

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

Applicant/Program: MOAA/GLEC - Veterans Appreciation and Recognition Event
Applicant Requested Amount: \$5,000
Appropriation Request Amount: 1,000

Executive Summary of Request
Funds will be used to help pay expenses for the ²⁰¹⁹~~2018~~ Veterans Appreciation and Recognition program put on by the Military Officers Association of America - Greater Louisville Eagles Chapter. The event will be held on November 13, 2019 at Audubon Country Club. The event is open to all area veterans from WWII to the present. A special invitation is extended to Gold Star Families.

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

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

23 J. Rod \$1,000 10/3/19
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.

Approved by:

Appropriations Committee Chairman Date
Final Appropriations Amount: _____ NDF101619MOAA

Applicant/Program:

MOAA/GLEC - Veterans Appreciation and Recognition Event

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

Council Member Signature and Amount

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

Applicant/Program:

MOAA/GLEC - Veterans Appreciation and Recognition Event

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

District 16 _____ \$ _____

District 17 _____ \$ _____

District 18 _____ \$ _____

District 19 _____ \$ _____

District 20 _____ \$ _____

District 21 _____ \$ _____

District 22 _____ \$ _____

District 23 _____ \$ _____

District 24 _____ \$ _____

District 25 _____ \$ _____

District 26 _____ \$ _____

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Legal Name of Applicant Organization Greater Louisville Eagles Chapter, Inc	
Program Name and Request Amount Veterans Appreciation and Recognition Event - \$5,000	10,000 \$5,000
	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	y <input type="checkbox"/> ... <input type="checkbox"/>
Is the funding proposed by Council Member(s) less than or equal to the request amount?	<input type="checkbox"/> Yes <input type="checkbox"/>
Is the proposed public purpose of the program viable and well-documented?	<input type="checkbox"/> Yes <input type="checkbox"/>
Will all of the funding go to programs specific to Louisville/Jefferson County?	<input type="checkbox"/> Yes <input type="checkbox"/>
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	<input type="checkbox"/> Yes <input type="checkbox"/>
Has prior Metro Funds committed/granted been disclosed?	<input type="checkbox"/> Yes <input type="checkbox"/>
Is the application properly signed and dated by authorized signatory?	<input type="checkbox"/> Yes <input type="checkbox"/>
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	<input type="checkbox"/> Yes <input type="checkbox"/>
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	<input type="checkbox"/> N/A <input type="checkbox"/>
Is the entity in good standing with: <ul style="list-style-type: none"> ▶ Kentucky Secretary of State? ▶ Louisville Metro Revenue Commission? ▶ Louisville Metro Government? ▶ Internal Revenue Service? ▶ Louisville Metro Human Relations Commission? 	<input type="checkbox"/> Yes <input type="checkbox"/>
Is the current Fiscal Year Budget included?	<input type="checkbox"/> Yes <input type="checkbox"/>
Is the entity's board member list (with term length/term limits) included?	<input type="checkbox"/> Yes <input type="checkbox"/>
Is recommended funding less than 33% of total agency operating budget?	<input type="checkbox"/> No <input type="checkbox"/>
Does the application budget reflect only the revenue and expenses of the project/program?	<input type="checkbox"/> Yes <input type="checkbox"/>
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	<input type="checkbox"/> N/A <input type="checkbox"/>
Is the most recent annual audit (if required by organization) included?	<input type="checkbox"/> N/A <input type="checkbox"/>
Is a copy of Signed Lease (if rent costs are requested) included?	<input type="checkbox"/> N/A <input type="checkbox"/>
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	<input type="checkbox"/> N/A <input type="checkbox"/>
Are the Articles of Incorporation of the Agency included?	<input type="checkbox"/> Yes <input type="checkbox"/>
Is the IRS Form W-9 included?	<input type="checkbox"/> Yes <input type="checkbox"/>
Is the IRS Form 990 included?	<input type="checkbox"/> Yes <input type="checkbox"/>
Are the evaluation forms (if program participants are given evaluation forms) included?	<input type="checkbox"/> N/A <input type="checkbox"/>
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	<input type="checkbox"/> N/A <input type="checkbox"/>
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	<input type="checkbox"/> N/A <input type="checkbox"/>
Prepared by: John Torsky	Date: 10-3-19

