OFFICE OF METRO COLINCIA CLERK

N No

EIGHBORHOOD DEVELOPMENT FUND ot-for-Profit Transmittal and Approval Form	DATE 8-25-14 TIME: 10:54am

Applicant/Program: Schnitzelburg Area C	ommunity Council
Executive Summary of Request:	
This NDF is for onerating expenses for the S	chnitzelburg Area Community Council. Their operating
expenses include materials for meetings, new	vsletters, outreach, community events as well as equipment
and materials for public beautification proje	ects.
Is this program/project a fundraiser?	Yes X No
Is this applicant a faith based organization?	Yes X No
Does this application include funding for sub-g	grantee(s)? Yes X No
·	
I have reviewed the attached Neighborhood De	evelopment Fund Application and have found it complete and
within Metro Council guidelines and request ap	oproval of funding in the following amount(s). I have read the
organization's statement of public purpose to be	e furthered by the funds requested and I agree that the public
ourpose is legitimate. I have also completed th	e disclosure section below, if required.
	t
10 m King	F4815.70 8/18/14
District # Primary Sponsor Signature	Amount Date
District in Times, Species 2-30	
Primary Sponsor Disclosure	in way ways family or your logiclative aggistant have with this
organization, its volunteers, its employees or m	ip you, your family or your legislative assistant have with this numbers of its board of directors.
organization, 110 / 0100100010, 110 0111111-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
Approved by:	
Appropriations Committee Chairman	Date
Clerk's Office Only:	l
Request Amount:	Committee Amended Appropriation:
Original Appropriation:	Council Amended Appropriation:
	OFFICE OF METRO COUNCIL CLERA
	PPVIFWPD

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NDF NON-PROFIT APPLICATION CHECKLIST	
Legal Name of Applicant Organization: Schnitzelburg Area Community Council	
Program Name: Operating Expenses Request Amount \$4,815.70	Yes/No/N
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?	Yes
Request form: Is the funding proposed less than or equal to the request amount?	Yes
Request form: Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?	Yes
Application Page 1: Has prior Metro funds committed/granted been disclosed?	Yes
Application Page 1: Is the application properly signed and dated by authorized signatory?	Yes
Application Page 3: Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?	Yes
Application Pages 3 – 5: Is the proposed public purpose of the program well-documented?	Yes
Application 4: Is there adequate documentation of how the proceeds of the fundraiser will be spent?	Yes
Application Budget Page 6: Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for "Metro, Non Metro and Total" expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?	Yes
Faith Based Organizations: Is the signed Faith Based Form signed and included?	n/a
Jefferson County Only: Will all funding be spent in Louisville/Jefferson County?	Yes
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?	n/a
Good Standing: Is the entity in good standing with: Kentucky Secretary of State – include Secretary of State website information on organization Louisville Metro Government – check OMB monthly report filed in Council Financial Reports Internal Revenue Service – most recent Form 990 included	Yes
Separate Taxing Districts: If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?	n/a
Small Cities: Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)	n/a
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?	No
IRS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes
Operating Budget: Is the organization's current fiscal year operating budget included?	Yes
Ordinance Required: Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.	No
Board Members: Is the entity's board member list (with term length/term limits) included?	Yes
staff: Is a list of the highest paid staff included with their expected annual personnel costs?	n/a
Annual Audit: Is the most recent annual audit (if required by organization) included?	n/a
Rent Requests: Is a copy of signed lease included?	n/a
Articles of Incorporation: Are the Articles of Incorporation of the organization included?	Yes
RS Form W-9: Is the IRS Form W-9 included?	Yes
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?	n/a
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement	n/a
Prepared by: Quiffer Date: 19 Aug 20	14



