Total Donations 1A--Public	1,711.94		1,200.00	1,280.00	4,675.00	11,335.00	10,590.00
Donations 1B--Agencies							
United Way							
Total Donations 1B--Agenci..							
Donations 1C--Govt							
City							
Total Donations 1C--Govt							
Special Event							
Basketball					1,300.00		
Community Breakfast					1,300.00		
Business							617.59
Individual							400.00
Sponsorship							
Total Community Breakfast					800.00		1,017.59
Dance							
Golf Scramble							
Business	1,400.00						
Individual	1,200.00	300.00			650.00		
Golf Scramble - Other		380.00			1,375.00		
Total Golf Scramble	2,600.00	680.00			737.00		
Reading Camp							
Sponsorship							
Total Reading Camp					2,962.00		
Total Special Event	2,600.00	680.00	2,962.00		185.00	1,800.00	1,017.59
Total Income	4,311.94	680.00	4,162.00	1,390.00	7,060.00	16,435.00	11,577.59

West Louisville Youth Space, Inc.
 Budget
 July 2014 through June 2015

Expense	Jul 14	Aug 14	Sep 14	Oct 14	Nov 14	Dec 14	Jan 15
Academics							
Academic Incentives				3,200.00	327.38	100.00	500.00
Computer Lab				100.00	100.00	100.00	100.00
Homework Lab				75.00	75.00	75.00	75.00
Incentives							
Kids Trax							
Library							
School Supplies			0.00	150.00	100.00	200.00	200.00
Special Camps				100.00	100.00	250.00	250.00
Support Supplies							
Total Academics			0.00	3,625.00	702.38	616.98	1,225.00
Bank Service Charges	5.00	5.00	5.00	3.00	3.00	3.00	3.00
Contract Labor	1,000.00	130.00	50.00	50.00	250.00	125.00	175.00
Dues and Subscriptions			100.00	45.00			70.00
Enrichment							
Arts & Crafts			200.00	600.00	100.00	1,700.98	77.66
Community Events						250.00	
Drugs & Alcohol				284.11	200.00	150.00	200.00
Effective Parenting				200.00	200.00	200.00	200.00
Family Night				26.11			
Field Trips				100.95		250.00	
Health Issues	150.00		89.98	100.00		100.00	
Incentives							
Mentoring Program							
Performing Arts							
Pride Items							
Safety					300.00		
Workshop							
Youth Life Skills				50.00	100.00	100.00	75.00
Total Enlightenment	150.00		259.98	1,241.17	700.00	2,750.98	502.68
Grant Writing			500.00				
Kitchen							
Community Events Food				75.00	1,327.04	902.83	
Equip. Maintenance					100.00	100.00	
Food				75.00	75.00	75.00	75.00
DTC Kids Care Support				30.00	30.00	30.00	30.00
Meetings Food					498.00		
Special Events Food							
Total Food				105.00	801.00	105.00	105.00
Kitchen Cleaning							
New Equipment			50.00	50.00	50.00	50.00	50.00
Paper Products				50.00	100.00	50.00	50.00
Total Kitchen			50.00	280.00	2,228.04	1,207.83	155.00
Occupancy Exp							
Cable	42.25	42.25	42.25	42.25	150.00	150.00	150.00
Facilities & Grounds							
Bldg Improvements							
Bldg Repairs							
Maintenance	241.63	180.68	32.50	438.56			150.00
Total Facilities & Grounds	241.63	180.68	32.50	438.56			150.00