NDF Letter of Request:
Application/ Form



Christopher M. Smrt

Office: Box 32012;

Louisville, KY 40219 Cell: (502) 639-9655

12 September 2019 NDF Application

Metro Councilman, District 23, James Peden
Metro Councilwoman, District 18, Marilyn Parker
Metro Councilman, District 10, Pat Mulvihill
Louisville Metro Council

Dear Metro Council:

This is our Chapter's request the you and your fellow Metro Council members consider NDF Support of the GLEC Veterans Appreciation and Recognition, scheduled on 13 November, 2019 at the Audubon Country Club, city of Audubon Park. (formal NDF Application Form and Request Attached in this .PDF) Filed by the MOAA-GLEC Sec. / Treas., CM Smrt.

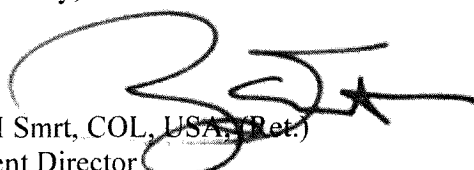
You and several of your associates have supported our event in years past and have been doing so since 2005. Our Chapter's entire membership extends our thanks for your commitments and participation. We know that we are impacting those veterans attending this event, for many have told us so thru direct calls and referrals of others to attend. We think that we are also impacting the community in a fashion that makes us a better community.

Our success is impacted in large measure by the Council's steadfast support along with a few other supporters from the Greater Louisville Business Community. We are thankful for all of this from each and every source. We continue to be pleased to see Council Members who support us at our annual event and hope that all of you are able to continue to join us in this appreciation event. The Council and its members are welcome at any Chapter meeting which are held the second Wednesday of each month, (Holidays excluded) wherein a speaker/luncheon program presents a unique aspect of the Kentuckiana Area.

Our Appreciation/Recognition took place at 11:30 a.m., 2d Wednesday of November, 3265 Robin Road, Louisville, KY 40213 (District 10). We're proud to support. Whether NDF support is directed or not, we hope members of the Metro Council, to honor our community veterans and their families will support the event.

Thank you, in advance, for your consideration and continued support,

Sincerely,



CM Smrt, COL, USA, (Ret.)
Event Director
Project Assistant 502.639-9655

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization: MOAA- Greater Louisville Eagles INC. <small>(as listed on: http://www.sos.ky.gov/business/records)</small>			
Main Office Street & Mailing Address: P.O. Box 32012; Louisville, Kentucky 40232			
Website: None			
Applicant Contact:	Guy Jolly	Title:	MOAA-GLEC, IV.President
Phone:	502.239-8848	Email:	wwphaaalvfdav@aol.com
Financial Contact:	CM Smrt	Title:	Secretary / Treasurer
Phone:	502.639-9655	Email:	atlsam2@aol.com
Organization's Representative who attended NDF Training: CM Smrt Online / PDF Self Pace - Chris Smrt			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	Audubon Country Club, 3625 Robin Road, Louisville, KY 40213		
Council District(s):	All	Zip Code(s):	All
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: MOAA-GLEC Veterans Appreciation and Recognition			
Total Request: (\$)	5,000	Total Metro Award (this program) in previous year: (\$)	3350.00
Purpose of Request (check all that apply): <ul style="list-style-type: none"> <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:			
<ul style="list-style-type: none"> <input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current year projected budget <input checked="" type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation (current & signed) Cost estimates from proposed vendor if request is for capital expense 	<ul style="list-style-type: none"> Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 Evaluation forms if used in the proposed program Annual audit (if required by organization) Faith Based Organization Certification Form, if applicable 		
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:		Amount: (\$)	
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Has the applicant met the BBB Charity Review Standards? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

Vision: Pursuant to National MOAA Criteria -- "... achieve and maintain the highest level of excellence (A National Chapter Status Award to the Very Best Chapters)

Goals:

1. Support Current and retired veterans regarding -- special events, hospital visits and in-school programs.
2. Advocate for JROTC / ROTC in relations to adopt-a-school program(s) and mentoring.
3. Pursue appropriate legislation at local and state level and coordinate with MOAA for actions that or of a National level of visibility.
4. Champion objective and accurate U.S. History in both classroom and community programs.
5. Participate in patriotic community events and activities at times such as Memorial Day, Independence Day, Liberty Day, Flag Day, Constitution Day, Veterans Day, etc.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Gregory R. Reinhardt, Captain, USN, Retired	Oct. 2021
Robert Watkins, Major, USAF, Retired	Oct. 2021
Lawrence Gravely, Colonel, USA, Retired	Oct. 2020
Gerald D. Clark, Captain, USN, Retired	Oct. 2020
Nick McIntosh, 1 Lieutenant, USMC, Former	Oct. 2019
Clinton Gray, Chief Warrant Officer 4, USA, Retired	Oct. 2019

Describe the Board term limit policy:

2 ea. Directors are elected annually at the October MOAA-GLEC Business meeting for a staggered Three-Year Term. All members of the MOAA-GLEC are Retired or Former Officers of the U. S. Uniformed Services and are volunteers who accept no pay nor compensation.

Three Highest Paid Staff Names	Annual Salary
N/A	

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 – PROGRAM/PROJECT NARRATIVE

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

The 2019 Veterans Appreciation and Recognition was conducted as the 15th Annual program of its kind. As in years past, a Community Thank-you was presented – open to all area Veterans from WWII to the Present Conflict. The event featured a prominent speaker, patriotic recognition of service, and patriotic entertainment. The event celebrates the service of our Nation’s men and women who have selflessly given of themselves in uniformed service to our Country.

Veterans and Veteran spouses of former service members of the Nation’s Uniformed Service organizations from military conflicts which the United States has participated or is presently participating are highlighted.

This includes ‘Gold Star’ Mothers, Fathers, and children whose family members gave the ultimate sacrifice.

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

Professional Services Pre Event:

Certificates, Program, etc.	
Design Services PR/Posters	\$ 350.00

Other Expenses (Pre Event)

Design / Printing of Event Materials,	\$ 225.00
Event ADV/Promotion	\$ 250.00
Presentation Books / Plaques, etc.	\$ 125.00
Event Entertainment	\$ 450.00

Subtotal Pre Event and Promotion	\$ 1400.00
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Event Day Service – Supplies and Set UP

Event Audio Visual	\$ 150.00
Room Rental [150-175 pax]	\$ 650.00
Event Tables	\$ 350.00
Event Chairs	\$ 650.00
Event Linens	\$ 150.00
Event Set UP	\$ 550.00
Event SVC	\$ 850.00
Event Decorations	\$ 250.00

Subtotal	\$3600.00
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NDF : Para “I” Community Event & Festival Budget.....Estimate	\$5000.00
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LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

N / A Event is not a Fund Raiser

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

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

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

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

This is considered as the initial NDF Application prior to the event, but likely approval of NDF Grant will happen near or after date of Event (13 NOV 2019) Coordination with Council Members Peden [D23] and Parker [D18] was conducted to ensure compliance with all procedures & download the correct NDF Form [Effective May 2016], and complete/resubmit a corrected NDF request.

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

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

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

The MOAA-GLEC does not collect quantitative data from invited Veteran attendees at the event.

We do obtain feedback from:

-Chapter members who assess the event, in preparation for making the next MOAA-GLEC Veterans Appreciation and Recognition better.

-We encourage spontaneous commentary from any and all attendees, on the day of the event, and encourage them to tell us what they think in the form of a written response / suggestion / critique for ways to improve.

-Attendees have provided on-the-spot comments and expressions of gratitude, as well as thank you cards.