	SEC	TION 1 - APPLICAN	IT INFORMATION	
Legal Name of Applica	ant Organization:	Sobnitzolb	ura Aroa Cor	mmunity Council
(as listed on: http://www.s	os.ky.gov/business/reco	ords)	urg Area Cor	mmunity Council
Main Office Street & I	Mailing Address: P	O Box 17306 Loui	sville, KY 40217	
Website:http://www.r	neighborhoodlink.	com/schnitzelburg	_area_council_in	С
Applicant Contact:	Mike Morris		Title:	president
Phone:	502-637-490	0	Email:	mike@mikemorrislaw.com
Financial Contact:	same		Title:	
Phone:			Email:	
Organization's Repres	entative who atte	nded NDF Training:	Kathy	419
GEOG	RAPHICAL AREA(S) WHERE PROGRAM	ACTIVITIES ARE (V	VILL BE) PROVIDED
Program Facility Local	tion(s): Schnit	zelburg		
Council District(s):	10		Zip Code(s):	40217
	SECTION 2 - PF	ROGRAM REQUEST	& FINANCIAL INFO	RMATION
PROGRAM/PROJECT I	NAME: Der	atin, Exp.	hsei	
Total Request: (\$)	4815.70		d (this program) in	previous year: (\$) 4820.07
Purpose of Request (c	heck all that apply	·):		
Operating Function	ınds (generally can	not exceed 33% of a	agency's total opera	ating budget)
Programmin	g/services/events	for direct benefit to	community or qual	ified individuals
Capital Proje	ect of the organizat	ion (equipment, fur	nishing, building, et	cc)
The Following are Rec	uired Attachment	s:		
IRS Exempt Status De			Signed lease if rent c	osts are being requested
Current Year Projecte	_	-	IRS Form W9	
List of Board of Direc	·	term limits	Evaluation forms if u	sed in the proposed program
Current financial stat			Annual audit (if requ	ired by organization)
Most recent IRS FormArticles of Incorporat			Faith Based Organiza	tion Certification Form, if required
Cost estimates from		equest is for	Staff including the 3	highest paid staff
capital expense				
				eived from Louisville Metro
				through Metro Federal Grants,
sheet if necessary.	or Metro Counca A	ppropriation (Neign	ibornood Developir	nent Funds). Attach additional
Source:	Metro Co	Am کیمیں	nount: (\$)	0- 6,500.00 MM
Source:	**	Am	nount: (\$)	
Source:	•	Am	nount: (\$)	
Has the applicant cont	acted the BBB Cha	rity Review for parti	cipation? Yes	■ No
Has the applicant met	the BBB Charity Re	view Standards?	Yes. No	

Page 1 Effective April 2014 Applicant's Initials



SECTION 3 – AGENCY DETAILS
Describe Agency's Vision, Mission and Services: The vision of the neighborhood association is to unite property owners and residents for community action, serve as a forum for discussion of concerns to area residents, encourage civic improvements and promote community acitivities that are of educational or civic in nature. Through these activities we promote and preserve the intrinsic values that make our neighbohrood unique.

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SECTION 4 – PROGRAM/PROJECT NARRATIVE	* ****
A: Describe the program/project start and end dates, a description of the program with regards to specific client population the program will address (attach related designs, event permits, proposals for services/goods, etc.): see attached list of events	m/project and applicable data I flyers, planning minutes,
B: Describe specifically how the funding will be spent including identification of fu please see attachments	unding to sub grantee(s):



C. Kali
C: If this request is a fundraiser, please detail how the proceeds will be spent: A portion of the request helps raise funds to be spent offsetting the cost of the #1 Dinner and program materials.
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.



process for collecting data and the indicators that will be tracked to measure the benefits to those being served Our many activities give the area residents and business owners a sense of pride and identity in the neighborhood.	l :
F: Briefly describe any existing collaboration valetional in the	
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. We are currently working with the German/Paristown Neighborhood Association on a Goss Avenue Beautification project and we meet with presidents of Shelby Park and St. Joseph's to discuss area projects/concerns.	



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.

	Column 1	Column 2	Column (1+2)=3	
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds	
A: Personnel Costs Including Benefits	0	0	0	
B: Rent/Utilities	273.60	206.40	480	
C: Office Supplies	140.79	106.21	247	
D: Telephone	0	0	0	
E: In-town Travel	0	0	0	
F: Client Assistance (Attach Detailed List)	0	0	0	
G: Professional Service Contracts	0	0	0	
H: Program Materials	1608.31	1213.29	2821.60	
I: Community Events & Festivals (Attach Detail List)	2622	1978	4600	
J: Small Equipment	171	129	300	
K: Capital Equipment	0	0	0	
L: Other Expenses (Attach Detail List)				
*TOTAL PROGRAM/PROJECT FUNDS	4815.70	3632.90	8448.60	
25 of Program Budget	57 %	43 %	100%	

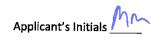
List funding sources for total program/project costs in Column 2, Non-Metro Funds:

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

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

^{**}Must equal or exceed total in column 2.







