

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

**Applicant/Program: Vault1031 Culture & Community, Inc. / Dessert Theatre**

**Executive Summary of Request:**

Valuth1031 is an organization that is dedicated to providing a safe, affordable venue where artist can teach, learn, create and present their artistic expression.

Dessert Theatre is a new program designed to empower at-risk youth and enhance the lives of local senior citizens. The Dessert Theatre is working with Cabbage Patch Settlement House to bring theatre to the lives of 12 to 15 youth. This program will also allow them to perform a 45 minute show for 5 neighboring nursing homes and other groups.

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

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.

<u>6</u>		\$ <u>1,000</u>	<u>6-18-2015</u>
District #	Primary Sponsor Signature	Amount	Date

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

**Approved by:**  
\_\_\_\_\_ Date \_\_\_\_\_  
Appropriations Committee Chairman

**Clerk's Office Only:**  
Request Amount: \_\_\_\_\_ Committee Amended Appropriation: \_\_\_\_\_  
Original Appropriation: \_\_\_\_\_ Council Amended Appropriation: \_\_\_\_\_

**OFFICE OF METRO COUNCIL CLERK  
REVIEWED**

DATE 7/16/15 TIME 10:23

## NDF NON-PROFIT APPLICATION CHECKLIST

<b>Legal Name of Applicant Organization:</b> Vault 1031		
<b>Program Name:</b> Dessert Theatre	<b>Request Amount:</b> \$1,000 <del>00</del>	Yes/No/NA
<b>Request form:</b> Is the NDF request form signed by all Council Member(s) appropriating funding?		yes
<b>Request form:</b> Is the funding proposed less than or equal to the request amount?		yes
<b>Request form:</b> Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?		yes
<b>Application Page 1:</b> Has prior Metro funds committed/granted been disclosed?		yes
<b>Application Page 1:</b> Is the application properly signed and dated by authorized signatory?		yes
<b>Application Page 3:</b> Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?		N/A
<b>Application Pages 3 – 5:</b> Is the proposed public purpose of the program well-documented?		yes
<b>Application 4:</b> Is there adequate documentation of how the proceeds of the fundraiser will be spent?		yes
<b>Application Budget Page 6:</b> Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for "Metro, Non Metro and Total" expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?		yes
<b>Faith Based Organizations:</b> Is the signed Faith Based Form signed and included?		N/A
<b>Jefferson County Only:</b> Will all funding be spent in Louisville/Jefferson County?		yes
<b>Capital Project(s) request:</b> Is the cost estimate(s) from proposed vendor(s) included?		yes
<b>Good Standing:</b> Is the entity in good standing with: <ul style="list-style-type: none"> <li>• Kentucky Secretary of State – include Secretary of State website information on organization</li> <li>• Louisville Metro Government – check OMB monthly report filed in Council Financial Reports</li> <li>• Internal Revenue Service – most recent Form 990 included</li> </ul>		yes
<b>Separate Taxing Districts:</b> If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?		N/A
<b>Small Cities:</b> Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)		N/A
<b>Operating Requests:</b> Is recommended operating funding less than or equal to 33% of total operating budget?		N/A
<b>IRS Exempt Proof:</b> Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?		yes
<b>Operating Budget:</b> Is the organization's current fiscal year operating budget included?		yes
<b>Ordinance Required:</b> Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.		NO
<b>Board Members:</b> Is the entity's board member list (with term length/term limits) included?		yes
<b>Staff:</b> Is a list of the highest paid staff included with their expected annual personnel costs?		yes
<b>Annual Audit:</b> Is the most recent annual audit (if required by organization) included?		yes
<b>Rent Requests:</b> Is a copy of signed lease included?		N/A
<b>Articles of Incorporation:</b> Are the Articles of Incorporation of the organization included?		yes
<b>IRS Form W-9:</b> Is the IRS Form W-9 included?		yes
<b>Evaluation Forms:</b> Are the evaluation forms (if program participants are given evaluation forms) included?		N/A
<b>Affirmative Action:</b> Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?		N/A
<b>Prepared by:</b> Allison Oliver		<b>Date:</b> 6/23/2015