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

The MOAA-GLEC has no collaborative relationships with other community organizations.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – PROGRAM/PROJECT BUDGET SUMMARY

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

Program/Project Expenses	Column 1	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 (See Detailed List on Page 8)			
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (See Detailed List on Page 8)	\$5000.00	\$2500.00	\$7500.00
J: Machinery & Equipment			
K: Capital Project			
L: Other Expenses (See Detailed List on Page 8)			
*TOTAL PROGRAM/PROJECT FUNDS	\$5000.00	\$2500.00	\$7500.00
Total Program Budget	66.7 %	33.3 %	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)	\$2500.00
Fees Collected from Program Participants	
Other (please specify)	
Total Revenue for Column 2 Expenses	\$2,500

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

**Must equal or exceed total in column 2.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7 (circle one and use multiple sheets if necessary)	Column 1	Column 2	Column (1 + 2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
Professional Services	1,400		1,400
Event Services and Supplies	3,600		3,600
Private Donations for Direct Veteran Support		2,500	2,500
Total	5,000	2,500	7,500

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
MOAA-GLEC Members Volunteer Time	\$3800.00	Value of Labor
<i>Total Value of In-Kind</i> (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)	\$3800.00	Value of Hours of GLEC Chapter Volunteers

* 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: 1 April of each Year

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:

-NOTE: The MOAA-GLEC does not have a professional staff as the GLEC is an all volunteer 'Officer' organization. The MOAA-GLEC and its Chapter Officers perform the planning, preparation, and conduct required to support the annual Veterans Appreciation event. It is an all volunteer event and a public service where in the GLEC serves the community and its many veterans.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 7 – CERTIFICATIONS & ASSURANCES

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

Standard Assurances

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

Standard Certifications

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

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

SECTION 8 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:		Date:	12 September 2019
Legal Signatory: (please print):	CM Smrt	Title:	Sec. / Treas.
Phone:	502.639-9655	Extension:	
Email:	atlsam2@aol.com		

EXHIBIT B

AMENDED NDF PROGRAM BUDGET

AMENDED NDF GRANT PROGRAM BUDGET			
<i>Budget Category</i>	<i>Metro Funds</i>	<i>Non-Metro Funds</i>	<i>Total</i>
Personnel Costs, including benefits:			
Rent / Utilities:			
Office Supplies:			
Telephone:			
In-Town Travel:			
Client Assistance, Attach Detailed List:			
Professional Services Contracts:			
Program Materials:			
Community Events and Festivals, Attach Detailed List:	\$5000.00	\$2500.00	\$7500.00
Machinery and Equipment:			
Capital Project:			
Other Expenses, Attach Detailed List:			
TOTAL:	\$5000.00	\$2500.00	\$7500.00

*Budget in .v1 11.13.2019

2019- MOAA-GLEC Inc. Annual Veterans Appreciation
Budget
Community Event Reimbursement- Detailed Summary

Professional Services Pre Event:

Certificates, Program, etc.
Design Services PR/Posters \$ 350.00

Other Expenses (Pre Event)

Design / Printing of Event Materials, \$ 225.00
Event ADV/Promotion \$ 250.00
Presentation Books / Plaques, etc. \$ 125.00
Event Entertainment \$ 450.00

Subtotal Pre Event and Promotion **\$ 1400.00**

Event Day Service – Supplies and Set UP

Event Audio Visual \$ 150.00
Room Rental [150-175 pax] \$ 650.00
Event Tables \$ 350.00
Event Chairs \$ 650.00
Event Linens \$ 150.00
Event Set UP \$ 550.00
Event SVC/ \$ 850.00
Event Decorations \$ 250.00

Subtotal **\$3600.00**

NDF : Para "I" Community Event & Festival Budget.....Estimate \$5000.00

Humana Donation Veterans Support/ Assistance \$2000.00
Individaul Donation Veterans Support/ Assistance \$ 500.00

Subtotal: \$2500.00

TOTAL \$7500.00

Christopher M. Smrt, GLEC, Sec./Treas:



PREAMBLE

- TO INCULCATE AND STIMULATE LOVE OF OUR COUNTRY AND THE FLAG;
- TO DEFEND THE HONOR, INTEGRITY, AND SUPREMACY OF OUR NATIONAL GOVERNMENT AND THE CONSTITUTION OF THE UNITED STATES;
- TO ADVOCATE MILITARY FORCES ADEQUATE TO THE DEFENSE OF OUR COUNTRY;
- TO FOSTER FRATERNAL RELATIONS BETWEEN ALL BRANCHES OF THE VARIOUS SERVICES FROM WHICH OUR MEMBERS ARE DRAWN;
- TO FURTHER THE EDUCATION OF CHILDREN OF SERVICE PERSONNEL;
- TO AID ACTIVE AND RETIRED PERSONNEL OF THE VARIOUS SERVICES FROM WHICH OUR MEMBERS ARE DRAWN, AND THEIR DEPENDENTS AND SURVIVORS, IN EVERY PROPER AND LEGITIMATE MANNER; AND
- TO REPRESENT THEIR RIGHTS AND INTERESTS WHEN SERVICE MATTERS ARE UNDER CONSIDERATION.

WE **UNITE** TO FORM THE
MILITARY OFFICERS ASSOCIATION OF AMERICA.

INTERNAL REVENUE SERVICE
P. O. BOX 2518
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date

MAR 29 2007

MILITARY OFFICERS ASSOCIATION OF
AMERICA GREATER LOUISVILLE EAGLES
PO BOX 32012
LOUISVILLE, KY 40232-2012

Employer Identification Number:
03-0591356
DIN:
17053318068006
Contact Person: JOAN C KISEF ID# 31217
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Form 990 Required:
Yes
Effective Date of Exemption:
May 4, 2006
Contribution Deductibility:
Yes

Dear Applicant:

We are pleased to inform you that upon review of your application for tax-exempt status we have determined that you are exempt from Federal income tax under section 501(c)(19) 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.

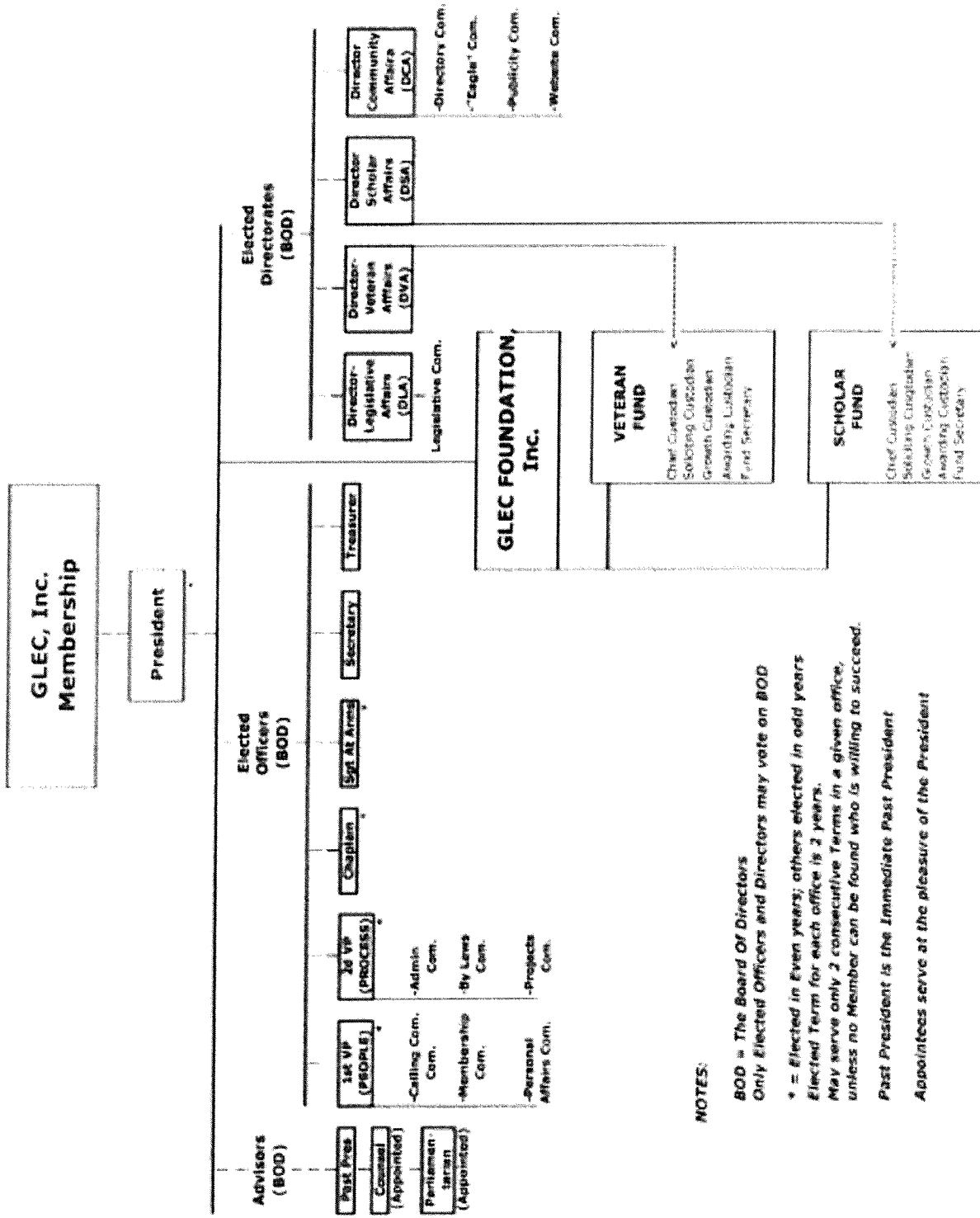
Please see enclosed information for Organizations Exempt Under Sections Other Than 501(c)(3) for some helpful information about your responsibilities as an exempt organization.