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 see attachment Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution & Other In Kind) * 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 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:



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

- 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.
- 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).
- 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.
- 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.

Lisa Pisterman is a board member and Metro 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:	11/		Date:	3	7 7	1111
			Date:	15	6)	54
Legal Signatory: (please print):	Mike Morris		Title:	pres	ident	
Phone: 502-637-4900	Extension:	Email:	mike@n	nikem	orrisla	aw.com

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Effective April 2014

Applicant's Initials

2014-15

ITEM	METRO	NON-METRO	TOTAL
History Malles	57	4 3	TOTAL
Easter Egg Hunt	171	129	100
Phay pate in the Park	114		300
Pot Lucia	114	86	200
Dainty Contest	570	86	200
YAID SAle		430	1,000
	28.50	71.50	50
Dog WAIL	28.50	21.50	50
#1 Dinner	1455	1075	2,500
(Hristmas Tree Decorating	114	86	200
	2622	1978	4,600
			1,000

Expenses for Community Outreach/Operations

Newsletters: Printing Costs Design & Layout Volunteer Hours to Edit, Distribute Lucite Holders	216 x 10.00/hour 4 per year at \$15.00 each	\$85.60 \$ 775.00 \$ 750.00 \$2,160.00 \$ 60.00
✓Magnetic Calendars ✓Stickers		\$ 152.00 \$ 200.00
Welcome Wagon Bags: Bags & Materials Volunteer hours to fill and distribute	e bags 30 x 10.00/hour	\$ 100.00 \$ 300.00
√Misc Printing Expenses for Event Fliers Volunteer hours to distribute fliers	10 x 10.00/hour	\$ 50.00 \$ 100.00
Meetings Re→ - 480 Soft Drinks & Snacks, Door Prizes Volunteer hours	432 x 10.00/hour	\$ 500.00 \$4,320.00
Memberships in Other Organizations Dues for: Airport Alliance Center for Neighborhoods		\$ 50.00 \$ 24.00
Advertising Sponsoring Prize at Ky State Fair Sponsoring Horse and Race at AmVe	ets Fundraiser	\$ 50.00 \$ 50.00
Office Expenses Sec of State Renewal P. O. Box Stamps Paper, Envelopes, etc.		\$ 15.00 \$ 86.00 \$ 46.00 \$ 50.00
INCOMING FUNDS Memberships Business Family	50 x \$20.00 5-ce 3per 50 x \$10.00	\$1,000.00 \$ 500.00
#1 Dinner Ticket Sales #1 Dinner Program Ads		\$1,200.00 \$ 500.00
Yard Sale Booth Rental	25 x \$10.00	\$ 250.00

Funding Sources!

i) # 1 Dinner (2013) - 2,018.00

4 Membership Ques (13-14 Fixens) - 1,480,00

3) YARD SAle - 250.00

4) Golf Scronble - 5055 (estimated)

2 expenses (Som receipés)

1 1499.37

2 250.00

3 111.11

4) 100.00

1960.48

1, 5ht of 1 ha, helders (CHAN-tones Tues Deconders) 2013

72.04

71.94

3) 25.97

61.13

75.17

3,29.06

Incoming Funds for #1 Dinner	Ads Door Prize Raffle 50/50 Dinners	320.00 187.00 101.00 1410.00
TOTAL IN		2018.00

Denated Space;

- CHristmas tree Decorating / Light up Schmitzellang

100.00

- Dog WAIK 100.00

- YARD SAle 700.00

- DAMY 200.00

- Pot Look

- Easter Egg Hunt - 100.00

- History WAIL-s - 160.00

- meetings (BOA-U) - 880.00

Total - 1,740.00

Expense Donated Time Total News letters 1,695.60 2,160 3855.60 980.00 4,320 5300.00 Meetings 400 00 100,00 300 Welcome Wagon Outreach (calendars) (Advantising, MemBerships) 526,00 100 626.00 Office (Sec. of State, Po Box, STAMPS, Paper, Printing) 247 200 447,00 7080 9690