**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

SECTION 1 – APPLICANT INFORMATION			
<b>Legal Name of Applicant Organization:</b>		<b>Vault1031 Culture &amp; Community, Inc.</b>	
<i>(as listed on: <a href="http://www.sps.ky.gov/business/records">http://www.sps.ky.gov/business/records</a>)</i>			
<b>Main Office Street &amp; Mailing Address:</b> 1031 S. 6th Street, Louisville, KY 40202			
<b>Website:</b> www.vault1031.co			
<b>Applicant Contact:</b>	Barbara Cullen	<b>Title:</b>	Executive Director
<b>Phone:</b>	502-558-9112	<b>Email:</b>	s.sheehan@fourthwallmurals.com
<b>Financial Contact:</b>	Siobhan Sheehan	<b>Title:</b>	Board President
<b>Phone:</b>	502-558-9112	<b>Email:</b>	s.sheehan@fourthwallmurals.com
<b>Organization's Representative who attended NDF Training:</b> Siobhan Sheehan			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
<b>Program Facility Location(s):</b>	1031 S. 6th Street, Louisville, KY 40202		
<b>Council District(s):</b>	6	<b>Zip Code(s):</b>	40202
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
<b>PROGRAM/PROJECT NAME:</b> Dessert Theatre			
<b>Total Request: (\$)</b>	1,000.00	<b>Total Metro Award (this program) in previous year: (\$)</b>	0
<b>Purpose of Request (check all that apply):</b>			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
<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"/> List of Board of Directors (include term & term limits) <input type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense		<input type="checkbox"/> Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 <input checked="" type="checkbox"/> Evaluation forms if used in the proposed program <input type="checkbox"/> Annual audit (if required by organization) <input type="checkbox"/> Faith Based Organization Certification Form, if required <input type="checkbox"/> Staff including the 3 highest paid staff	
<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>	None to date	<b>Amount: (\$)</b>	0
<b>Source:</b>		<b>Amount: (\$)</b>	
<b>Source:</b>		<b>Amount: (\$)</b>	
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the applicant met the BBB Charity Review Standards? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 3 – AGENCY DETAILS

#### Describe Agency's Vision, Mission and Services:

##### Our Vision:

Where art is allowed to flourish, commerce will follow

- To be an environmentally sustainable center and cornerstone for neighborhood growth, redevelopment and rejuvenation by supporting our surrounding community through outreach and community gatherings
- To support artists and educators by providing a state of the art venue to teach their crafts
- To provide a welcoming, open and inclusive environment where students of all ages can learn a variety of arts – both visual and performance
- To be a catalyst of transformation through the arts by providing the vision and support necessary to allow art to flourish
- To be a benchmark and standard of excellence in supporting other non-profit organizations in their mission.

##### Mission Statement:

Vault1031 Culture and Community is dedicated to providing a safe, affordable venue where artists can teach, learn, create, rehearse and present their artistic expression, while being a cornerstone of neighborhood redevelopment.

##### Services:

Vault1031 works with artistic groups in both visual and performance arenas. This includes: dance companies, theatre groups, musicians (individual and ensembles) while offering guidance, mentoring and theatrical expertise in any production from inception to "Showtime!" Through this program, Vault1031 brings the Arts to Old Louisville's Limerick neighborhood; engaging individuals of all ages with a creative outlet while channeling self-expressive energy into disciplined, positive self-image. Vault1031 provides access to needed rehearsal space and assistance in either offering or locating cost effective performance venues that allow artistic companies to share their art. Vault1031 works with other non-profits assisting in their fund raising efforts.

##### Programs Include:

ARMORED CAR THEATRE

MOSTLY NEW MUSICAL PROJECT

DESSERT THEATRE

CULTURE AND COMMUNITY

LOW FREQUENCY RADIO

RADIO PRODUCERS

RECORDING STUDIO

VAULT1031 ART



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 4 – PROGRAM/PROJECT NARRATIVE

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

Vault1031 is launching a new program designed to empower at-risk youth and enhance the lives of local senior citizens. The directors of Dessert Theatre are collaborating with Cabbage Patch Settlement House to bring theatre to life for 12 to 15 of their youth. The newly formed cast will attend weekly rehearsals and learn elements of song, dance and acting. Through this confidence building exercise they will be able to perform a 45 minute shows for the five neighboring nursing homes and other groups.

