

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

**Applicant/Program:** The Food Literacy Project at Oxmoor Farm, Inc.  
**Applicant Requested Amount:** \$9,950  
**Appropriation Request Amount:**

**Executive Summary of Request**

The Food Literacy Project is seeking funding to implement a Field to Fork program at Iroquois Urban Farm. Funding will be used for a comprehensive and transformative learning experience for participating youth and 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.

15 District #      *Marianne Guttler* Primary Sponsor Signature      \$1500 Amount      Oct 4, 2017 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: \_\_\_\_\_

**Applicant/Program:**

The Food Literacy Project at Oxmoor Farm, Inc.

**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	<i>Bill Hollander</i>	\$ <i>500<sup>00</sup></i>
District 10	_____	\$ _____
District 11	_____	\$ _____
District 12	_____	\$ _____
District 13	<i>Vicki Aubrey Welch</i>	\$ <i>1,000<sup>00</sup></i>
District 14	_____	\$ _____
District 15	_____	\$ _____

**Applicant/Program:**

The Food Literacy Project at Oxmoor Farm, Inc. at Iroquois Urban Farm

**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 \_\_\_\_\_ \$ \_\_\_\_\_

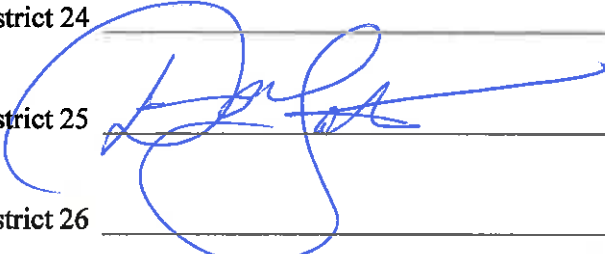
District 20 \_\_\_\_\_ \$ \_\_\_\_\_

District 21  \_\_\_\_\_ \$ 1000.00

District 22 \_\_\_\_\_ \$ \_\_\_\_\_

District 23 \_\_\_\_\_ \$ \_\_\_\_\_

District 24 \_\_\_\_\_ \$ \_\_\_\_\_

District 25  \_\_\_\_\_ \$ 500.<sup>00</sup>/<sub>xx</sub>

District 26 \_\_\_\_\_ \$ \_\_\_\_\_

**LOUISVILLE METRO COUNCIL  
NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

**Legal Name of Applicant Organization** The Food Literacy Project at Oxmoor Farm, Inc.

**Program Name and Request Amount** Iroquois Urban Farm

**Yes/No/NA**

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

Prepared by: shughes

Date: Oct. 4, 2017

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## THE FOOD LITERACY PROJECT AT OXMOOR FARM, INC.

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### General Information

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<b>Organization Number</b>	0640149
<b>Name</b>	THE FOOD LITERACY PROJECT AT OXMOOR FARM, INC.
<b>Profit or Non-Profit</b>	N - Non-profit
<b>Company Type</b>	KCO - Kentucky Corporation
<b>Status</b>	A - Active
<b>Standing</b>	G - Good
<b>State</b>	KY
<b>File Date</b>	6/6/2006
<b>Organization Date</b>	6/6/2006
<b>Last Annual Report</b>	4/25/2017
<b>Principal Office</b>	9001 LIMEHOUSE LANE LOUISVILLE, KY 40222
<b>Registered Agent</b>	CAROL GUNDERSEN 9001 LIMEHOUSE LANE LOUISVILLE, KY 40222

### Current Officers

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<b>President</b>	<u>Adam Price</u>
<b>Secretary</b>	<u>Emily Beauregard</u>
<b>Treasurer</b>	<u>Todd Bradon</u>
<b>Director</b>	<u>Rick Harned</u>
<b>Director</b>	<u>Martha Geier</u>
<b>Director</b>	<u>Melissa Chipman</u>
<b>Director</b>	<u>Jay Denham</u>
<b>Director</b>	<u>Gerri Phelps</u>
<b>Director</b>	<u>Nancy Kuppersmith</u>
<b>Director</b>	<u>Charlie Crawford</u>
<b>Director</b>	<u>Gil Liu, MD</u>

### Individuals / Entities listed at time of formation

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<b>Director</b>	<u>IVOR CHODKOWSKI</u>
<b>Director</b>	<u>KAKI ROBINSON</u>
<b>Director</b>	<u>PHYLLIS CROCE</u>
<b>Director</b>	<u>PORTER WILLIAMS</u>
<b>Incorporator</b>	<u>CAROL GUNDERSEN</u>

### Images available online

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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>	4/25/2017	1 page	<u>PDF</u>
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<a href="#">Annual Report</a>	3/25/2016	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	4/21/2015	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	4/3/2014	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	6/26/2013	1 page	<a href="#">PDF</a>
<a href="#">Principal Office Address Change</a>	2/20/2012 10:41:09 AM	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	2/20/2012	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	7/14/2011	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	6/23/2010	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	4/2/2009	1 page	<a href="#">PDF</a>
<a href="#">Registered Agent name/address change</a>	8/19/2008	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	6/18/2008	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	3/9/2007	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Articles of Incorporation</a>	6/6/2006	4 pages	<a href="#">tiff</a> <a href="#">PDF</a>

## Assumed Names

## Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	4/25/2017 10:31:02 AM	4/25/2017 10:31:02 AM	
Annual report	3/25/2016 10:11:52 AM	3/25/2016 10:11:52 AM	
Annual report	4/21/2015 8:45:44 AM	4/21/2015 8:45:44 AM	
Annual report	4/3/2014 10:55:29 AM	4/3/2014 10:55:29 AM	
Annual report	6/26/2013 2:17:31 PM	6/26/2013 2:17:31 PM	
Annual report	2/20/2012 10:47:20 AM	2/20/2012 10:47:20 AM	
Principal office change	2/20/2012 10:41:09 AM	2/20/2012 10:41:09 AM	
Annual report	7/14/2011 4:47:47 PM	7/14/2011 4:47:47 PM	
Annual report	6/23/2010 3:04:23 PM	6/23/2010 3:04:23 PM	
Annual report	4/2/2009 12:33:30 PM	4/2/2009 12:33:30 PM	
Registered agent address change	8/19/2008 10:55:45 AM	8/19/2008	
Annual report	6/18/2008 2:00:08 PM	6/18/2008	
Annual report	3/9/2007 10:59:59 AM	3/9/2007	
Add	6/6/2006 9:19:34 AM	6/6/2006	

## Microfilmed Images

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
<b>Legal Name of Applicant Organization:</b>		The Food Literacy Project at Oxmoor Farm, Inc. <i>(as listed on: <a href="http://www.sos.ky.gov/business/records">http://www.sos.ky.gov/business/records</a>)</i>	
<b>Main Office Street &amp; Mailing Address:</b> 9001 Limehouse Lane			
<b>Website:</b> www.foodliteracyproject.org			
<b>Applicant Contact:</b>	Angelique Perez	<b>Title:</b>	Associate Executive Director
<b>Phone:</b>	(502) 491-0072	<b>Email:</b>	angelique@foodliteracyproject.org
<b>Financial Contact:</b>	Angelique Perez	<b>Title:</b>	Associate Executive Director
<b>Phone:</b>	(502) 491-0072	<b>Email:</b>	angelique@foodliteracyproject.org
<b>Organization's Representative who attended NDF Training:</b> Angelique Perez (on-line presentation)			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
<b>Program Facility Location(s):</b>	Iroquois Farm (1400 Bicknell Avenue)		
<b>Council District(s):</b>	15	<b>Zip Code(s):</b>	40215
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
<b>PROGRAM/PROJECT NAME:</b> The Food Literacy Project at Iroquois Farm			
<b>Total Request: (\$)</b>	9,950	<b>Total Metro Award (this program) in previous year: (\$)</b>	\$0
<b>Purpose of Request (check all that apply):</b>			
<input checked="" 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)			
<b>The Following are Required Attachments:</b>			
<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		<input checked="" type="checkbox"/> Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 <input checked="" type="checkbox"/> Evaluation forms if used in the proposed program Annual audit (if required by organization) Faith Based Organization Certification Form, if applicable	
<b>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.</b>			
<b>Source:</b>	Metro EAF Grant (Youth)	<b>Amount: (\$)</b>	10,000
<b>Source:</b>		<b>Amount: (\$)</b>	
<b>Source:</b>		<b>Amount: (\$)</b>	
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:

The Food Literacy Project is transforming youth and their communities through food, farming and the land. We envision a just and sustainable food system that cultivates healthy people and places. In a time of great concern about rising obesity and associated disease rates, lack of access to fresh foods, as well as the cultural disconnect between people, food, and the earth, The Food Literacy Project unleashes the joy and power of real food, allowing youth and families to cultivate the knowledge, skills, and access needed for a lifetime of healthy eating through direct experience planting, harvesting, and cooking with farm-fresh vegetables. We utilize a dynamic outdoor classroom on Oxmoor Farm, a mobile, edible Truck Farm, and school and community gardens and kitchens to engage participants in hands-on learning and discovery. Our comprehensive Field-to-Fork Program encompasses the following interconnected service areas, reaching youth most at risk for ill-health, as well as their families, schools and communities:

- Farm-Based Education- Engages young people's minds, bodies and senses in experiences that effectively promote healthy eating. Students explore, plant, harvest, cook and taste fresh produce, and engage in farming through single field studies or yearlong farm experiences. In 2017, students will have the opportunity to get their hands dirty at our developing outdoor classroom at the nascent Iroquois Urban Farm, located at a former federal housing complex adjacent to one of our closest partners, Hazelwood Elementary.
- Family Engagement- Brings change to the family table by inspiring and empowering families to cook and consume healthy foods together through farm and school-based activities. Youth act as change agents, sharing new knowledge and passion for healthy foods, inspiring change within their families. Youth and families take home fresh produce shares and other pantry items, providing the basic necessities for family meals and allowing them to put their new knowledge of cooking with healthy foods into practice.
- Professional Development- Enables educators to engage students in hands-on application of academic content and to support thriving school gardens, and gives nutrition services personnel skills to bring farm-fresh recipes to school cafeterias.
- Community Outreach and Engagement- Shares our messages about healthful eating and environmental stewardship, and engages community members in building a just and sustainable food system via community events, in-school social marketing campaigns, and our mobile edible Truck Farm. Community volunteers contribute 2,000+ hours of service annually.
- Youth Development- Cultivates extraordinary youth leaders equipped with skills to lead healthy and productive lives and to transform their community and food system. We reach a diverse group of teens through our Youth Community Agriculture Program (YCAP) and children through Field-to-Fork Afterschool Clubs. Participants grow, cook, and market fresh foods, and explore the food system, while contributing purposefully to their community.

Working with schools and community-based organizations, The Food Literacy Project reaches youth and families from urban neighborhoods that face poverty, limited access to fresh vegetables and significant health disparities. In 2016, more than 85% of the JCPS students we served qualified for free or reduced school lunch. Positive experiences with fresh vegetables "plant the seeds" for lifelong relationships with healthy foods and the land. Many of our participants are given their first opportunity to experience a farm and explore, harvest, prepare and eat vegetables at their freshest and most vibrant. Many are also given their first opportunity to grow as leaders through farming and community engagement experience. Since 2006, over 35,000 participants have discovered the power of growing, cooking, and eating wholesome foods, and deepened their connection to the land, leadership skills and relationships that support healthy lifestyles. +



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Adam Price, President	December, 2018
Emily Beauregard, Secretary	December, 2018
Todd Bradon, Treasurer	February, 2019
Martha Geier	October, 2017
Gil Liu, M.D.	August, 2019
Gerri Phelps	December, 2018
Nancy Koppersmith	August, 2019
Rick Harned	October, 2018
Melissa Chipman	August, 2018
Charlie Crawford	February, 2020
Luckett Davidson	August, 2020

**Describe the Board term limit policy:**

The Food Literacy Project's board term limit policy allows members to serve for a term of 3-years. At the close of their first term, board members have the opportunity to commit to a second 3-year term, but must rotate off the board after 6 years of service. Board officers are elected for 2-year terms.

Three Highest Paid Staff Names	Annual Salary
Carol Gundersen, Executive Director	61,979
Angelique Perez, Associate Executive Director	50,203
Amy Tolliver	46,125

## 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.):**

This NDF grant will allow The Food Literacy Project to better meet demand for our services by developing a new Field-to-Fork program at Iroquois Farm. We have engaged youth and families in transformative hands-on experiences with fresh vegetables since 2006, steadily extending our reach beyond Oxmoor Farm through after school clubs, family engagement series, and a mobile, edible Truck Farm education program. Now, we are poised to meet south Louisville youth and families with opportunities for growth and community engagement where they live by establishing Iroquois Urban Farm. In partnership with Louisville's Metro Housing Authority, KentuckyOne Health and Field Day Family Farm, The Food Literacy Project is using urban agriculture to rejuvenate a former federal housing complex into a productive, vibrant neighborhood amenity and to reconnect south Louisville youth and families with fresh, local food. The Food Literacy Project will build on our 10-year history in the neighborhood working with partners such as Hazelwood Elementary (located right next door to Iroquois Farm), Newcomer Academy and Iroquois High School, to establish a unique and engaging Field-to-Fork Program. With your support, we will invite youth to drive change in their community, enabling them to cultivate the knowledge, skills, and access needed for a lifetime of healthy eating. Iroquois Farm will provide a dynamic context for youth and families to explore, harvest, and cook fresh produce, and for a diverse cohort of under-served teens to cultivate leadership and community engagement skills. Ultimately, this effort will build social cohesion and forge collaboration among residents and many diverse stakeholders united by a common goal to improve access to fresh foods as well as the health and well-being of south Louisville residents.

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

The Food Literacy Project seeks a NDF grant to implement our Field-to-Fork Program at Iroquois Urban Farm. In the first half of 2017, The Food Literacy Project began to develop our new outdoor classroom, installing four raised beds to begin a youth learning garden, portable restrooms, and picnic tables. We worked with Rotary volunteers to construct raised beds and planted them with Hazelwood Elementary Field-to-Fork Club students and their families. Youth Community Agriculture Program (YCAP) participants also used the Iroquois site as a context for hands-on learning. The teen leaders constructed picnic tables, planted over 1,000 sweet potato slips and staked tomato plants.

This grant will allow the Food Literacy Project to make hands-on experiences planting, cultivating harvesting and cooking with fresh vegetables accessible to Louisville youth and families. Providing high-quality, effective programs requires resources including staff to plan, implement, monitor and evaluate programs, an outdoor classroom rich with hands-on learning opportunities, program materials such as scuffle hoes, seeds, soil, printed materials for students and teachers; and fresh food and cooking equipment and supplies for cooking activities. If granted, NDF funds will be used to purchase program materials, office supplies, space and services such as telephone and internet, all of which are essential to the providing comprehensive, transformative learning experiences for participating youth and families.

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

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

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

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

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

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

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

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

The Food Literacy Project affects lifestyle change by increasing knowledge, awareness, skills and access, which empowers youth and families to implement healthy lifestyles and engage to positively impact their food system and communities. To assess the effectiveness of our programs, we measure outcomes with quantitative and qualitative methods, administering pre- and post-program surveys and eliciting feedback from participants. From 2013-2016, The Food Literacy Project worked with scholars from Johns Hopkins' Bloomberg School of Public Health to strengthen our evaluation systems. This collaboration ensured the collection of high-quality data, strengthened our data analysis capabilities and allowed the Food Literacy Project to contribute to the emerging evidence base in childhood obesity prevention, bolstering program sustainability. Last year, 95% of our participants learned how to prepare healthy recipes using fresh vegetables and 90% are now eating more vegetables each day. We will evaluate the following measurable outcomes to ensure this program achieves significant and life-changing results:

- 1) By June 2018, at least 50% of participants will improve nutritional proficiency needed to make healthy choices and implement nutritious behaviors. (Indicators- # who plant, harvest and taste fresh vegetables, # who learn to prepare healthy recipes, # who eat daily recommended servings and/or increase fruit/vegetable intake, # who know more about farming and where food comes from, # of caregivers who increase meals prepared at home using vegetables).
- 2) By June 2018, at least 50% of participants will improve leadership and community engagement skills and increase supportive relationships. (Indicators- # who improve problem solving, public speaking, and active listening skills, # who improve their ability to take initiative and give and receive constructive criticism, # who feel increased support from families, peers and teachers or school leaders).