\$1,670,00	2.10 \$2000	\$2,930.00	360	00 389 288		
\$1,300.00	90-001-	\$2,500.00	2.00 \$195.00	\$2,000.00		0
\$750,00 \$100,00 \$60,00	\$100.00 \$80.00	\$200.00 \$200.00 \$30.00	\$50.00 \$50.00 \$60.00	\$2,000.00 \$2,000,00 \$2,580.00	1860	2610
15 get movis, equip. set up 10 set up, Year down 6 weed, frow, blow	10 Organize 6 weed, mow, blow	20 get prizes, 20 sell ads, order food, bar 3 weed, mow, blow	5 Obtain tree, decorate 5 Decorate 6 weed, mow, blow	200 Plant, Shop, Water 200 plant, weed 258 weed mow, blow	+	
Jennifer Chappeli Others Mike Mortis	Judle Greiner Mike Morris	Gary Allen Others Mike Morris	Julieanne Thomas Others Mike Morris	Susair Brinton Others Mike Morris		
Jennifer Chappell	Judie Greiner	Gary Allen	Julleanne Thomas	Susah Brunton		
Movie Night	Dog Walk	#1 Dinner	Cinistmas Tree Decorating	GoGreenGermantown	Estimated Totals	

Total to Budget U.S. 0 \$5660.00	~ \$ 0.09€\$	\$480.00	\$430.00	340	\$380,00	\$330.00
Costs Tot \$200.00	\$200.00	\$200.00	\$200.00	\$4 , 369.00	\$100.00	\$50.00
Hours x \$10.00/hr (\$120.00 \$120.00 \$120.00 \$120.00	\$120.00 \$100.00 \$100.00 \$60.00	\$120.00 \$40.00 \$60.00 \$60.00	\$100.00 \$100.00 \$30.00	\$200.00 \$50.00 \$90.00	\$120,00 \$100.00 \$90.00	\$120.00 \$100.00 \$60.00
Hours Donated Description of Time 12 12 11 weeding, cleaning route	1 2 10 10 8 tràsh pick up	12 4 6 6 trash pick up	10 set up 10 tear down 3 trash pick up	20 Set Up, emcee, manage 5 line judge 9 weed, mow, bfow	12 10 6 trash blok up	12 sell spots, direct vendors 10 man booth, 6 weed, mow, blow
Volunteers Steve Cambron Lisa Pisterman Mike Morris	Dianna Morris Susan Brunton Others Mike Morris	Susan Brunton Dianna Morris Others Mike Morris	Susan Brunton Others Mike Morris	Gary Allen Mike Morris Mike Morris	Dianna Morris Others Mike Morris	Susan Brunton Others Mike Morris
Organizer Steve Cambron	Dianna Morris	Susen Brunion	Susan Brunton	Gary Allen/Mike Morris	Diahna Momts	Susan Brunton
Event History Walks (2 per Year)	Easter Egg Hunt	PlayDate in the Park	Pot Luck	Dainty	Back to School Bash	Yard Sale