West Louisville Youth Space, Inc.
Budget
July 2014 through June 2015

	Jul 14	Aug 14	Sep 14	Oct 14	Nov 14	Dec 14	Jan 15
Fire System							
Gas & Electric	3,500.00	1,265.89	1,600.00	0.00	100.00		300.00
Heat Maintenance							24.99
Hosting Fee	24.99	24.99	25.00	24.99	24.99	24.99	400.00
Insurance	959.35		400.00	182.57	195.92	195.63	195.92
Telephone		362.04	185.96	25.00	25.00	25.00	25.00
Trash Removal				350.00			450.00
Water							
Total Occupancy Exp	4,768.22	1,875.85	2,285.31	1,063.56	485.91	395.62	1,985.91
People							
Payroll Expenses							
Administrative Wages						5,704.88	1,130.00
FICA						831.00	810.02
Kitchen Wages					650.00		510.00
Programs Wages					2,300.00	2,300.00	2,300.00
R.C. Wages	2,987.50	4,748.00					
State Unemp							
Payroll Expenses - Other	15.00			0.00			
Total Payroll Expenses	3,002.50	4,748.00		0.00	2,950.00	8,835.88	4,550.02
Professional Fees							
Staff Development				150.00			150.00
Professional Fees - Oth...				150.00			150.00
Total Professional Fees				313.00			313.00
Worker's Compensation		348.00					
Total People	3,002.50	5,096.00		463.00	2,950.00	8,733.88	5,013.02
Recreation							
Athletics		0.00					
Basketball		50.00		50.00		100.00	100.00
Other Athletics							
Total Athletics		50.00		50.00		100.00	50.00
Entertainment							
Fitness				50.00	50.00	50.00	50.00
Fun Field Trips				250.00			
Games & Supplies	100.00			250.00	50.00	50.00	100.00
Special Fun Events				50.00			50.00
Teen Room				50.00	50.00		50.00
Youth Room				50.00	50.00		50.00
Total Recreation	150.00	50.00		750.00	200.00	200.00	300.00
Repairs							
Building Repairs							500.00
Computer Repairs				50.00	50.00	50.00	50.00
Total Repairs				50.00	50.00	50.00	550.00
Support							
Accounting Fees							
Auto				40.00	40.00	40.00	40.00
Mileage							
Total Auto				40.00	40.00	40.00	40.00

West Louisville Youth Space, Inc.
 Budget
 July 2014 through June 2015

	Jul 14	Aug 14	Sep 14	Oct 14	Nov 14	Dec 14	Jan 15
Board Development				45.00			50.00
Flowers & Donations				50.00	50.00	118.72	85.00
Newsletters					100.00		
Office Equip Maintenance	48.00	48.00	48.00	48.00	130.00	130.00	130.00
Office Equipment Lease				200.00	252.46	300.00	150.00
Office Supplies				98.00	49.00		98.00
Partner Development					125.00		
Postage							
Raffle							
Volunteer Development						500.00	
Total Support	48.00	48.00	48.00	481.00	746.46	1,088.72	553.00
Total Expense	9,123.72	7,204.85	3,298.29	8,051.53	8,325.79	15,171.81	10,243.61
Net Ordinary Income	-4,811.78	-6,524.85	863.71	-6,671.53	-1,266.79	1,283.19	1,334.08
Other Income/Expense							
Funded Programs							
Reading Camp	2,790.90	3,259.11					
Funded Programs - Other	0.00						
Total Funded Programs	2,790.90	3,259.11					
Special Event Expenses							
Community Breakfast							
Dance							
Golf Supplies	298.00			5,000.00			216.00
Golf Fees	500.00						
Golf Supplies - Other							
Total Golf Supplies	798.00		5,000.00				
Total Special Event Expenses	798.00	3,258.11	5,000.00				216.00
Total Other Expense	3,589.90	3,258.11	5,000.00				216.00
Net Other Income	-3,589.90	-3,259.11	-5,000.00				-216.00
Net Income	-8,401.58	-9,783.96	-4,136.29	-6,671.53	-1,266.79	1,283.19	1,148.08

