

Received 3-7-14 @ 3:07pm
EOD

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

Applicant/Program: Old Louisville Information Center

Executive Summary of Request:
This is a one a one day program beginning and ending on Saturday, April 5, 2014 in Central Park. The annual event host approximately 150 people from the Old Louisville neighborhood, the purpose of the event is to continually beautify Central Park. Activities include weeding, cleaning benches, mulching, general clean-up of debris and dead branches.

I have reviewed the attached Neighborhood Development Fund Application and have found it complete and

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

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.

6 District # [Signature] Primary Sponsor Signature \$900.00 Amount 3-6-2014 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

Clerk's Office Only:
Request Amount: _____ Committee Amended Appropriation: _____
Original Appropriation: _____ Council Amended Appropriation: _____

OFFICE OF METRO COUNCIL CLERK
REVIEWED

DATE 3-10-14 TIME 3:46 pm

NDF NON-PROFIT APPLICATION CHECKLIST

Legal Name of Applicant Organization: Old Louisville Information Center		
Program Name:	Central Park Clean Up	Request Amount: \$900.00
		Yes/No/NA
Request form:	Is the NDF request form signed by all Council Member(s) appropriating funding?	Yes
Request form:	Is the funding proposed less than or equal to the request amount?	Yes
Request form:	Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?	Yes
Application Page 1:	Has prior Metro funds committed/granted been disclosed?	Yes
Application Page 1:	Is the application properly signed and dated by authorized signatory?	Yes
Application Page 3:	Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?	No
Application Pages 3 – 5:	Is the proposed public purpose of the program well-documented?	Yes
Application 4:	Is there adequate documentation of how the proceeds of the fundraiser will be spent?	Yes
Application Budget Page 6:	Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for “Metro, Non Metro and Total” expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?	Yes
Faith Based Organizations:	Is the signed Faith Based Form signed and included?	No
Jefferson County Only:	Will all funding be spent in Louisville/Jefferson County?	Yes
Capital Project(s) request:	Is the cost estimate(s) from proposed vendor(s) included?	Yes
Good Standing:	Is the entity in good standing with: <ul style="list-style-type: none"> • Kentucky Secretary of State – include Secretary of State website information on organization • Louisville Metro Government – check OMB monthly report filed in Council Financial Reports • Internal Revenue Service – most recent Form 990 included 	Yes
Separate Taxing Districts:	If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?	n/a
Small Cities:	Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)	No
Operating Requests:	Is recommended operating funding less than or equal to 33% of total operating budget?	Yes
IRS Exempt Proof:	Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes
Operating Budget:	Is the organization’s current fiscal year operating budget included?	Yes
Ordinance Required:	Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.	No
Board Members:	Is the entity’s board member list (with term length/term limits) included?	Yes
Staff:	Is a list of the highest paid staff included with their expected annual personnel costs?	No
Annual Audit:	Is the most recent annual audit (if required by organization) included?	No
Rent Requests:	Is a copy of signed lease included?	No
Articles of Incorporation:	Are the Articles of Incorporation of the organization included?	Yes
IRS Form W-9:	Is the IRS Form W-9 included?	No
Evaluation Forms:	Are the evaluation forms (if program participants are given evaluation forms) included?	No
Affirmative Action:	Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?	No
Prepared by:	Kande Mitchell-Smet Date: 9-7-14	



LOUISVILLE METRO COUNCIL

NEIGHBORHOOD DEVELOPMENT FUND APPLICATION



SECTION 1 - APPLICANT INFORMATION

Legal Name of Applicant Organization: **Old Louisville Information Center**
(as listed on: <http://www.sos.ky.gov/business/records/>)

Main Office Street & Mailing Address: **1340 South 4th Street, Louisville, Ky. 40208**

Website: **www.oldlouisville.org**

Application Contact: **Howard Rosenberg**

Title: **Chair, OLNC/OLIC**

Phone: **502-635-5244**

Email: **olnc@bellsouth.net**

Financial Contact: **Mona Jackson**

Title: **Treasurer**

Phone: **502-635-5244**

Email: **olnc@bellsouth.net**

GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED

Program Facility Location(s): **Central Park, 1340 South 4th Street, Louisville, Ky.40208**

Council District(s): **Sixth**

Zip Code(s): **40203/40208**

SECTION 2 - PROGRAM REQUEST & FINANCIAL INFORMATION

Program Name: **Central Park Clean-Up**

Total Request: **\$ 900.00**

Total Metro Award (this program) in previous year : **\$**

The following are required attachments:

- IRS Exempt Status Determination Letter
- Current Year Projected Budget
- List of Board of Directors (include term & term limits)
- Current financial statement
- Most recent IRS Form 990 or 1120-H
- Articles of Incorporation
- Cost estimates from proposed vendor if request is for capital expense
- Signed lease if rent costs are being requested
- IRS Form W9
- Evaluation forms if used in the proposed program
- Annual audit (if required by organization)
- Faith Based Organization Certification Form, if required
- Staff including the 3 highest paid staff

Agency Fiscal Yr Start Date: **January 2014**

For the current fiscal year ending June 30, list all funds received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.