860.00



Schnitzelburg Area Community Council

P. O. Box 17306 Louisville, KY 40217

sacc@insightbb.com

www.neighborhoodlink.com/Schnitzelburg Area Council

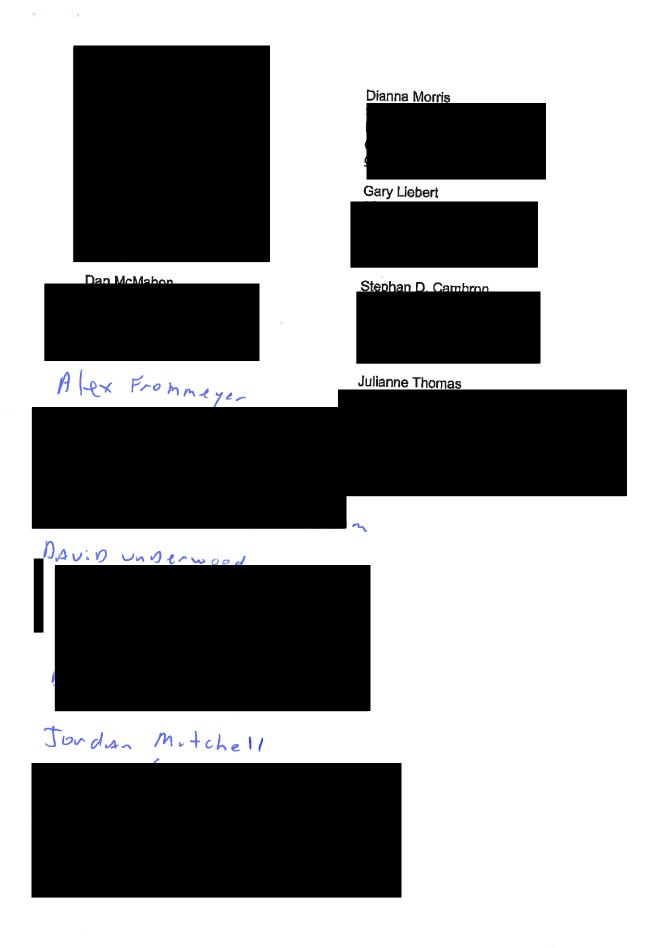
Schnitzelburg Area Community Council Constitution

Article IV

OFFICERS. The Council shall have four principal officers, who shall be the President, Vice-President, Secretary, and Treasurer. These officers shall be elected by the Board of Directors from among the membership of the Board after the annual meeting, to hold office for one year or until their respective successors are elected and take office.

Officers:

Mike Morris - President	Susan Brunton -Vice President					
Kathy Lang - Treasurer	David J. (Jake) Wildstrom - Secretary					
(<u>}</u>						
At Large Board Members:						
Shane Smith	Paul Boblitt					
Lisa Pisterman	Jennifer Chappell					
	COMMING CHEMICAL					



Department of the Treasury Internal Revenue Service

Exempt Organizations not

Required To File Ferm

OMB No. 1545-2085

Open to Public Inspection

A For the 2013 calendar year,

- B Check if applicable

lame of organization: SCHNITZELBURG REA COMMUNITY COUNCIL

D Employer Identification Number

www.nelghborhood anitze/burgAreaCounci/-

Louisville, KY, US, 40217

P O Box 17308

F Name of Principal Officer: Kathy Lang

P O Box 17306 Louisville, KY, US, 40217

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

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

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

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

SERVET COLA PRED WYO WECHOED PRED WYO WECHOED

ARTICLES OF INCORPORATION

POR

SECRETARY OF STATE OF

CATTAIN SCHOLTZZIBURG AREA COMMUNITY COUNCIL, INC. COMMUNICACIO O Sentroly

The undersigned, the majority of whom are citizens of the United States of America, desiring to form a non-profit corporation law of the Commonwealth of Kentucky, do hereby certify:

46525

ARTICLE I

The name of the corporation shall be The Schmitzelburg Area Community Council. Inc.

article ii

Unless sooner terminated as provided by law, the Area Community Council shall have perpetual existence from the time the certificate of incorporation has been issued by the Secretary of the State of Kentucky.

ARTICLS III

The objects and purposes of the Area Community Council shall be:

- a. To unite property owners, tenants, business people and others interested in the area.
- h. To encourage civic improvements and batterments in the area.
- c. To promote community activities and interests of an educational or civic nature.
- d. To encourage residential and buniness property uplesp in the area, and to climinate wandalise and littering.
- *. To encourage better fire and police protection: traffic flow and traffic law enforcement in the area.
- f. To be conserned with youth problems of the area. Fo encourage reasonable and adequate gaming, and to ensure uniform enforcement of codes.
- to enture uniform enforcement of codes.

 In the encourage a spirit of friendliness and cooperative community spirit in the area and in relations with other groups in the Schnitzslburg area and throughout the City of Louisville.
- 1. To support any other activities which advance the common good and renoral walfare of the community and its people unless these activities are excluded by IRC Sec. 501 (c) (4) or IRS regulation.