West Louisville Youth Space, Inc.
Budget
July 2014 through June 2015

	Feb 15	Mar 15	Apr 15	May 15	Jun 15	Jul '14 - Jun 15	TOTAL
Ordinary Income/Expense							
Income							
Community Events Donations		600.00					3,600.00
Donations 1A--Public							3,000.00
Civic							4,000.00
Corporate							5,900.00
Computer Lab							9,900.00
Corporate - Other							4,500.00
Total Corporate							3,195.00
Dave Higgins	1,000.00						16,250.00
Ed Humphries			1,295.00		100.00		8,665.00
Foundation	10,000.00						1,500.00
Individual			1,500.00				4,245.00
Pledge Cards				2,490.00	5,050.00	100.00	1,713.31
Raffle Proceeds						100.00	200.00
Religious Org							52,968.31
Total Donations 1A--Public		11,000.00	2,795.00	3,061.37	5,150.00	200.00	5,000.00
Donations 1B--Agencies							5,000.00
United Way							5,000.00
Total Donations 1B--Agenci...							5,200.00
Donations 1C--Govt		1,300.00	1,300.00				50.00
City							2,500.00
Special Event							3,000.00
Basketball							4,690.00
Community Breakfast	1,230.71		3,000.00		2,500.00		5,000.00
Business	555.00		1,600.00				737.00
Individual			5,000.00				15,603.40
Sponsorship							2,500.00
Total Community Breakfast		1,785.71	9,500.00		2,500.00		8,277.00
Dance							2,850.00
Golf Scramble							4,690.00
Business							737.00
Individual							850.00
Golf Scramble - Other							10,000.00
Total Golf Scramble							10,000.00
Reading Camp		10,000.00					10,000.00
Sponsorship							10,000.00
Total Reading Camp		10,000.00					850.00
Total Special Event		11,785.71	9,500.00	5,000.00	50.00	850.00	36,430.40
Total Income	24,685.71	13,595.00	8,061.37	5,200.00	6,050.00	103,198.71	

West Louisville Youth Space, Inc.
Budget
 July 2014 through June 2015

Expense	Feb 15	Mar 15	Apr 15	May 15	Jun 15	TOTAL Jul 14 - Jun 15
Academics						
Academic Incentives	200.00	80.19	155.00	400.00	500.00	800.00
Computer Lab	115.09	100.00	100.00	300.00	300.00	5,419.64
Homework Lab	100.00	75.00	75.00	75.00	100.00	1,100.00
Incentives	75.00	649.00	75.00	75.00	75.00	675.00
Kids Trax		345.00		200.00		649.00
Library						745.00
School Supplies	100.00		100.00	1,000.00	100.00	700.00
Special Camps						1,000.00
Support Supplies	100.00	100.00				600.00
Total Academics	690.09	1,349.19	430.00	1,975.00	1,075.00	11,688.64
Bank Service Charges	3.00	2.89	3.00	3.00	3.00	41.89
Contract Labor	500.00	439.00	25.00	525.00	1,000.00	4,270.00
Dues and Subscriptions					15.00	230.00
Enlightenment						
Arts & Crafts						
Community Events	50.98	218.74	400.00	200.00	300.00	500.00
Drugs & Alcohol				1,000.00		3,948.38
Effective Parenting		400.00				250.00
Family Night	175.00	200.00	200.00	150.00	300.00	400.00
Field Trips	200.00	200.00	200.00	175.00	200.00	1,239.11
Health Issues	11,417	100.00	80.00	33.39	10.99	1,775.00
Incentives						291.98
Mentoring Program						810.93
Performing Arts		300.00				200.00
Pride Items	300.00					300.00
Safety			75.00			800.00
Workshop	50.00				50.00	150.00
Youth Life Skills		100.00			100.00	200.00
Total Enlightenment	787.45	1,318.74	1,035.00	1,558.39	780.99	11,065.38
Grant Writing	11.06					511.06
Kitchen						
Community Events Food	600.80	814.43	100.00	60.95		3,705.85
Equip. Maintenance	100.00					475.00
Food	75.00	75.00	75.00	75.00	75.00	675.00
DTC Kids Cafe Support	30.00	30.00	30.00	30.00	30.00	270.00
Meetings Food						496.00
Special Events Food						
Total Food	105.00	105.00	105.00	105.00	105.00	1,441.00
Kitchen Cleaning		50.00			50.00	300.00
New Equipment	100.00	50.00	50.00			200.00
Paper Products	60.00				50.00	450.00
Total Kitchen	955.60	1,019.43	265.00	215.95	205.00	6,571.85
Occupancy Exp						
Cable	150.00	150.00	150.00	150.00	150.00	1,369.00
Facilities & Grounds						
Bldg Improvements		600.00				600.00
Bldg Repairs		257.20				150.00
Maintenance						1,150.57
Total Facilities & Grounds		857.20				1,900.57