By providing a positive environment for youth to acquire new skills, build confidence and increase their self-esteem they will be realizing the possibilities of their potential. While sharing these newly acquired talents they will be given the opportunity to see the difference they can make in the lives of others.

Desired benefits for our Dessert Theatre participants:

1. Learning the disciplines necessary for performing develops a sustained focus of mind, body and voice, which has the ability to transcend to school subjects and life experiences.
2. Dance, music and theatre enhances verbal and physical expression of ideas. Social interaction and risk taking in performance develops trust in one's self and in others.

Desired benefits for our targeted audiences, local nursing home Residents, include a reduction in depression and boredom and an improvement in overall health and happiness that comes from the social intergenerational interaction provided by an ongoing program such as Dessert Theatre.

There is no cost for the youth to participate or for the nursing homes to attend the shows. The program will start during the Summer of 2015 as a pilot program for five days a week for two weeks.

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

1. Jazz pants for the performances...\$10.00 each x 15= \$150..(black dance pants)
  2. Rehearsal t-shirts.....\$5.00 each x 20= \$100. (adding 5 more for staff... very colorful and easy for the kids to dance in)
  3. Show shirts for performances...\$8.00 each x 20 = \$160. (adding 5 more for staff)....polo shirt with collar. we will add jackets, hats, vests and other costume pieces to the main costume that will be the jazz pants and show shirt.
  4. Music and copies....\$140.
  5. Dance shoes for youth \$30.00 each X 15=\$450.
- Total \$1,000.00



## 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:

Effective October 24, 2013, reimbursements should not be made unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):

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

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

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

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





## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

### Outcomes Measurement

By end of 2 weeks workshop student will be prepared to sing and dance through professional dance and voice instructions Training 3 hours per day for two weeks. Monday - Friday from 3-5pm culminating in a performance for Seniors at Armored Car Theatre on Sept 4, 2015

By the end of the 10 week program student will continue learn the fundamentals of singing and and dancing through professional dance and voice instructions Training 2x per week of 2 hour voice and dance lessons per week culminating in a performance for Seniors at Armored Car Theatre on Sept 4, 2015

By end of Workshop and 10 week program student will learn how to polish and learn new dance numbers and be prepared to perform in front of an audience through professional dance and voice instructions Training 2x per week of 2 hour voice and dance lessons per week culminating in a performance for neighboring senior citizen nursing homes at Armored Car Theatre on Sept 4, 2015 and Fund-raiser Performance on Sept 19, 2015

Students will be given a survey at the beginning and at the end of the program. Information from these surveys will be used to tailor the program for future classes.

**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.**

1. Cabbage Patch Settlement House - Is partnering with Vault1031 in Dessert Theatre Program. Dessert Theatre provides the arts component for the youth involved in Cabbage Patches Summer Program.
2. Dessert Theatre will be performing as one of the per-shows for Shakespeare in Central Park.



**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

**SECTION 5 – PROGRAM/PROJECT BUDGET SUMMARY**

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

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
<b>A: Personnel Costs Including Benefits</b>		10,000.00	10,000.00
<b>B: Rent/Utilities</b>		3,000.00	3,000.00
<b>C: Office Supplies</b>			
<b>D: Telephone</b>			
<b>E: In-town Travel</b>			
<b>F: Client Assistance (Attach Detailed List)</b>			
<b>G: Professional Service Contracts</b>			
<b>H: Program Materials</b>	1,000.00	1,400.00	2,400.00
<b>I: Community Events &amp; Festivals (Attach Detail List)</b>			
<b>J: Small Equipment</b>			
<b>K: Capital Equipment</b>			
<b>L: Other Expenses (Attach Detail List)</b>		200.00	200.00
<b>*TOTAL PROGRAM/PROJECT FUNDS</b>	1,000.00	14,600.00	15,600.00
<b>% of Program Budget</b>	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)	0
Fees Collected from Program Participants	0
Other (please specify)	14,600.00
<b>Total Revenue for Columns 2 Expenses **</b>	