**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 Food Literacy Project's success lies in our strategic partnerships with schools and community organizations, as well as the generosity of donors and community volunteers. To most efficiently leverage resources, capitalize on core strengths, and maximize impact, we embrace a collaborative approach. Our program is part of a broad movement towards a just, sustainable, and thriving food system that cultivates healthy people, places and economies. One of our strongest partnerships is with Field Day Family Farm, a local family farm using environmentally-sound farming practices, that acts as the generous host of the Food Literacy Project. We partner with over 40 schools and community-based organizations, as well as with the Mayor's SummerWorks Program, Jefferson County Public Schools, KentuckyOne Health, and many other farms, businesses and nonprofit organizations. Our programs complement core curriculum instruction, traditional health promotion programs, and neighborhood-based community garden and food access projects, providing the education and direct experience needed to encourage healthy eating and increase demand for fresh foods. Moreover, we work with students and their families together, increasing lasting impact both at school and in the home. This project will allow us to build and strengthen community partnerships with groups such as Louisville Grows, Gate to hope Ministries, Iroquois High School, Hazelwood Elementary, Save-a-Lot, Family Health Centers, and the Powerful Arriving Leaders Coalition (PAL).

**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
<b>A: Personnel Costs Including Benefits</b>	0	\$128,935	\$128,935
<b>B: Rent/Utilities</b>	\$1,450	\$1,450	\$2,900
<b>C: Office Supplies</b>	\$600	\$1,400	\$2,000
<b>D: Telephone</b>	\$400	\$400	\$800
<b>E: In-town Travel</b>	0	\$2,978	\$2,978
<b>F: Client Assistance (See Detailed List on Page 8)</b>	0	0	0
<b>G: Professional Service Contracts</b>	0	0	0
<b>H: Program Materials</b>	\$7,500	\$11,750	\$19,250
<b>I: Community Events &amp; Festivals (See Detailed List on Page 8)</b>	0	0	0
<b>J: Machinery &amp; Equipment</b>	0	\$9,288	\$9,288
<b>K: Capital Project</b>	0	0	0
<b>L: Other Expenses (See Detailed List on Page 8)</b>	0	\$7,593	\$7,593
<b>*TOTAL PROGRAM/PROJECT FUNDS</b>	\$9,950	\$163,794	\$173,744
% of Program Budget	6 %	94 %	100%

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

Other State, Federal or Local Government	0
United Way	0
Private Contributions (do not include individual donor names)	163,794
Fees Collected from Program Participants	0
Other (please specify)	0
Total Revenue for Column 2 Expenses **	163,794

\*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
500	\$10,690	Independent Sector KY Value
Rainbow Blossom, Produce Donations	\$3,000	Donor estimated value
<i>Total Value of In-Kind</i> <i>(to match Program Budget Line Item.</i> Volunteer Contribution & Other In Kind)	\$13,690	

**\* 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:** Jan 1, 2017

**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:**

The Food Literacy Project expects an increase in our annual budget in January 2018 in order to support the programmatic growth outlined in our plans for the coming year at Iroquois Farm and the expansion of our Field-to-Fork After School Club to a new school.

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 7 – CERTIFICATIONS & ASSURANCES

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

#### Standard Assurances

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

#### Standard Certifications

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

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

### SECTION 8 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:	<i>Angelique C Perry</i>	Date:	<i>9/25/17</i>
Legal Signatory: (please print):	<i>Angelique C Perry</i>	Title:	<i>Associate Executive Director</i>
Phone: <i>(502) 491-0072</i>	Extension: <i>N/A</i>	Email:	<i>angelique@foodliteracyproject.org</i>



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

DEPARTMENT OF THE TREASURY

Date: JAN 31 2007

Employer Identification Number:

DLN:

17053311069026

Contact Person:

L. WAYNE BOTHE

ID# 31462

Contact Telephone Number:

(877) 829-5500

THE FOOD LITERACY PROJECT AT  
OXMOOR FARM INC  
C/O CAROL GUNDERSEN  
1050 E KENTUCKY ST  
LOUISVILLE, KY 40204

Accounting Period Ending:

December 31

Public Charity Status:

170(b)(1)(A)(vi)

Form 990 Required:

Yes

Effective Date of Exemption:

June 6, 2006

Contribution Deductibility:

Yes

Advance Ruling Ending Date:

December 31, 2010

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)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. During your advance ruling period, you will be treated as a public charity. Your advance ruling period begins with the effective date of your exemption and ends with advance ruling ending date shown in the heading of the letter.

Shortly before the end of your advance ruling period, we will send you Form 8734, Support Schedule for Advance Ruling Period. You will have 90 days after the end of your advance ruling period to return the completed form. We will then notify you, in writing, about your public charity status.

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

Letter 1045 (00/CG)

## The Food Literacy Project 2017 Budget

### Income

401 Government Grants	15,000
402 Grants - Foundation & Corporate	68,500
407 Contributions	275,270
409 Special Events	
412 Silent Auction	8,700
414 Tickets	8,600
<b>Total 409 Special Events</b>	<u>17,300</u>
420 Program Revenue	12,000
490-Interest from Investments	360
<b>Total Income</b>	<u><u>388,430</u></u>

### Expenses

<b>100 Salary &amp; Employment</b>	0
511 Personnel	301,584
519 Youth Wages	0
525 Payroll Taxes	23,071
526 Staff Benefits (IRA Contribution)	9,048
<b>Total 100 Salary &amp; Employment</b>	<u>333,703</u>
<b>101 Consumable Supplies</b>	3,560
501 Food Supplies	11,012
502 Garden Supplies	700
503 Incentives	1,000
615 Office Supplies	2,512
617 Postage	1,670
619 Printing	3,408
<b>Total 101 Consumable Supplies</b>	<u>23,862</u>
<b>102 Subscriptions, Fees and Dues</b>	7,850
601 Online Processing Fees	906
602 Payroll Processing Fees	1,664
603 Membership Dues	400
628 Staff Training	985
720 Portable Toilet	2,500
<b>Total 102 Subscriptions, Fees and Dues</b>	<u>14,305</u>
<b>103 Legal &amp; Professional</b>	15,725
<b>104 Equipment</b>	3,345
560 Technology Equipment	1,075
725 Equipment Rental	3,200

<b>Total 104 Equipment</b>	<u>7,620</u>
<b>105 Occupancy Expenses</b>	0
611 Telephone and Internet	2,000
712 Rent	6,000
730 Utilities	1,900
<b>Total 105 Occupancy Expenses</b>	<u>9,900</u>
<b>106 Insurance</b>	800
650 Workers Comp Insurance	410
651 Liability Insurance	2,600
652 D & O Insurance	1,400
<b>Total 106 Insurance</b>	<u>5,210</u>
<b>107 Travel</b>	650
550 Participant Transportation	5,745
Staff Mileage	3,532
<b>Total 107 Travel</b>	<u>9,927</u>
<b>Total Operating Expenses</b>	<u>420,252</u>
<b>Net Operating Income/Loss</b>	<u>-31,822</u>
<b>One-time capital investment in Iroquois Farm</b>	<u>-8,000</u>
<b>Projected Income/Loss</b>	<u><u>-39,822</u></u>
<b>Board Reserve</b>	
<b>Beginning Cash Balance</b>	<u>\$ 333,573</u>
<b>+/- Projected Income/Loss</b>	<u>\$ (39,822)</u>
<b>Ending Cash Balance</b>	<u>\$ 293,751</u>
<b>Board Reserve Required (50% Of Total Expenses &amp; Capital Investment)</b>	<u>\$ 214,126</u>
<b>Excess Reserve on Hand</b>	<u><u>\$ 79,625</u></u>