This determination is based on your representation that at least 75 percent of your members are past or present members of the Armed Forces of the United States defined under section 501(c)(19) of the Code. It is also based on your representation that substantially all of your other members, if any, are individuals who are cadets, or are spouses, widows, or widowers of past or present members of the Armed Forces of the United States or of cadets.

Based on your representation that at least 90 percent of your members are war veterans and that you are organized and operated primarily for purposes consistent with your current status as a war veterans organization, donors can deduct contributions made to or for the use of your organization.

If, in the future, your organization does not meet this membership test or if your purposes, character, or method of operation changes, donors cannot deduct contributions to or for the use of your organization, as provided by section 170.

GLEC, Inc. ORGANIZATION CHART



NOTES:

- BOD = The Board Of Directors**
Only Elected Officers and Directors may vote on BOD
- * = Elected in Even years; others elected in odd years
Elected Term for each office is 2 years.
May serve only 2 consecutive Terms in a given office,
unless no Member can be found who is willing to succeed.
- Past President is the Immediate Past President
- Appointees serve at the pleasure of the President

EIN: 03-0591356

Trey Grayson
Secretary of State
Received and Filed
05/04/2006 11:20:06 AM
Fee Receipt \$8.00

**ARTICLES OF INCORPORATION
MILITARY OFFICERS ASSOCIATION OF AMERICA,
GREATER LOUISVILLE EAGLES CHAPTER, INC.**
Nonprofit Corporation

For the purposes of forming a nonprofit corporation in Kentucky Pursuant to KRS Chapter KRS 273, the undersigned incorporator(s) hereby submit(s) the following Articles of Incorporation to the Secretary of State for filing:

ARTICLE I

The name of the Corporation is "Greater Louisville Eagles Chapter, Inc."

ARTICLE II

The purpose for which the corporation is organized is:

- a. Promoting the social welfare of the community,
- b. Assisting needy and disabled veterans, widows, or orphans of deceased veterans,
- c. Providing entertainment, care and assistance to hospitalized veterans or members of the Armed Forces of the United States,
- d. Perpetuating the memory of veterans and comforting their survivors,
- e. Conducting programs for religious, charitable, scientific literary, or educational purposes,
- f. Sponsoring or participating in patriotic activities,
- g. Providing insurance benefits to members or members dependents, and
- h. Providing social and recreational activities for members.
- i. To engage in any and all lawful activities incidental to the foregoing purposes except as restricted herein.