West Louisville Youth Space, Inc.
Budget
July 2014 through June 2015

	Feb 15	Mar 15	Apr 15	May 15	Jun 15	TOTAL Jul '14 - Jun 15
Fire System	200.00		500.00			300.00
Gas & Electric		400.00				7,165.89
Heat Maintenance		24.99	24.99	24.99	24.99	400.00
Hosting Fee					24.99	289.88
Insurance		391.90	700.00	198.58	1,526.03	3,285.38
Telephone		25.00	25.00	25.00	25.00	2,963.50
Trash Removal					25.00	225.00
Water			350.00		250.00	1,400.00
Total Occupancy Exp	398.99	1,849.09	1,749.99	398.57	2,331.40	19,309.22
People						
Payroll Expenses						
Administrative Wages	1,130.00	1,130.00	2,896.34	3,050.34	3,050.34	18,191.70
FICA	610.00	611.00	735.00	756.00	756.00	4,909.02
Kitchen Wages		900.00			900.00	2,860.00
Programs Wages	2,300.00	2,300.00	2,300.00	2,300.00	2,300.00	18,400.00
R.C. Wages					1,270.80	9,006.30
State Unemp				26.00	0.00	0.00
Payroll Expenses - Other						40.00
Total Payroll Expenses	4,040.00	4,941.00	6,031.34	6,131.34	8,277.14	53,507.02
Professional Fees						300.00
Staff Development						500.00
Professional Fees - Oth...	500.00					800.00
Total Professional Fees	500.00	500.00	500.00	500.00	500.00	1,183.00
Worker's Compensation						
Total People	4,540.00	4,941.00	6,031.34	6,442.34	8,277.14	55,490.02
Recreation						
Athletics						0.00
Basketball						275.00
Other Athletics			75.00	75.00		275.00
Total Athletics			75.00	75.00	50.00	450.00
Entertainment	50.00	50.00	50.00	50.00	50.00	250.00
Fitness						708.00
Fun Field Trips			108.00		100.00	450.00
Games & Supplies	50.00	50.00	50.00	50.00	50.00	500.00
Special Fun Events		200.00		300.00		300.00
Teen Room	50.00		50.00		50.00	300.00
Youth Room	50.00		50.00		50.00	300.00
Total Recreation	200.00	300.00	383.00	400.00	300.00	3,233.00
Repairs						
Building Repairs						500.00
Computer Repairs	50.00	50.00	50.00	50.00	50.00	450.00
Total Repairs	50.00	50.00	50.00	50.00	50.00	950.00
Support						
Accounting Fees	3,500.00					3,500.00
Auto						360.00
Mileage	40.00	40.00	40.00	40.00	40.00	360.00
Total Auto	40.00	40.00	40.00	40.00	40.00	360.00

West Louisville Youth Space, Inc.
Budget
July 2014 through June 2015

	Feb 15	Mar 15	Apr 15	May 15	Jun 15	TOTAL Jul 14 - Jun 15
Board Development					75.00	220.00
Flowers & Donations		50.00		50.00		403.72
Newsletters	100.00				100.00	300.00
Office Equip Maintenance		445.95	65.00	65.00	130.00	705.95
Office Equipment Lease	130.00	130.00	130.00	130.00	130.00	1,232.00
Office Supplies	14.68	120.00	42.99	170.00		1,250.13
Partner Development	500.00					600.00
Postage	59.40	98.00		198.00	150.00	750.40
Raffle						125.00
Volunteer Development		500.00			250.00	1,250.00
Total Support	4,344.08	1,433.95	277.99	653.00	875.00	10,597.20
Total Expense	12,481.27	12,703.29	10,240.32	12,221.25	14,892.53	123,958.26
Net Ordinary Income	12,204.44	891.71	-2,178.95	-7,021.25	-8,842.53	-20,759.55
Other Income/Expense						
Funded Programs					5,000.00	11,050.01
Reading Camp						0.00
Funded Programs - Other						
Total Funded Programs					5,000.00	11,050.01
Special Event Expenses						
Community Breakfast	825.00	1,000.00	345.00			2,386.00
Dance			400.00			400.00
Golf Supplies						5,299.00
Golf Fees						500.00
Golf Supplies - Other						6,799.00
Total Special Event Expenses	825.00	1,000.00	745.00	745.00	5,000.00	8,585.00
Total Other Expense	825.00	-1,000.00	745.00	745.00	5,000.00	19,635.01
Net Other Income	-825.00	-1,000.00	-745.00	-745.00	-5,000.00	-19,635.01
Net Income	11,378.44	-108.29	-2,923.95	-7,021.25	-13,842.53	-40,384.56