**FOOD LITERACY PROJECT AT OXMOOR FARM, INC.**

**FINANCIAL STATEMENTS**

**YEAR ENDED DECEMBER 31, 2016**

# STUEDLE SPEARS & COMPANY PSC

CERTIFIED PUBLIC ACCOUNTANTS

2821 S. Hurstbourne Parkway  
Louisville, KY 40220  
Phone: 502.491.5253 · Fax: 502.491.5270

## INDEPENDENT ACCOUNTANT'S REVIEW REPORT

To the Board of Directors  
Food Literacy Project at  
Oxmoor Farm, Inc.  
Louisville, Kentucky

We have reviewed the accompanying financial statements of Food Literacy Project at Oxmoor Farm, Inc., (a nonprofit organization), which comprise the statement of financial position as of December 31, 2016, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements. A review includes primarily applying analytical procedures to management's financial data and making inquiries of Company management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements taken as a whole. Accordingly, we do not express such an opinion.

### **Management's Responsibility for the Financial Statements**

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

### **Accountants' Responsibility**

Our responsibility is to conduct the review in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. Those standards require us to perform procedures to obtain limited assurance as a basis for reporting whether we are aware of any material modifications that should be made to the financial statements for them to be in accordance with accounting principles generally accepted in the United States of America. We believe that the results of our procedures provide a reasonable basis for our conclusion.

**FOOD LITERACY PROJECT AT OXMOOR FARM, INC.**  
**STATEMENT OF FINANCIAL POSITION**  
**DECEMBER 31, 2016**

**ASSETS**

**Current Assets**

Cash and cash equivalents	\$ 333,011
Total Current Assets	333,011

**Fixed Assets**

Buildings and Equipment	68,182
Less accumulated depreciation	(23,638)
Total Property and Equipment	44,544

TOTAL ASSETS	\$ <u>377,555</u>
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**LIABILITIES AND NET ASSETS**

**Current Liabilities**

Accounts payable	\$ 723
Accrued payroll liabilities	2,760
Total Current Liabilities	3,483

**Net Assets**

Unrestricted	374,072
Total Net Assets	374,072

TOTAL LIABILITIES AND NET ASSETS	\$ <u>377,555</u>
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See independent accountant's review report and accompanying notes to financial statements.

**FOOD LITERACY PROJECT AT OXMOOR FARM, INC.**  
**STATEMENT OF FUNCTIONAL EXPENSES**  
**DECEMBER 31, 2016**

	<u>Program</u>	<u>Administrative</u>	<u>Fund Raising</u>	<u>Total</u>
Salaries	\$ 203,743	\$ 13,195	\$ 25,959	\$ 242,897
Payroll taxes	15,587	1,009	1,986	18,582
Legal and professional	15,776	472	990	17,238
Subscriptions, Fees and Dues.	5,773	357	447	6,577
Employee benefits	5,042	326	642	6,010
Participant transportation	5,746	-	-	5,746
Depreciation	5,235	64	80	5,379
Rent	4,993	-	-	4,993
Consumable supplies	4,269	125	157	4,551
Staff mileage	3,316	296	308	3,920
Food supplies	3,778	-	-	3,778
Equipment rental	3,056	154	192	3,402
Printing	2,042	118	1,147	3,307
Equipment	2,493	35	44	2,572
Insurance	2,133	102	128	2,363
Telephone and internet	1,500	277	284	2,061
Portable toilet	2,045	-	-	2,045
Payroll processing fee	1,509	147	184	1,840
Utilities	1,254	270	275	1,799
Office supplies	1,525	82	103	1,710
Postage	1,144	87	109	1,340
Technology equipment	852	83	104	1,039
Online processing fees	-	-	796	796
Incentives	670	-	120	790
Insurance	768	-	-	768
Travel	348	233	56	637
Staff training	520	-	96	616
Garden supplies	437	-	-	437
Insurance	331	32	40	403
Membership dues	-	90	150	240
	<u>295,885</u>	<u>17,554</u>	<u>34,397</u>	<u>347,836</u>
Total Expense	\$ <u>295,885</u>	\$ <u>17,554</u>	\$ <u>34,397</u>	\$ <u>347,836</u>

See independent accountant's review report and accompanying notes to financial statements.

**FOOD LITERACY PROJECT AT OXMOOR FARM, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**DECEMBER 31, 2016**

**NOTE A- NATURE OF ACTIVITIES**

Food Literacy Project at Oxmoor Farm, Inc. is a nonprofit organization incorporated in the State of Kentucky in 2006. The mission of The Food Literacy Project at Oxmoor Farm, Inc. is transforming youth and their communities through food, farming, and the land. We envision a community with a just and sustainable food system that cultivates healthy citizens. By providing hands-on experience growing, cooking and eating fresh vegetables, Food Literacy Project helps youth and families empower themselves with knowledge and skills necessary to make a lifetime of healthy food choices.

**NOTE B- SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

**Cash and Cash Equivalents**

For purposes of the statement of cash flows, the Organization considers all highly liquid investments available for current use with an initial maturity of three months or less to be cash equivalents.

**Investments**

Investments are reported at their fair values in the statement of financial position. Unrealized gains and losses are included in the change in net assets. Investment income is reported as increases in unrestricted net assets in the reporting period in which the income is recognized. As of December 31, 2016, no amounts have been reflected in the financial statements for investments.

**Contributed Services**

No amounts have been reflected in the financial statements for donated services. The Organization generally pays for services requiring specific expertise. However, many individuals volunteer their time and perform a variety of tasks that assists the Organization.

**Public Support and Revenue**

Contributions are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence or nature of any donor restrictions. All contributions are assumed to be available for unrestricted use unless specifically restricted by the donor. At December 31, 2016, temporarily restricted net assets totaled \$0 and permanently restricted net assets totaled \$0.

See independent accountant's review report



**FOOD LITERACY PROJECT AT OXMOOR FARM, INC.  
NOTES TO FINANCIAL STATEMENTS (CONTINUED)  
DECEMBER 31, 2016**

**NOTE C- PROPERTY AND EQUIPMENT**

Property and equipment consist of the following:

	<u>2016</u>
Pavilion	\$ 932
Office Trailer	40,000
Kitchen	21,000
Truck	<u>6,250</u>
Total Property and Equipment	68,182
Less: accumulated depreciation	<u>(23,638)</u>
Net Property and Equipment	<u>\$ 44,544</u>

**NOTE D- DATE OF MANAGEMENT'S REVIEW**

In preparing the financial statements, the Organization has evaluated events and transactions for potential recognition or disclosure through March 31, 2017, the date that the financial statements were available to be issued.

See independent accountant's review report

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2016

- Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Header section A-M containing organization details: Name (The Food Literacy Project at Oxmoor Farm Inc.), Address (9001 Limehouse Lane, Louisville, KY 40222), Principal Officer (Adam Price), Website (www.foodliteracyproject.org), Form of organization (Corporation), and Year of formation (2006).

Part I Summary

Summary table with columns for line number, description, Prior Year, and Current Year. Rows include: 1. Mission statement; 2-7. Governance and membership; 8-12. Revenue (Total: 417,081); 13-19. Expenses (Total: 330,373); 20-22. Net Assets or Fund Balances (Total: 381,906).

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature block for Carol Gundersen, Executive Director, including signature and printed name.

Preparer information for Timothy J Darst, CPA, LLC, including name, address, signature, date, and phone number.