ARTICLE III

The street address of the corporation's initial registered office in Kentucky is 1700 UPS Drive, Suite 106, Louisville, Kentucky 40223 and the name of the initial registered agent at that office is Jerry McGraw.

ARTICLE IV

The duration of the corporation is perpetual. /

ARTICLE V

The mailing address of the corporation's principal office is P O. Box 32012, Louisville, KY 40232-2012.

ARTICLE VIII

No part of the net earnings of the corporation shall inure to the benefit of, or be distributable

to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article Third hereof. No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501(c)(19) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under section 170(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code. "Notwithstanding any other provision of these articles, this corporation shall not, except to an insubstantial degree, engage in any activities or exercise any powers that are not in furtherance of the purposes of this corporation,"

ARTICLE VI

The number of directors constituting the initial board of directors is four (4). The names and mailing addresses of the persons who are to serve as the initial board of directors are as follows:

Col. M. Courtland Clayton,	P.O. Box 32012,	Louisville, KY 40232-2012
Col. Christopher M. Smrt,	P.O. Box 32012,	Louisville, KY 40232-2012
Col. Lawrence E. Gravely,	P.O. Box 32012,	Louisville, KY 40232-2012
Capt. Gregory R. Reinhardt,	P.O. Box 32012,	Louisville, KY 40232-2012

ARTICLE VI

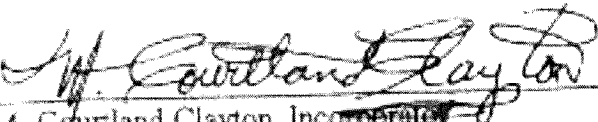
The name and mailing address of each incorporator is:

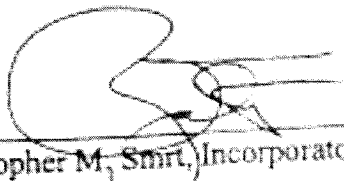
Col. M. Courtland Clayton,	P.O. Box 32012,	Louisville, KY 40232-2012
Col. Christopher M. Smrt,	P.O. Box 32012,	Louisville, KY 40232-2012
Col. Lawrence E. Gravely,	P.O. Box 32012,	Louisville, KY 40232-2012
Capt. Gregory R. Reinhardt,	P.O. Box 32012,	Louisville, KY 40232-2012


ARTICLE VII

Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) or 501(c)(19) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

Executed by the Incorporator(s) on 27 APRIL 2006

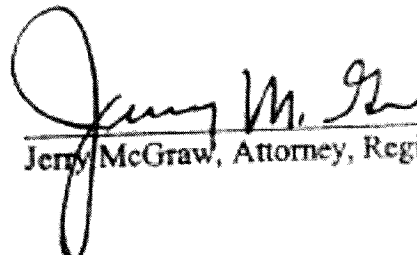

M. Courtland Clayton, Incorporator


Christopher M. Smart, Incorporator

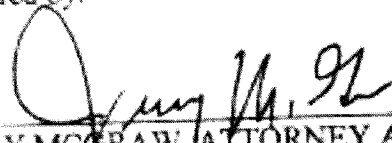

Lawrence E. Gravely, Incorporator


Gregory R. Reinhardt, Incorporator

I, Jerry McGraw, Attorney, consent to serve as the registered agent on behalf of the corporation.


Jerry McGraw, Attorney, Registered Agent

Prepared by:


JERRY MCGRAW, ATTORNEY AT LAW
THE MCGRAW LAW OFFICE, PLLC
1700 UPS Drive, Suite 106
Louisville, KY 40223
Phone: (502) 423-1075

Request for Taxpayer Identification Number and Certification

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

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

Print or type. See specific instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. The Greater Louisville Eagles Chapter, Inc.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input checked="" type="checkbox"/> Other (see instructions) ▶ 501 (c) (3)	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ (Applies to accounts maintained outside the U.S.)
	5 Address (number, street, and apt. or suite no.) See instructions. Post Office Box 32012	Requestor's name and address (optional)
	6 City, state, and ZIP code Louisville, Kentucky 40232-2012	
	7 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 line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN, later*.