WEST LOUISVILLE YOUTH SPACE, INC.

General Information

Organization Number	0316648
Name	WEST LOUISVILLE YOUTH SPACE, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	6/18/1993
Organization Date	6/18/1993
Last Annual Report	6/10/2014
Principal Office	2234 W. MARKET ST. LOUISVILLE, KY 40212
Registered Agent	KATHYRN WALLACE 2619 ALIA CIRCLE LOUISVILLE, KY 40222

Current Officers

President	<u>TONY RATTERMAN</u>
Secretary	<u>JULIE ICE</u>
Treasurer	<u>JULIE ICE</u>
Director	<u>Joe Hammell</u>
Director	<u>DAVID HIGGINS</u>
Director	<u>TOM SHANNON</u>

Individuals / Entities listed at time of formation

Director	<u>TOM SHANNON</u>
Director	<u>KILLIAN SPECKNER</u>
Director	<u>MARK BUCHTER</u>
Director	<u>RUDOLF DAVIDSON</u>
Director	<u>MOLLY LEONARD</u>
Incorporator	<u>TOM SHANNON</u>

Images available online

Documents filed with the Office of the Secretary of State on September 15, 2004 or thereafter are available as scanned images or PDF documents. Documents filed prior to September 15, 2004 will become available as the images are created.

<u>Annual Report</u>	6/10/2014	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	6/5/2013	1 page	<u>PDF</u>	
<u>Principal Office Address Change</u>	1/8/2013 5:47:40 PM	1 page	<u>PDF</u>	
<u>Amendment</u>	11/7/2012	1 page	<u>tiff</u>	<u>PDF</u>

Registered Agent name/address change	10/22/2012 3:20:36 PM	1 page	PDF
Annual Report	6/5/2012	1 page	tiff PDF
Annual Report	6/22/2011	1 page	tiff PDF
Annual Report	6/16/2010	1 page	tiff PDF
Annual Report	6/12/2009	1 page	tiff PDF
Annual Report	5/22/2008	1 page	tiff PDF
Annual Report	5/30/2007	1 page	tiff PDF
Annual Report	5/8/2006	1 page	tiff PDF
Annual Report	6/10/2005	1 page	tiff PDF
Annual Report	4/2/2003	1 page	tiff PDF
Annual Report	11/7/2002	1 page	tiff PDF
Annual Report	7/23/2001	1 page	tiff PDF
Annual Report	4/25/2000	1 page	tiff PDF
Annual Report	8/18/1999	1 page	tiff PDF
Statement of Change	5/18/1998	1 page	tiff PDF
Annual Report	5/11/1998	1 page	tiff PDF
Annual Report	7/1/1997	1 page	tiff PDF
Annual Report	7/1/1996	1 page	tiff PDF
Annual Report	7/1/1995	1 page	tiff PDF
Annual Report	7/1/1994	1 page	tiff PDF
Articles of Incorporation	6/18/1993	12 pages	tiff PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	6/10/2014 3:33:27 PM	6/10/2014	
Annual report	6/5/2013 2:08:52 PM	6/5/2013 2:08:52 PM	
Principal office change	1/8/2013 5:47:40 PM	1/8/2013 5:47:40 PM	
Amendment - Change name	11/7/2012 9:06:54 AM	11/7/2012	ST. ANTHONY COMMUNITY OUTREACH CENTER, INC.

Microfilmed Images