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

**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	<b>Section 501(c)(3) organizations.</b> 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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? 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

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with columns for question number, description, sub-column (e.g., 1a, 1b), and Yes/No columns. Rows include questions about Form 1096, Form W-2G, backup withholding, Form W-3, unrelated business gross income, foreign accounts, prohibited tax shelter transactions, annual gross receipts, deductible contributions, and sponsoring organizations.

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

Check if Schedule O contains a response or note to any line 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 organization 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) Adam Price President	2.00	X		X			0	0	0	
(2) Todd Bradon Treasurer	2.00	X		X			0	0	0	
(3) Melissa Chapman Director	2.00	X					0	0	0	
(4) Rick Harned Director	2.00	X					0	0	0	
(5) Gerri Phelps Director	2.00	X					0	0	0	
(6) Emily Beauregard Secretary	2.00	X		X			0	0	0	
(7) Martha Geier Director	2.00	X					0	0	0	
(8) Nancy KupperSmith Director	2.00	X					0	0	0	
(9) Jay Denham Director	2.00	X					0	0	0	
(10) Charlie Crawford Director	2.00	X					0	0	0	
(11) Gil Lui Director	2.00	X					0	0	0	
(12)										
(13)										
(14)										

**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	1a Federated campaigns . . . . .	1a				
	b Membership dues . . . . .	1b				
	c Fundraising events . . . . .	1c				
	d Related organizations . . . . .	1d				
	e Government grants (contributions) . . . . .	1e	79,220			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	247,463			
	g Noncash contributions included in lines 1a-1f: \$					
	h <b>Total.</b> Add lines 1a-1f . . . . .		326,683			
<b>Program Service Revenue</b>	2a <b>Family and group fees</b>	Business Code 611600	12,803	12,803		
	b					
	c					
	d					
	e					
	f All other program service revenue . . . . .					
	g <b>Total.</b> Add lines 2a-2f . . . . .		12,803			
<b>Other Revenue</b>	3 Investment income (including dividends, interest, and other similar amounts) . . . . .		325	325		
	4 Income from investment of tax-exempt bond proceeds . . . . .					
	5 Royalties . . . . .					
	6a Gross rents . . . . .	(i) Real				
		(ii) Personal				
		b Less: rental expenses . . . . .				
		c Rental income or (loss) . . . . .				
	d Net rental income or (loss) . . . . .					
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses . . . . .				
		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	17,234			
		b Less: direct expenses . . . . .	b	6,184		
c Net income or (loss) from fundraising events . . . . .			11,050		11,050	
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		Business Code				
11a						
b						
c						
d All other revenue . . . . .						
e <b>Total.</b> Add lines 11a-11d . . . . .						
12 <b>Total revenue.</b> See instructions . . . . .		350,861	13,128	0	11,050	

**Part X Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X

		(A)		(B)	
		Beginning of year		End of year	
<b>Assets</b>	1	Cash - non-interest-bearing	6,047	1	4,087
	2	Savings and temporary cash investments	308,893	2	328,923
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	68,182		
	b	Less: accumulated depreciation	23,637		
	10c		66,932		44,545
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15		
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	381,872	16	377,555	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	(34)	17	3,479
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	<b>Total liabilities.</b> Add lines 17 through 25	(34)	26	3,479
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds	381,906	32	374,076
	33	<b>Total net assets or fund balances</b>	381,906	33	374,076
	34	<b>Total liabilities and net assets/fund balances</b>	381,872	34	377,555

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

**Open to Public Inspection**

Name of the organization

The Food Literacy Project at Oxmoor Farm 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 12, 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 (Form 990 or 990-EZ).)
- 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  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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  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.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations . . . . .
  - g Provide the following information about the supported organization(s).

	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
<b>Total</b>							



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

(Complete only if you checked the box on line 10 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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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 . . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</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 . . . . .						
<b>c</b> Add lines 7a and 7b . . . . .						
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>9</b> Amounts from line 6 . . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						
<b>14 First five years.</b> 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 <b>stop here</b> . . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15 . . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from 2015 Schedule A, Part III, line 17 . . . . .	<b>18</b>	%

**19a 33 1/3% support tests - 2016.** 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 - 2015.** 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 Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013 . . . . .			
d From 2014 . . . . .			
e From 2015 . . . . .			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 <b>Excess distributions carryover to 2017.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b Excess from 2013 . . . .			
c Excess from 2014 . . . .			
d Excess from 2015 . . . .			
e Excess from 2016 . . . .			

**Schedule B**  
**(Form 990, 990-EZ,**  
**or 990-PF)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

**Name of the organization**

The Food Literacy Project at Oxmoor Farm Inc.

**Employer identification number**

[REDACTED]

**Organization type (check one):**

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

The Food Literacy Project at Oxmoor Farm Inc.

Employer identification number

**Part I** Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Porter Watkins [REDACTED]	\$ 11,175	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	Arthur K Smith Family Foundation [REDACTED]	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	Austin Musselman [REDACTED]	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	Eric and Mindy Schuetzler [REDACTED]	\$ 6,150	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	Ina Brown Bond [REDACTED]	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	PNC Foundation 101 South Fifth Street Louisville, KY 40202	\$ 7,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

2016

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

The Food Literacy Project at Oxmoor Farm Inc.

Employer identification number

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII





**SCHEDULE O**  
**(Form 990 or 990-EZ)**

**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

**2016**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

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.  
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Employer identification number

The Food Literacy Project at Oxmoor Farm Inc.

**01. Committee meeting documentation (Part VI, line 8b)**

There are no committees authorized to act on behalf of the board.

**02. Form 990 governing body review (Part VI, line 11)**

The board officers review the Form 990 after it is filed.

**03. Conflict of interest policy compliance (Part VI, line 12c)**

The executive director monitors compliance of the conflict of interest policy.

**04. Governing documents, etc, available to public (Part VI, line 19)**

Only the required Forms 1023 and 990 are made available to the public upon request.

Troy Grayson  
Secretary of State  
Received and Filed  
06/06/2008 9:18:34 AM  
Fee Receipt: \$8.00

**ARTICLES OF INCORPORATION  
OF**

**The Food Literacy Project at Oxmoor Farm, Inc.**

(a non-stock, non-profit corporation)

Pursuant to Kentucky Revised Statute 271.267 the Board of Directors of The Food Literacy Project at Oxmoor Farm, Inc. states Articles of Incorporation are as follows:

**ARTICLE I**

The name of the corporation is The Food Literacy Project at Oxmoor Farm, Inc.

**ARTICLE II**

This non-stock, non-profit corporation is organized primarily for the purpose of providing educational and charitable services.

**ARTICLE III**

The street address of the corporation's initial registered office shall be 1050 East Kentucky Street, Louisville, Kentucky 40204 and the name of the initial registered agent is Carol Gundersen.

**ARTICLE IV**

The mailing address of the corporation's principal office and place of business is 1050 East Kentucky Street, Louisville, Kentucky 40204.

**ARTICLE V**

The initial Board of Directors shall consist of Four Directors and their names and mailing addresses are:

Ivor Chodkowski -- 224 South Bayly Avenue, Louisville, Kentucky 40206

Kaki Robinson -- 2216 Bonnycastle Avenue, Louisville, Kentucky 40205

Phyllis Croce -- 328 West Riverside Drive, Jeffersonville, Indiana 47130

Porter Watkins -- 20 Westwind Road, Louisville, Kentucky 40207

**ARTICLE VI**

The name and mailing address of the incorporator is as follows: Carol Gundersen, 1050 East Kentucky Street, Louisville, Kentucky 40204.

ARTICLE X

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or 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 disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is then located, exclusively for such purposes or the such organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

Carol Gundersen  
Carol Gundersen  
Incorporator

COMMONWEALTH OF KENTUCKY  
COUNTY OF JEFFERSON

I, a Notary Public, in and for the state and county aforesaid, do hereby certify that the foregoing instrument was produced to me in said county and was acknowledged and delivered by Carol Gundersen to be her act and deed.