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

Social security number	
[] [] [] - [] [] [] - [] [] [] []	
OR	
Employer identification number	
0 3 - 0 5 9 1 3 5 6	

Part II Certification

Under penalties of perjury, I certify that:

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

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

Sign Here	Signature of U.S. person ▶	Date ▶ 10 OCT 2019
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General Instructions

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

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

Purpose of Form

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

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
 Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

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

990n ORG Search Data:

Form 990-N

Electronic Notice (e-Postcard)

OMB No. 1545-2085

Department of the Treasury
Internal Revenue Service

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

2018

Open to Public Inspection

A For the 2018 Calendar year, or tax year beginning 2018-01-01 and ending 2018-12-31

B Check if available

Terminated for Business

Gross receipts are normally \$50,000 or less

C Name of Organization: **MILITARY OFFICERS ASSOCIATION
OF AMERICA GREATER LOUISVILLE EAGLES**
**PO Box32012, Louisville, KY,
US, 40232**

D Employee Identification
Number **03-0591356**

E Website:

F Name of Principal Officer: **CM Smrt**
**PO Box32012, Louisville, KY,
US, 40232**

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

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

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

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



Confirmation

[Home](#) | [Security Profile](#) | [Logout](#)

e-Postcard Profile

Select EIN

Organization Details

Contact Information

Confirmation

Your Form 990-N(e-Postcard) has been submitted to the IRS

- **Organization Name:** MILITARY OFFICERS ASSOCIATION OF AMERICA GREATER LOUISVILLE EAGLES
- **EIN:** 030591356
- **Tax Year:** 2018
- **Tax Year Start Date:** 01-01-2018
- **Tax Year End Date:** 12-31-2018
- **Submission ID:** 10065520191212858303
- **Filing Status Date:** 05-01-2019
- **Filing Status:** Accepted

MANAGE FORM 990-N SUBMISSIONS

Current Greater Louisville Eagles Chapter Board Members

(All Terms are Indefinite)

1st V President Guy Jolly

2d VP President M. Courtland Clayton

Secretary C. M. Smrt

Treasurer C.M. Smrt

Directors elected for three year 'staggered' term...

Director Gregory R. Reinhardt [Elected Oct. 2018]

Director Robert 'Bob' Watkins [Elected Oct. 2018]

Director Lawrence Gravely [Elected Oct. 2017]

Director Gerald D. Clark [Elected Oct. 2017]

Director Nick McIntosh [Elected Oct. 2016]

Director Clinton Gray [Elected Oct. 2016]

GREATER LOUISVILLE EAGLES CHAPTER, INC.

General Information

Organization Number	0638032
Name	GREATER LOUISVILLE EAGLES CHAPTER, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	5/4/2006
Organization Date	5/4/2006
Last Annual Report	7/1/2019
Principal Office	P.O. BOX 32012 LOUISVILLE, KY 40232-2012
Registered Agent	CHRISTOPHER M. SMART 1304 TYCOON WAY LOUISVILLE, KY 40213-1512

Current Officers

President	<u>CLINTON GRAY</u>
Vice President	<u>GUY JOLLY</u>
Secretary	<u>CHRISTOPHER SMRT</u>
Treasurer	<u>CHRISTOPHER SMRT</u>
Director	<u>WELLER HEAD</u>
Director	<u>CHRISTOPHER M. SMART</u>
Director	<u>GREGORY R. REINHARDT</u>

Individuals / Entities listed at time of formation

Director	<u>COL M COURTLAND CLAYTON</u>
Director	<u>COL CHRISTOPHER M SMART</u>
Director	<u>COL LAWRENCE E GRAVELY</u>
Director	<u>CAPT GREGORY R REINHARDT</u>
Incorporator	<u>COL M COURTLAND CLAYTON</u>
Incorporator	<u>COL CHRISTOPHER M SMART</u>
Incorporator	<u>COL LAWRENCE E GRAVELY</u>
Incorporator	<u>CAPT GREGORY R REINHARDT</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>	7/1/2019	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	6/27/2018	1 page	<u>tiff</u>	<u>PDF</u>