*\*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
Staff are willing to donate their		
time to this pilot program if		
insufficient sponsorships are not		
acquired. (Personnel)	\$10,000.	Value of Salaries
<i>Total Value of In-Kind</i> (to match Program Budget Line Item. Volunteer Contribution & Other in Kind)	\$10,000.00	

\* 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: January 1

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

If YES, please explain:

Vault1031 anticipates the growth of Dessert Theatre.



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 6 – CERTIFICATIONS & ASSURANCES

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

#### Standard Assurances

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

#### Standard Certifications

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

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

### SECTION 7 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:	<i>Barbara F. Cullen</i>	Date:	<i>6/11/2015</i>
Legal Signatory: (please print):	<i>BARBARA F. Cullen</i>	Title:	<i>Co-Artistic Director</i>
Phone:	<i>502-500-1131</i>	Extension:	
		Email:	<i>barbara.cullen@tatgma.com</i>

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

DEPARTMENT OF THE TREASURY

Date:

NOV 27 2013

VAULT1031 CULTURE & COMMUNITY INC  
C/O NANCY COGAN  
1031 S 6TH ST  
LOUISVILLE, KY 40203

Employer Identification Number:

DLN:

17053008444013

Contact Person:

EDWARD S SCHLAACK

ID# 31536

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Public Charity Status:

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

Form 990 Required:

Yes

Effective Date of Exemption:

November 8, 2012

Contribution Deductibility:

Yes

Addendum Applies:

No

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. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Sincerely,



Director, Exempt Organizations

Enclosure: Publication 4221-PC

Letter 947 (DO/CG)

Line	Revenue	Vault1031 2015 Projected Budget
1	Grants	0
2	Contracts	11,705
3	United Way	0
4	Corporate contributions	0
5	Membership	0
6	Individuals	4,155
7	Fees for services	975
8	Fundraisers, events, sales	2,500
9	Endowment	0
10	Interest income	0
11	Miscellaneous	0
12	<b>Total</b>	<b>\$19,335</b>
13	In-kind	\$150
14	<b>Total Revenue</b>	<b>\$19,485</b>
<b>Line</b>	<b>Expenses</b>	<b>Program or Project</b>
15	Staff salaries and wages	22,500
16	Fringe benefits	0
17	Occupancy and utilities	12,600
18	Equipment	2,000
19	Supplies and materials	1,150
20	Printing and copying	400
21	Telecommunications	0
22	Travel and meetings	1,000
23	Marketing and advertising	7,500
24	Staff and volunteer training	0
25	Contract services	3,000
26	Miscellaneous	
27	<b>Subtotal</b>	<b>\$50,150</b>
28	General operating (indirect) - 8%	0
29	<b>Total</b>	<b>\$50,150</b>
30	In-kind	
31	Travel (County Youth Bureau)	0
32	Trainers (160 hours x \$60/hour)	0
33	Classroom supplies (Staples)	0
34	<b>Total in-kind</b>	<b>\$150</b>
35	<b>Total Expenses</b>	<b>\$50,300</b>
36	<b>Revenue over Expenses</b>	<b>\$30,815</b>

maintenance fee

**Vault 1031 Board Roster**

Board	Position	Occupation	Contact Information	Term
Jon Huffman	Co-Artistic Director	Actor, Director, Writer	[REDACTED]	1 Year + re-elections
Barb Cullen	Co-Artistic Director	Director, Choreographer		1 Year + re-elections
Siobhan Sheehan	President	Senior Manager, Sales and Operations, American Air Filter		1 Year + re-elections
Patrick Sheehan	Vice President	Owner - Fourth Wall Murals, Illustrator/Designer V/A Studio		1 Year + re-elections
Ashton Wolf	Director	Artistic Director, Nickel Plate Players, CEO & President, Ashton Wolf Entertainment		1 Year + re-elections
Jerome Pascua	Director	Strategic Engineer		1 Year + re-elections
Mike Milligan	Director	New Business Development		1 Year + re-elections
Michelle James	Director	Sales		1 Year + re-elections
Peggy Baas	Director	Special Events Coordinator, Louisville Metro Government		1 Year + re-elections
Candace Milligan	Director	Interior Designer, Candace Cornette Designs Inc.		1 Year + re-elections
Sammy Stills	Acting Secretary	Owner of Awakenings; Healing and Design Studio		1 Year + re-elections