WITNESS, my signature this 11<sup>th</sup> day of May, 2006  
My Commission Expires: 2/5/07

[Signature]  
Notary Public, State at Large, KY

THIS INSTRUMENT PREPARED BY  
[Signature]  
Harry B. Borders  
BORDERS AND BORDERS, ATTORNEYS  
929 Dupont Road  
Louisville, KY 40207  
(502)894-9200

Memorandum of Agreement

Between The Food Literacy Project at Outdoor Farm and Field Day Family Farm

Field Day Family Farm, a tenant vegetable operation at Outdoor Farm, will collaborate with the Food Literacy Project to deliver the Food Literacy Project's education programs beginning January 1, 2017 for a period of five (5) years, or until December 31, 2021, unless terminated under the terms of the Farm Lease with the Outdoor Farming Corporation.

Field Day Family Farm will:

- Provide a 20-acre site (8 acres in production) for food and nutrition education and demonstration of agricultural crops.
- Provide access to water and farm tools/gardening materials if available.
- Allow use of the barn in the Hollow Field, outdoor kitchen and picnic areas, and the Food Literacy Project's program and administrative office buildings.
- Make  $\frac{1}{2}$  acre in Crescent Field available for a Youth Learning Garden, to be managed by the Food Literacy Project.
- Hold the Food Literacy Project harmless from and indemnify the organization against any and all claims arising out of activities conducted by or under the supervision of Field Day Family Farm, its agents and employees.
- Carry liability insurance for the farm and provide a certificate of insurance listing Food Literacy Project as an additional insured.

The Food Literacy Project will:

- Pay rent for the leased premises in the amount of \$275/month for 2017, and a rent amount to be negotiated annually thereafter.
- Be responsible for crop management and general maintenance of the  $\frac{1}{2}$  acre Youth Learning Garden, and general maintenance of barn referenced above, program and administrative offices, and outdoor kitchen and picnic areas (including trash removal and mowing) on site.
- Promote the collaboration of Field Day Family Farm in grants, reports, and marketing materials.
- Communicate regularly with Field Day Family Farm regarding the use of farm fields by Food Literacy Project program participants for service learning projects and field studies.
- Be responsible for the cost of water usage above the average per month used by Field Day Family Farm the previous year.
- Provide bathroom facilities for program participants.
- Hold the Field Day Family Farm harmless from and indemnify Field Day Family Farm against any and all claims arising out of activities conducted by or under the supervision of the Food Literacy Project, its agents and employees.
- Carry liability insurance for the program and provide a certificate of insurance listing Field Day Family Farm as an additional insured.

Signatures Below Verify Acceptance of Agreement:

  
\_\_\_\_\_  
Mar Chodkewski

Date

 11/2/17

Carol Gundersen

Date

Proprietor, Field Day Family Farm

Executive Director, Food Literacy Project



LEASE AGREEMENT NO:

OFFER NO: 174265

ACCOUNT NO: 1156971

**RETURN EQUIPMENT to  
ModSpace:**

KY-Louisville  
6010 Fern Valley road  
Louisville, KY

Phone:+US(502)966-4252  
Fax:+US(502)964-0824

Modular Space Corporation a Delaware corporation ("ModSpace") hereby leases the equipment specified below (the "Equipment") to:

The Food Literacy Project At Oxmoor Farm Inc  
9001 Limehouse Lane  
Louisville, KY 40222

The Equipment will be located at  
(subject to Section 3 on attached page):

TBD  
Louisville, KY 40222

Contact : Martha Geler  
Phone : (812)204-4594  
PO # :  
Proj Name:  
Proj :

Customer hereby leases Equipment from ModSpace for a minimum term of 24 Month(s) (the "Minimum Lease Term" or "Term") from the start of the lease term in accordance with the terms and conditions of this Lease Agreement including the terms and conditions set forth on the attached page (this "Lease"). Rental month is defined as a thirty-day period.  
Customer agrees to pay ModSpace without demand and in advance the Monthly rental and other charges on the due dates set forth in this Lease. The anticipated delivery date for the Equipment, subject to Section 3(c) on the attached page, will be on or about .

Unit	Class	Width	Length	Serial No.	Insurance Value	Term	Frequency	Rental Amount
10x44 Office Trailer	SNGL1044	10.00	44.00	None	\$0.00	24	Monthly	\$235.00

ONE TIME CHARGES		
Delivery		
Fuel Charge	(Qty: 1)	\$ 18.00
Transportation of Building	(Qty: 1)	\$ 245.00
Installation		
Anchor Installation	(Qty: 1)	\$ 375.00
Block & Level	(Qty: 1)	\$ 135.00
Remove		
Remove Anchors	(Qty: 1)	\$ *
Unblock	(Qty: 1)	\$ *
Return Delivery		
Fuel Charge	(Qty: 1)	\$ *
Transportation of Building	(Qty: 1)	\$ *
One Time :		\$773.00
* Sales Tax (One Time) :		\$46.38
Grand Total (One Time) :		\$819.38

OTHER MONTHLY CHARGES		
Rental		
Personal Property Expense	(Qty: 1)	\$14.10
Monthly :		\$249.10
* Sales Tax (Monthly Lease Items) :		\$14.95
Grand Total (Monthly) :		\$284.05

\* Tax rates will vary with delivery address. Taxes are subject to change by tax authorities without notice.

\*\* If Building Return and Removal rates are not specified , such charges will be billed at current rates at time of termination. \*\*

Prevailing/ Davis-Bacon Wage Applicable:  No

Bedding or Access Requirements Applicable:  No

Union Labor:  No

ALL RIGHT, TITLE AND INTEREST OF MODULAR SPACE CORPORATION ("LESSEE") AND RESUN CHIPPEWA, LLC (AS SUCCESSOR BY CONVERSION TO RESUN CHIPPEWA, INC.) (THE "LESSOR") HEREUNDER HAS BEEN PLEDGED TO, AND ARE SUBJECT TO THE SECURITY INTEREST OF (i) BANK OF AMERICA, N.A., AS FIRST LIEN AGENT, PURSUANT TO THAT CERTAIN THIRD AMENDED AND RESTATED SECURITY AGREEMENT, DATED AS OF JUNE 6, 2011, BETWEEN THE LESSEE AND BANK OF AMERICA, N.A., AS FIRST LIEN AGENT, AS AMENDED, RESTATED, AMENDED AND RESTATED, SUPPLEMENTED OR OTHERWISE MODIFIED FROM TIME TO TIME (THE "FIRST LIEN SECURITY AGREEMENT") AND (ii) WELLS FARGO BANK, NATIONAL ASSOCIATION, AS SECOND LIEN AGENT, PURSUANT TO THAT CERTAIN SECOND LIEN SECURITY AGREEMENT, DATED AS OF FEBRUARY 25, 2014, AMONG THE LESSEE, CERTAIN OF ITS AFFILIATES AND WELLS FARGO BANK, NATIONAL ASSOCIATION, AS SECOND LIEN AGENT, AS AMENDED, RESTATED, AMENDED AND RESTATED, SUPPLEMENTED OR OTHERWISE MODIFIED FROM TIME TO TIME (THE "SECOND LIEN SECURITY AGREEMENT", TOGETHER WITH THE FIRST LIEN SECURITY AGREEMENT, THE "SECURITY AGREEMENTS"). NEITHER THE LESSOR NOR THE LESSEE SHALL HAVE ANY RIGHT TO TRANSFER ITS RIGHT, TITLE OR INTEREST HEREUNDER TO ANY PARTY EXCEPT PURSUANT TO AND IN ACCORDANCE WITH THE PROVISIONS OF THE CREDIT AGREEMENT OR INDENTURE, AS APPLICABLE, REFERRED TO IN THE RESPECTIVE SECURITY AGREEMENT.



## TERMS AND CONDITIONS OF LEASE AGREEMENT

Customer's failure to make the Site available and ready causes a delay in Substantial Completion or removal of the Equipment ("Customer Delay") or causes ModSpace to suspend, reschedule or duplicate its performance of work Customer will be liable for applicable charges and additional costs incurred by ModSpace to the extent caused by such delay. ModSpace may start the Term and commence billing prior to Substantial Completion in the event Customer Delay exceeds fourteen (14) days.