ARRICLE IV

- (4.1) The said Arsa Community Council is expanised exclusively for the premotion of social and civic religies as described in 180 See. 501 (c) (A). In view of that fact, no part of the net earnings of the Council shell be distributable to its combons, directors, officers, and other private persons as income, however, the corporation shall be authorized and expowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article Three hereof.
- (5.2) No substantial part of the activities of the Area Community Council shall be the carrying on of propaganda, or otherwise attempting to influence legislation, waless the second voltare and civic objective require legislation as per the regulations concerning INC Sec. 501 (c) (4) or intervene in any political compalyn on behalf of any candidate for public office.
- (4.3) Notwithstanding any other provision of these articles: the Area Community Council shall not earry on any other activities not permitted to be carried on by a corporation exempt from Federal Encome Tax under Sec. 501 (c) (4) of the Internal Revenue Code of 1954.
- (b,b) Open dissolution of the Area Community Council. the Board of directors shall, after paying or making provision for the payment of all the limilities of the Area Community Council, dispose of all the essets of the Area Community Council exclusively for the perposes of the Area Community Council exclusively for the perposes of the Area Community Council in such samer, or to such organization or organizations established and operated exclusively for social welfare or civic purposes as shall at the time qualify as exempt examination or organizations under Sec. 501 (c) (b) Internal Revenue Code of 19% as the Board of Directors shall be disposed of by the Court of Counce Pleas of the county in which the principal effice of the Corporation is then lacated, exclusively for such purposes or to such organizations, as said Court shall determine, which are organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

ARTICLE V

- (5.1) The reflatored office and place of business of the corporation shall be: William Keely, Sin Monaton, Levisville, Jefferson County, Kontucky Horif.
- (5.2) The enem and address of its revident agent for the marriag of process that her william Keely, President, Significate Coly,

ARTICLE VI

The officers, directors, or members of the Area Community Conucil shall not be personally liable for payment of debts. Liabilities, or obligations of the Council to any extent whatsoever.

ARTICLE VII

(7.1) The initial board of directors shall consist of thirteen members on the beard and four officers selected from the board.

(7.2) The following individuals will serve in the capacity of efficient until the selection of their successors: President: William Reely, 819 Keswick, Louisville, Ky., 40217 Vice-President: Gregory Sarjent, 942 Mulberry, Louisville, Ky., 40217 Secretary: James Peak, 1021 Wagner, Louisville, Ky., 40217 Treasurer: William Tinker, 1245 Milton, Louisville, Ky., 40217

IN WITHESS thereof. we have hereunto subscribed our day of desize 1977.

Motory Estate Schwind.

William Keely Wom W. inner Jama Peak Hogan Hogant

RECEIVED HOW I TANDS

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Ghande NAOA

Trey Grayson Secretary of State Received and Filed 11/09/2005 11:22:11 AM Fee Receipt: \$8.00

ARTICLES OF

AMENDMENT

OF SCHNITZELBURG AREA COMMUNITY COUNCIL, INC.

ARTICLE XIII: Amendment

Section 1

Pursuant to a meeting of the members of this corporation held on Monday, September 26, 2005, of which a quorum was present at said meeting, the following amendment was received and unanimously adopted and accepted by the quorum present. The amendment adopted is set forth below:

Section 2: The original Articles of Incorporation for the Schnitzelburg Area Community Council, Inc., are hereby amended to reflect that Article 3, Section I, is hereby amended to read that:

To support any activities which advance the common good and general of the community and its people unless these activities are excluded by IRS Sec. 501(c)(3).

APPROVED AND SUBMITTED by William W. Tinker, Jr. Treasurer and Director for the Schnitzelburg Area Community Quancil, Jpc.

William W. Tinker, J

Director

APPROVED: September 26, 2005

William W. Tinker, Fig.

JON MORALLI DI BENGLE OF STATE

DREXELL R. DAVIS



Frankvort, Kentucky

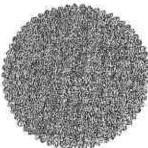
CERTIFICATE OF INCORPORATION OF NON-STOCK, NON-PROFIT CORPORATION

I. DEEXELL R. DAVIS. Secretary of State of the Commonwealth of Residency entity that there has been delibered to my offer articles of incorporation of the secretary and appropriate removes. For

The mose and volubres of the resistenced agent of this corporation is

STATE ADDRESS RESTRICT 40217

NIF. THEREFORE. Sading thes there estades of lacorporation conform to low and thus all fere therefore buring been puld as preveiled by last. I. DEEXELL R. DAVIS. Secretory of Mode, have this Confirms of Incorporation.