# Banking Summary - Year To Date

1/1/2015 through 6/10/2015

6/10/2015

Category	1/1/2015- 6/10/2015
<b>INCOME</b>	
Other Inc	7,347.37
<b>TOTAL INCOME</b>	<b>7,347.37</b>
<b>EXPENSES</b>	
ASCAP Music Liscense	143.43
candles for lobby	18.34
Fees & Charges	20.00
Gifts & Donations	-1,400.00
LG&E	2,544.37
liability insurance	1,273.10
media emails	75.00
piano tuning Camelot Music	95.00
refreshments for lobby	146.11
rent to Nancy Cogan	3,555.76
Shopping	
Electronics & Software	52.99
<b>TOTAL Shopping</b>	<b>52.99</b>
toilet paper and paper towels	4.55
website	149.00
<b>TOTAL EXPENSES</b>	<b>6,677.65</b>
<b>TRANSFERS</b>	
FROM Checking 2 at Republic Bk KY FL IN O...	2,000.00
FROM Checking at Republic Bk KY FL IN OH...	1,000.00
TO Checking 2 at Republic Bk KY FL IN OH B	-1,000.00
TO Checking at Republic Bk KY FL IN OH Bus	-2,000.00
<b>TOTAL TRANSFERS</b>	<b>0.00</b>
<b>OVERALL TOTAL</b>	<b>669.72</b>



**Information copy. Do not send to IRS.**

Form **990-N**  
Department of the Treasury  
Internal Revenue Service

**Electronic Notice (e-Postcard)**  
for Tax-Exempt Organizations not Required To File Form 990  
or 990-EZ

OMB No. 1545-2085

**2014**

Open to Public Inspection

**A** For the 2014 calendar year, or tax year beginning 1/1/2014, and ending 12/31/2014.

**B** Check if applicable

Terminated, Out of Business

Gross receipts are normally \$50,000 or less

**C** Name of organization: VAULT1031 CULTURE & COMMUNITY  
d/b/a:

% Barb Cullen and Jon Huffman  
1031 S 6th street  
Louisville, KY, US, 40203

**D** Employer Identification Number

[REDACTED]

**E** Website: Vault1031.co

**F** Name of Principal Officer: Barb Cullen

1031 S 6th Street  
Louisville, KY, US, 40203

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

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

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

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

Commonwealth of Kentucky  
Alison Lundergan Grimes, Secretary of State

NAOI  
0842354.09  
Alison Lundergan Grimes  
Secretary of State  
Received and Filed  
11/8/2012 1:40:28 PM  
Fee receipt: \$8.00

Alison Lundergan Grimes  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

Articles of Incorporation  
Non-profit Corporation

NAI

For the purposes of forming a non-profit corporation in Kentucky pursuant to KRS Chapter 273, the undersigned incorporator hereby submits the following Articles of Incorporation to the Office of the Secretary of State for filing:

**Article I:** The name of the company is

**Vault1031 Culture & Community Inc.**

**Article II:** The street address of the company's initial registered office in Kentucky is

**1031 S 6th Street, Louisville, KY 40203**

and the name of the initial registered agent at that address is **Nancy Cogan**

**Article III:** The mailing address of the company's initial principal office is

**1031 S 6th Street, Louisville, KY 40203**

**Article IV:** The name and mailing address of each incorporator is

Nancy Cogan                      1031 S 6th Street, Louisville, Kentucky 40203

**Article V:** The number of directors constituting the initial board of directors is 3. The name and mailing address of each director is