(e) ModSpace may suspend work at the Site if ModSpace deems the Site to be unsafe. If, in ModSpace's opinion, anchor straps are required for the safe installation of the Equipment, ModSpace may install anchor straps at an additional cost to Customer.

(f) ModSpace will not be obligated to modify the scope of work prior to execution of a mutually acceptable written change order.

(g) Customer will not interfere or allow others to interfere with the progress of ModSpace's work. Customer will not occupy or allow others to work on or in any portion of the Equipment prior to Substantial Completion without ModSpace's permission and Customer will be responsible for and Indemnify and hold ModSpace harmless from and against any damage to the Equipment or other property, or injury or death arising in connection to such occupancy or work. No charge for labor or material furnished by Customer shall be allowed as a credit under this Lease.

**4. Maintenance**

(a) Customer will not move or in any way modify the Equipment without prior written consent from ModSpace. Notwithstanding any such consent, Customer is liable, upon termination of the Lease, for the cost of restoration of the Equipment to its original specification and working code conditions. ModSpace may place its name on the Equipment, and Customer will ensure that such name is not removed or concealed in whole or in part.

(b) This is an absolute net lease. Customer is solely responsible for routine maintenance including, but not limited to, janitorial services, changing of HVAC filters, light bulbs and ballasts, minor repairs of the Equipment and removal of snow from and about the Equipment. At its sole cost, Customer will keep the Equipment at all times, and accessible from the Site, in good repair and operating condition, subject to ordinary wear and tear, free of any and all liens and encumbrances and will maintain Site grading to ensure proper water diversion from the Equipment. Customer is solely responsible for damage due to settling. ModSpace may inspect the Equipment at any time and, if ModSpace believes the Equipment to be misused, abused or neglected, ModSpace may, with written notice, summarily remove and repossess the Equipment at Customer's cost.

(c) Customer will perform, execute and comply with all Laws that in any way affect the use, operation, maintenance or storage of the Equipment. "Laws" means all laws, rules, regulations, orders, writs and decrees that now exist or hereafter arise (including without limitation the Americans with Disabilities Act).

(d) Customer will not use or store any hazardous, toxic, radioactive or bio-hazardous substances or petroleum products ("Hazardous Materials") in the Equipment, except for such household cleaning products in quantities as would be normal in the operation of a commercial office; locate the Equipment at a remediation, decontamination or nuclear site or adjacent to any site at which any biological, chemical or nuclear agent is believed to have been released; or use the Equipment as a medical laboratory or for Hazardous Materials testing or remediation. Ordinary wear and tear does not include contamination. ModSpace may, at Customer's sole cost, have the Equipment inspected for and decontaminated of Hazardous Materials. In addition to any other remedy available to ModSpace, in its sole discretion ModSpace may require Customer to purchase the contaminated Equipment at the stated Insurance Value absent contamination or at the full Replacement Cost at time of loss for identical new Equipment (whichever is greater), or convey to Customer title for any Equipment used in breach of this section and Customer hereby appoints ModSpace as attorney-in-fact for such purpose.

(e) Customer agrees that the Equipment leased hereunder will not be occupied by any person other than Customer or its agents, employees or invitees or used for residential or dormitory purposes.

**5. Warranties**

Excepting for the repair of structural or mechanical defects in the Equipment not caused or contributed to by Customer abuse, misuse, neglect, or excessive wear and tear, **THERE ARE NO WARRANTIES, EXPRESS OR IMPLIED, AND ALL WARRANTIES OF ANY KIND, INCLUDING ANY EXPRESS OR IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR PURPOSE ARE HEREBY EXCLUDED.** ModSpace will have no liability for the repair of any defect or condition resulting from Customer's relocation of the Equipment, utility connections, alterations or use of the Equipment for a purpose for which it was not intended, vandalism. ModSpace will not be liable for loss of use of the Equipment or other damages arising from use of the Equipment.

(a) ~~ModSpace warrants that the Equipment is free from material defects in material or workmanship, not considered ordinary wear and tear. Any returned equipment is found to be damaged or contaminated by water infiltration or exposure. ModSpace will charge the Customer for the remediation or require Customer to purchase the Equipment at the current market price charged for a similar unoccupied unit.~~

(b) The Equipment made part of this Lease is manufactured and coded for commercial use and occupancy only. MODSPACE MAKES NO REPRESENTATIONS, EXPRESS OR IMPLIED, AND SHALL HAVE NO LIABILITY OF ANY NATURE WHATSOEVER, AS TO THE SUITABILITY, STRUCTURAL OR OTHERWISE, FOR THE USE OF THE EQUIPMENT.

**6. Limitation of Damages**

Customer and ModSpace do expressly waive against each other all claims and demands for loss of profits and other consequential, incidental or punitive damages arising in connection with this Lease. ModSpace is not liable for any loss or damage to any property stored, located or transported in, upon, under or around any Equipment, and Customer does hereby waive any and all claims and demands for any such loss or damage.

**7. Termination and Equipment Return**

(a) Subsequent to the delivery of the Equipment, Customer has no right to terminate this Lease prior to the expiration of the Minimum Lease Term or any renewal or extension thereof. Acceptance of Equipment return before expiry of the Minimum Lease Term or any renewal or extension does not constitute a release of Customer's rental obligations. In the event of such termination, Customer must provide ModSpace ninety (90) days prior written notice of the date on which the Equipment is to be returned. Customer unconditionally agrees to pay a Lease cancellation charge equal to the remaining payments for the unfulfilled Minimum Lease Term, any applicable charges for services or modifications performed by ModSpace, any applicable charges related to Value Added Products including, but not limited to, steps, ramps, furniture, generators, holding tanks, third party storage, plus return delivery and tear down charges. In the event Customer terminates this Lease prior to the delivery of the Equipment, Customer further unconditionally agrees to pay cancellation charges in accordance with the following: (i) for in-fleet Equipment, a cancellation charge equal to three (3) months rent plus any applicable charges for modifications performed on the Equipment and other services completed by ModSpace, (ii) for new or custom built Equipment, a cancellation charge equal to all payments for the unfulfilled Minimum Lease Term plus any charges for services completed by ModSpace. All such charges will be billed on a lump sum basis unless other payment options are agreed to in writing by ModSpace.

(b) If Customer continues to possess or occupy the Equipment after the expiration of the initial Term or any Lease renewal term, with or without consent of ModSpace, Customer will be deemed to have renewed this Lease on a month-to-month basis at the then current ModSpace month-to-month Flex Rate and further subject to the terms and conditions hereof. Customer or ModSpace may terminate any such month-to-month renewal upon thirty (30) days written



TERMS AND CONDITIONS OF LEASE AGREEMENT

The occurrence of any of the following constitutes an Event of Default:

- (a) Customer fails to pay when due any rent or fails to perform its obligations under Section 9 hereof;
- (b) Customer fails to pay when due any other amount due or perform or observe any other term or condition hereunder and such failure remains uncured more than ten (10) days after delivery of written notice;
- (c) Customer or any person or entity which controls more than fifty percent (50%) of Customer's equity (a "Control Person") or any guarantor of any of Customer's obligations hereunder (a "Guarantor") becomes insolvent, becomes subject to any voluntary or involuntary bankruptcy or reorganization proceedings, makes an assignment for the benefit of creditors, becomes subject to a receiver, admits its inability to pay its debts as they become due or enters into any type of liquidation or dissolution;
- (d) Customer, any Control Person or any Guarantor defaults under any other agreement with ModSpace or any affiliate of ModSpace; and
- (e) Any letter of credit, guaranty or other security given to secure the performance of Customer's obligations under this Lease expires, terminates or in the reasonable opinion of ModSpace becomes worthless.