CECENTARY OF STATE

instant this 70% day of Prayment ... 19 7?

DESCRIPTION OF STATE

CONTRACT SERVICENCE OF GRAVE



Trey Grayson Secretary of State

Certificate of Existence

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

THE SCHNITZELBURG AREA COMMUNITY COUNCIL, INC.

has eliminated all the grounds for dissolution, paid all fees and penalties owed to the Secretary of State, and met all other requirements for reinstatement. The effective date of reinstatement is October 7, 2004.

I further certify that THE SCHINITZELBURG AREA COMMUNITY COUNCIL, INC. is a corporation duly organized and existing under the laws of the Commonwealth of Kentacky, whose date of incorporation is February 7, 1977, and whose period of duration is perpetual.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 7th day of October, 2004.

Trey Grayson
Secretary of State
Commonwealth of Kentucky

(Rev. December 2011) Department of the Treasury

Request for Taxpayer Identification Number and Certification

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

	Name (26 shown or years In a see I					"	elin (f) tue li	45.
	Name (as shown on your Income tax return)								
	SCHNITZELBURG AREA COMMUNITY COUNCIL, INC.								
લં	Business name/disregarded entity name, if different from above			···					
page	,								
<u>с</u>	Check appropriate box for federal tax classification:								
. 49	Individual/sole proprietor	l =					1		
충호	The state of the s	Trust/es	itate						
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See S	City, state, and ZIP code	4							
ഗ്	Louisville KY 40217	1							
- [List account number(s) here (optional)	<u></u>							
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Part	t I Taxpayer Identification Number (TIN)				- 6				
Enter y	VOUR TIN in the engrapries have The Title								
to avol-	Id backup withholding. For individuals, this is your social security number (SSN). However, for a social security number (SSN). However, for the proprietor, or disregarded entity, see the Backurity number (SSN).	" line	So	cial sec	urity num	ber			
residen	nt alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other, it is your social security number (SSN). However, it is your employer identification number (SiN). It was the first functions on page 3. For other	ora.			7	T			T
T/N on	s, It is your employer identification number (EiN). If you do not have a number, see <i>How to</i> page 3.				-				
number	If the account is in more than one name, see the chart on page 4 for guidelines on whose								
Part	II Certification								
1 The	penalties of perjury, I certify that:								
	number shown on this form is my correct taxpayer identification number (or I am waiting for	a numb	er to	he iss	red to m	ane da	1		
2. lam Sand	not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) rice (IRS) that I am subject to backup withholding as a result of a failure to report all integrations.) [boyo i	not b		AUG TO III	o, an	4		
no lo	rice (IRS) that I am subject to backup withholding as a result of a fallure to report all interest onger subject to backup withholding, or (by subject to backup withholding, and	or divide	not i.	oric) t	he IRS h	the in	ternal I	Revenu	0
			,	J. (6)		us not	ALICO III	ie mat i	eim
o iam	a U.S. citizen or other U.S. person (defined below).								
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ion 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 falled 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 (RA), 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

Sign

Signature of U.S. person ▶

Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise

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, 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:

- 1. 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
- 3. 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.

Note. If 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 on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the 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 withholding on your share of partnership income.

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

DEPARTMENT OF THE TREASURY

ID# 31536

Date:

FEB 23 2007

SCHNITZELBURG AREA COMMUNITY COUNCIL 1343 HICKORY ST LOUISVILLE, KY 40217

Employer Identification Number:

DLN:

307044022 Contact Person:

EDWARD 8 SCHLAACK

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Form 990 Required:

Yes

Effective Date of Exemption:

February 7, 1977

Contribution Deductibility:

No

Dear Applicant:

We are pleased to inform you that upon review of your application for taxexempt status we have determined that you are exempt from Federal income tax under section 501(c)(4) of the Internal Revenue Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Please see enclosed Information for Organizations Exempt Under Sections Other Than 501(c)(3) for some helpful information about your responsibilities as an exempt organization.

Sis J. Gerne

Lois G. berner Director, Exempt Organizations Rulings and Agreements

Enclosure: Information for Organizations Exempt Under Sections Other Than 501(c)(3)

Letter 948 (DO/CG)