Mitch D Fields                      132 Rosswood Drive, Peewee Valley, Kentucky 40056  
Ashton Wolf                              13861 Wyandotte Place, Fishers, Indiana 46038  
Jennifer Das                              8609 Autumn Ridge Court, Louisville, Kentucky 40203

**Article VI:** The purpose of the company is: **Community Outreach, for both economic development and cultural activities**

Executed by the Incorporator on Thursday, November 08, 2012

Name of Incorporator: **Nancy Cogan**

Signature of individual signing on behalf of Incorporator: **Nancy Cogan**

I, **Nancy Cogan**, consent to serve as the Registered Agent on behalf of the corporation.

Signature of Registered Agent or individual signing on behalf of the company serving as Registered Agent:

**Nancy Cogan**

**ARTICLES OF INCORPORATION**

**Of**

**Vault1031 Culture & Community, Inc.**

The undersigned, a citizen of the United States, desiring to form a Non-Profit Corporation under the Non-Profit Corporation Law of Kentucky, do hereby certify:

**ARTICLE I**

**NAME OF REGISTERED OFFICE**

The Name of the Corporation shall be Vault1031 Culture & Community, Inc.

**ARTICLE II**

**PLACE**

The place in this state where the registered office of Vault1031 Culture & Community, Inc is located is in the in the County of \_\_Jefferson\_\_\_\_and the street address is \_1031 S. 6th Street,Louisville, Kentucky 40203.

**ARTICLE III**

**PURPOSE**

Vault1031 Culture & Community Inc is organized exclusively for charitable community outreach and cultural awareness purposes, including, for such purposes, as fundraising for its mission-specific programs that qualify as exempt under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code. All funds, whether income or principal, and whether acquired by gift or contribution or otherwise, shall be devoted to said purposes

**ARTICLE IV**

**MEMBERS**

Vault1031 Culture & Community, Inc. has a non-compensated Board of Directors. The voting board of director's membership provisions are set forth in the corporation's by-laws. See Vault1031 Culture & Community, Inc. Bylaws.

**ARTICLE V**

**BOARD OF DIRECTORS**

- Barbara F. Cullen, 539 West St. Catherine Street, KY 40203, 502-500-1131
- Jon Huffman, 539 West St. Catherine Street, KY 40203, 502-386-8992
- Siobhan Sheehan, 2703 Lamont Rd, Louisville, KY 40205 502-558-9112

- Patrick Sheehan, 2703 Lamont Rd, Louisville, KY 40205 502-558-7763
- Ashton Wolf, 13861 Wyandotte Place, Fishers, IN 46038, [ashtonwolf@aol.com](mailto:ashtonwolf@aol.com), 317-608-9121
- Jerome Pascua, 1516 Hawkshead Lane, Louisville, KY 40220, 502-749-9843 (cell), 502.643.9013
- Mike Milligan, 1338 South 6th Street, Louisville, KY 40208, 502 797 2658
- Michelle James, 310 West Lee Street, Louisville, Ky 40208, 502)262-4450
- Peggy Baas, 211 West Muhammed Ali Blvd, Louisville, KY 40202 (502)574-4541 (502) 609 2826
- Candace Milligan, 1338 S. 6th Street, Louisville, KY 40208 (cell) 502 548 1516
- Sammy Stills, 1770 Bardstown Rd, Louisville, KY 40205

Refer to Vault1031 Culture & Community, Inc. Bylaws. Members of the first Board of Directors shall serve until the first annual meeting, at which their successors are duly elected and qualified, or removed as provided in the bylaws.

## **ARTICLE VI**

### **REGISTERED AGENT**

A. John Huffman and Barbara Cullen 539 West St. Catherine St. Louisville, KY 40203.

B. The registered agents are founding directors of Vault1031 Culture & Community, Inc.

## **ARTICLE VII**

### **EXEMPTION REQUIREMENTS**

At all times shall the following operate as conditions restricting the operations and activities of the corporation:

1. No part of the net earnings of Vault1031 Culture & Community, Inc. shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that Vault1031 Culture & Community, Inc shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article III hereof.
2. No substantial part of the activities of Vault1031 Culture & Community, Inc shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office.
3. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

**ARTICLE VIII**

**DURATION**

The duration of the corporate existence shall be perpetual.