Upon an Event of Default, ModSpace may withhold delivery or declare the entire rent for the remainder of the Term (as may have been renewed or extended) and tear down and return costs immediately due and payable and accelerate and make immediately due and payable any other amounts owing under this Lease. ModSpace may also retake and retain any of the Equipment free of all rights of Customer without any further liability or obligation to redeliver to Customer, and Customer hereby grants ModSpace the right to enter upon any premises where the Equipment is located in order to remove the same. If an Event of Default occurs under Section 11(c), such accelerations will occur automatically without the need for declaration. Customer will pay to ModSpace on demand all costs incurred by ModSpace in enforcing its rights under this Lease, including without limitation reasonable attorneys' fees. The remedies provided in favor of ModSpace will be cumulative and in addition to all other remedies provided in this Lease or existing at law or in equity. No action taken by ModSpace hereunder will release Customer from any of its obligations under this Lease.

If ModSpace retakes possession of the Equipment or any part of the Equipment and there is in, upon or attached to such repossessed Equipment any other property owned by Customer or in the custody of Customer, ModSpace may dispose or take possession thereof and hold the same for Customer, at Customer's sole cost.

12. ModSpace Right to Cure

If Customer defaults in any of its obligations under this Lease, whether or not an Event of Default then exists, ModSpace may pay all amounts or perform or cause to be performed all obligations required to be paid or performed by Customer under this Lease and recover from Customer as additional rent all amounts so paid and the reasonable value of all services so performed.

13. Notices

Any notice or demand under this Agreement shall be valid only if in writing and shall be deemed effective three (3) days following mailing if mailed by US certified mail, or upon receipt if given in any other manner, addressed to the attention of ModSpace at the branch location set forth on the face page hereof, and to Customer at the address set forth thereon, or at such other address as either may designate in writing.

14. Miscellaneous

(a) Customer may not assign this Lease or sublet, rent or otherwise hire out or transfer possession of any of the Equipment to any person or entity without the prior written consent of ModSpace. ModSpace may assign this Lease and the rentals reserved under this Lease. If ModSpace makes such an assignment, the assignee will acquire all rights and remedies possessed by or available to ModSpace under this Lease. ModSpace may subcontract any or all of its obligations under this Lease in the ordinary course of business.

(b) In the event the face page of the Lease omits specific Unit Identification, the Equipment subject to this Lease will be the Equipment identified on the delivery receipt or, in the absence thereof, in fact delivered to the Site or identified on the invoice.

(c) If this Lease is executed in connection with a federal government transaction, the only prime contract flow down provisions applicable to this Lease and associated site services are those set forth in FAR 52.244-6 (2/2009).

IN WITNESS WHEREOF, the parties hereto have the authority and duly executed this Lease Agreement as of the 01 day of 03, 2016

LESSOR: MODULAR SPACE CORPORATION

LESSEE: Food Literacy Project

By: Martha L. Geier

Print Name: MARTHA L. GEIER

Title: Board of Directors

E-MAIL ADDRESS: marthaleegeier@gmail or carol@foodliteracyproject.org

JURISDICTION OF ORGANIZATION: LOUISVILLE, KY

ORGANIZATIONAL NUMBER OR TAX IDENTIFICATION NUMBER: [Redacted]



Exemption Number

Food Literacy Project at Oxmoor Farm, Inc.  
Name of Exempt Institution

Important—Certificate not valid unless completed.

**PURCHASE EXEMPTION CERTIFICATE**

Check Applicable Block  
Blanket   
Single Purchase

I hereby certify that Food Literacy Project is a Kentucky ~~resident~~ nonprofit educational, charitable or religious institution or Kentucky historical site, located at Louisville, Kentucky and that the tangible personal property or services to be purchased from ModSpace <sup>Name of Vendor</sup> leased 1200 Swedesford Rd. Berwyn Pa 19312 <sub>Address</sub>

will be used solely within the exempt function of a charitable, educational or religious institution or historical site.

Description of property to be purchased: 10x44 office trailer  
leased

In the event that the property purchased is not used for an exempt purpose, it is understood that I am required to pay the tax measured by the purchase price of the property.

Any official or employee who uses this certificate to make tax-free purchases for his own personal use or that of any other person will be subject to the penalties provided in KRS 138.990 and other applicable laws.

Under penalties of perjury, I swear or affirm that the information on this certificate is true and correct as to every material matter.

Martha L. Geiser  
Authorized Signature

Board of Directors  
Title

03.01.16  
Date

**CAUTION TO SELLER:** This certificate cannot be issued or used in any way by a construction contractor to purchase property to be used in fulfilling a contract with an exempt institution. Sellers accepting certificates for such purchases will be held liable for the sales or use tax.

DEPARTMENT OF REVENUE  
Frankfort, Kentucky 40620

51A128 (8-04)

## Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>The Food Literacy Project at Oxmoor Farm, Inc.</b>		
	2 Business name/disregarded entity name, if different from above		
	3 Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____ <small><b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.</small>	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) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
	5 Address (number, street, and apt. or suite no.) <b>9001 Limehouse Lane</b>	Requester's name and address (optional)	
	6 City, state, and ZIP code <b>Louisville, KY 40222</b>		
	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 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.

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

<b>Social security number</b>												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> </table>												
or												
<b>Employer identification number</b>												

**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.

<b>Sign Here</b>	Signature of U.S. person ▶ <i>Carol Grunler</i>	Date ▶ <i>9/25/17</i>
------------------	---	-----------------------

**General Instructions**

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

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

**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?* on page 2.

By signing the filled-out form, you:

- 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
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.



9. What is the most number of hours you should be in front of a screen (such as TV, computer, cell phone, handheld device) each day?

- a) 0 hours
- b) 1 hour
- c) 2 hours
- d) 3 or more hours

### Part 3: Behavior

Instructions: Please circle your answer

#### *Food and Drinks*

10. Yesterday, did you eat ANY fruit? Do not count fruit juice.



- a) No, I did not eat any fruit yesterday
- b) Yes, I ate **one** fruit yesterday
- c) Yes, I ate **two** fruits yesterday
- d) Yes, I ate **three or more** fruits yesterday

11. Yesterday, did you eat ANY vegetables? *Vegetables* are salads; boiled, baked, and mashed potatoes; and all cooked and uncooked vegetables. Do not count French fries or chips.



- a) No, I did not eat any vegetables yesterday
- b) Yes, I ate **one** vegetable yesterday
- c) Yes, I ate **two** vegetables yesterday
- d) Yes, I ate **three or more** vegetables yesterday

## Exercise and Physical Activity

14. Yesterday, after school, did you exercise or do any activities outside or inside your home?

- a) No, I did not exercise and/or do activities yesterday
- b) Yes, I did exercise and/or do activities yesterday

15. How many minutes of physical activities did you do yesterday at home or after school. Examples of physical activity are:



Bike Riding



Playing Outside



Running/Jogging



Karate



Dancing

Walking



Sports



## Screen Time

16. Yesterday, did you sit in front of a TV, computer, or while using a cell phone or handheld electronic device like a tablet?

- a) No
- b) Yes



17. Yesterday, how many hours did you spend sitting in front of a TV, computer, or using a cell phone or electronic device like a tablet?

- a) 0 hours
- b) Less than 1 hour
- c) 1-2 hours
- d) 3 or more hours

## Food Literacy Questions

26. How often do you ask your family to buy fruits and vegetables?

a) Very often

b) Sometimes

c) Never

27. Do you feel supported or encouraged to eat fruits and vegetables by your family:



Yes



Somewhat



No

28. Do you feel supported or encouraged to eat fruits and vegetables by your friends and schoolmates:



Yes



Somewhat



No

29. Do you feel supported or encouraged to eat fruits and vegetables by your teachers and school leaders:



Yes



Somewhat



No

30. Would you like to have fresh foods from a vegetable farm available at your school?

a) Yes

b) No

31. Do people depend on farmers to grow the foods we eat?

a) Yes

b) No

32. How strong are your leadership skills?