**ARTICLE IX**

**DISSOLUTION**

Upon the dissolution of Vault1031 Culture & Community, Inc., assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of Vault1031 Culture & Community, Inc. is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes. (See Voluntary Dissolution per the State of Kentucky, USA, KRS 273)

**ARTICLE X**

**INCORPORATOR**

The incorporator of this corporation is: The undersigned incorporator certifies that she executes these articles for the purposes herein stated.

Signed *Stephan Neuman* Board President

Date 6/15/15

Signed *Barbara F. Cullen* Registered Agent

Date 6/16/2015

## Request for Taxpayer Identification Number and Certification

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

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.  
**Vault1031 Culture and community**

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:  
 Individual/sole proprietor or single-member LLC  
 C Corporation  
 S Corporation  
 Partnership  
 Trust/estate  
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) > \_\_\_\_\_  
 Note. 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.  
 Other (see instructions) > **Non Profit 501(c)(3)**

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  
 Exempt payee code (if any) \_\_\_\_\_  
 Exemption from FATCA reporting code (if any) \_\_\_\_\_  
*(Apply to accounts maintained outside the U.S.)*

5 Address (number, street, and apt. or suite no.)  
**1031 S. 6th Street**

6 City, state, and ZIP code  
**Louisville, KY 40203**

7 List account number(s) here (optional)

Requester's name and address (optional)

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the 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>	<b>Employer identification number</b>																
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>									<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>								

**Part II Certification**

Under penalties of perjury, I certify that:

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

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

**Sign Here** Signature of U.S. person > Date > **5/26/2015**

**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 1098-INT (interest earned or paid)
- Form 1098-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-G (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.



## Student Pre-Dessert Theatre Survey

<b>Pre Dessert Theatre Survey</b>					
<b>What made you interested in Dessert Theatre</b>	I needed something to do this summer	I was tired of cleaning up the house	I really wanted to get involved with dancing and singing		They said I had to
<b>What do you expect to get out of this program</b>	To learn how to dance and sing	To be able to get in front of people and not be afraid	Have fun		Other (please explain)
<b>What background do you have performing in front of an audience</b>	No background at all	1=2 years	3=4 years		5 years or more
<b>How old are you</b>	5=7 years old	8=10 years old	11 years or older		
<b>Have you ever sang in an organized group?</b>	Yes	No			
<b>Have you ever danced in an organized group?</b>	yes	No			
<b>Have you ever performed in a play or other type of production?</b>	Yes	No			

## Post Dessert Theatre Survey

<p><b>Did you enjoy the performance of Desert Theatre?</b></p>	<p>Yes</p>	<p>No</p>	<p>If no - would you share why?</p>	
<p><b>Did you like the facility of Armored Car Theatre</b></p>	<p>Yes</p>	<p>No</p>	<p>if no - would you share why?</p>	
<p><b>Would you attend another performance in the future?</b></p>	<p>Yes</p>	<p>No</p>	<p>If no - would you share why?</p>	
<p><b>Did you enjoy the refreshments</b></p>	<p>Yes</p>	<p>No</p>	<p>If No - what would you rather have?</p>	

## Student Post-Dessert Theatre Survey

Post Dessert Theatre Survey	Rate 1-5 with 1 being the worst and 5 being the best					
	1	2	3	4	5	
Did you get what you expected out of the Dessert Theatre program?	No I didn't get what I expected at all out of Dessert Theatre	Dessert Theatre was okay but I didn't really like it	It's about the same as other things I do over the summer	Dessert Theatre was really good	Dessert Theatre was great!	
Did you learn how to sing?	No I didn't learn to sing	I learned to sing a little	I could sing before	I learned to sing better than I did before	I can really sing now!	
Did you learn how to dance?	No I didn't learn to dance	I learned to dance a little	I could dance before	I learned to dance better than I did before	I can really dance now!	
Did you learn how to act?	No I didn't learn to act	I learned to act a little	I could act before	I learned to act better than I did before	I can really act now!	
Do you feel like you can perform in front of an audience now that you have been involved with Dessert Theatre?	No Way!	Not really	Maybe	Sure	Yes!	
Would you like to participate in Dessert Theatre next year?	Yes	No	if no - would you share why?			
Do you think your friends would "LIKE" to be a part of Dessert Theatre?	Yes	No	if no - would you share why?			
How old are you	5=7 years old	8=10 years old	11 years or older			

June 15, 2015

RE: Statement of notification of paid employees at Vault1031 Culture and Community.

This letter is to affirm that currently there are **no** paid employees at Vault1031 Culture and Community.

Barbara Cullen

Handwritten signature of Barbara F. Cullen and the date 6/16/2015.

Co-Artistic Director  
Vault1031 Culture and Community, Inc.  
1031 S. 6<sup>th</sup> Street  
Louisville, KY 40203

## Vault1031 Culture & Community Inc.

### General Information

<b>Organization Number</b>	0842354
<b>Name</b>	Vault1031 Culture & Community 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>	11/8/2012 1:40:28 PM
<b>Organization Date</b>	11/8/2012 1:40:28 PM
<b>Last Annual Report</b>	6/12/2015
<b>Principal Office</b>	1031 S 6th Street Louisville, KY 40203
<b>Registered Agent</b>	BARBARA CULLEN 539 W. ST. CATHERINE STREET LOUISVILLE, KY 40203

### Current Officers

<b>President</b>	<a href="#"><u>Siobhan M Sheehan</u></a>
<b>Vice President</b>	<a href="#"><u>Patrick J Sheehan</u></a>
<b>Director</b>	<a href="#"><u>Barbara F Cullen</u></a>
<b>Director</b>	<a href="#"><u>Jon Huffman</u></a>
<b>Director</b>	<a href="#"><u>Mike Milligan</u></a>
<b>Director</b>	<a href="#"><u>Ashton Wolf</u></a>
<b>Director</b>	<a href="#"><u>Jerome Pascua</u></a>
<b>Director</b>	<a href="#"><u>Michelle James</u></a>
<b>Director</b>	<a href="#"><u>Peggy Baas</u></a>
<b>Director</b>	<a href="#"><u>Candace Milligan</u></a>
<b>Director</b>	<a href="#"><u>Sammy Stills</u></a>
<b>Initial Director</b>	<a href="#"><u>Jon Huffman</u></a>

### Individuals / Entities listed at time of formation

<b>Director</b>	<a href="#"><u>MITCH D FIELDS</u></a>
<b>Director</b>	<a href="#"><u>ASHTON WOLF</u></a>
<b>Director</b>	<a href="#"><u>JENNIFER DAS</u></a>
<b>Incorporator</b>	<a href="#"><u>NANCY COGAN</u></a>

### Images available online

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

[Annual Report Amendment](#)    6/29/2015    1 page    [PDF](#)

<a href="#">Annual Report</a>	6/12/2015	1 page	<a href="#">PDF</a>
<a href="#">Registered Agent name/address change</a>	10/13/2014 1:14:00 PM	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	6/9/2014	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	3/25/2013	1 page	<a href="#">PDF</a>
<a href="#">Articles of Incorporation</a>	11/8/2012 1:40:29 PM	1 page	<a href="#">PDF</a>

## Assumed Names

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## Activity History

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Filing	File Date	Effective Date	Org. Referenced
Amendment to annual report	6/29/2015 9:43:52 PM	6/29/2015 9:43:52 PM	
Annual report	6/12/2015 10:44:02 AM	6/12/2015 10:44:02 AM	
Registered agent address change	10/13/2014 1:14:00 PM	10/13/2014 1:14:00 PM	
Annual report	6/9/2014 1:04:14 PM	6/9/2014 1:04:14 PM	
Annual report	3/25/2013 2:06:43 PM	3/25/2013 2:06:43 PM	
Add	11/8/2012 1:40:28 PM	11/8/2012 1:40:28 PM	

## Microfilmed Images

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