Source: **9/19/13-\$815.58-Community Garden** Amount: **\$ 815.58**

Source: **11/14/13-\$2,446.76-Community Garden** Amount: **\$ 2,446.76**

Source: Amount: **\$**

Has the applicant contacted the BBB Charity Review for participation? Yes No

Has the applicant met the BBB Charity Review Standards? Yes No

SECTION 3 - SIGNATURE

I certify under the penalty of law the information in this application (including, without limitation, the "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.

Signature of Legal Signatory:

Date: **2/28/14**

Legal Signatory (please print): **Howard Rosenberg**

Title: **Chair, OLNC/OLIC**

Phone: Extension: **502-445-4193**

Email: **olnc@bellsouth.net**

SECTION 4 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

The purpose of the OLIC is as follows:

1. To operate a resource center for the residents of the Old Louisville Neighborhood which will provide a wide variety of educational material, information, and other services to help them meet social, health, welfare, educational and cultural needs
2. To engage in educational and charitable activity to lessen neighborhood tensions and to encourage and promote community operation and pride.
3. To engage in educational and charitable activity to combat neighborhood deterioration and to promote community revitalization and development
4. To encourage, promote, and provide activity for neighborhood youth designed to instill in them a friendly and cooperative spirit and to advance their educational and cultural development.

SECTION 5 - PROGRAM NARRATIVE

A: Purpose of Request (check all that apply):

- Operating Funds (generally cannot exceed 33% of agency's total operating budget)
- Programming/services/events for direct benefit to community or qualified individuals
- Capital Project of the organization (equipment, furnishing, building, etc)

B: 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 is a one day program beginning and ending on Saturday, April 5 in Central Park. The annual event host approximately 150 people from the Old Louisville neighborhood. The purpose of the event is to continually beautify Central Park. Activities include weeding, cleaning benched, mulching, general clean up of debris and dead branches.

C: Describe specifically how the funding will be spent including identification of funding to subgrantee(s):

Funds will be spent on mulch, plants, grass seed, paint and paint brushes, and other clean up materials as needed.

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

- The funding request is a reimbursement of the following expenditures that have occurred prior to the application date:
 - ✓ 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.

NA

- The funding request is a reimbursement of the following expenditures that will be incurred after the application date, but prior to the Metro Council approval date. This option will allow expenditures occurring within this time frame to be considered compliant with 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.

NA

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

NA

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 specifically.

The Old Louisville Neighborhood Council partners with other Metro Neighborhoods and neighborhoods within the Old Louisville Preservation District. We also partner with Sixth District Councilman David James on areas important to Old Louisville.

G: 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:

This event provides needed maintenance and ongoing beautification to Central Park so that events that occur in the park are done so in pleasant and clean surroundings. There are also other events that benefit from the cleanup such as the Kentucky Shakespeare Festival. The park is a central showpiece for residents and visitors alike. It serve as a gathering place for residents and others throughout the year.

SECTION 6 - PROGRAM BUDGET SUMMARY

The Program Budget should realistically estimate what amount is needed from Metro Government and what is expected from other sources. **Enter whole-dollar amounts.**

Program Expenses	Column 1	Column 2*	Column 3
	Proposed Metro Funds	Non-Metro Funds	Total Program Cost
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (Attach Detailed List)			
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (Attach Detailed List)	\$900 see attached		
J: Machinery & Equipment			
K: Capital Project			
L: Other Expenses (Attach Detail List)			
SUBTOTAL	\$900		
% of Program Budget –	%	%	100%
Value of volunteer services and how computed:	N/A		
Value of in-kind assets, such as donated space, supplies, use of equipment, etc. (Detail on Next Page)	N/A		
Total Program Funds	\$900		

***List funding sources in Column 2 (do not include individual donor names):**

Other State, Federal or Local Government	
United Way	
Private Contributions	
Fees Collected from Program Participants	
Other (please specify)	
Total Revenues	

PROGRAM BUDGET SUMMARY (CONTINUED)

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
Total Value of In-Kind <i>(to match Program Budget Line Item.</i> Volunteer Contribution & Other In Kind)		

* Donor information refers to who made the in kind contribution. Volunteers need not be listed individually, but grouped together on one line as a total noting how many hours per person per week)

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

If YES, please explain:

SECTION 7 - CERTIFICATIONS AND ASSURANCES

By signing the first page 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. 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. Return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end
8. 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.

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. *N/A*

Central Park Clean up
April 5, 2014

Funds will be spent on mulch, plants, grass seed, paint and paint brushes, and other clean up materials as needed. Total request - \$900

JUN 3 - 1986

Internal Revenue Service
District Director

Department of the Treasury

Date: JUN 2 1986

Our Letter Dated:
October 29, 1984
Person to Contact:
Cindy Perry
Contact Telephone Number:
513-684-3578

Old Louisville Information Center, Inc.
1340 South Fourth St.
Louisville, KY 40208

Dear Sir or Madam:

This modifies our letter of the above date in which we stated that you would be treated as an organization which is not a private foundation until the expiration of your advance ruling period.

Based on the information you submitted, we have determined that you are not a private foundation within the meaning of section 509(a) of the Internal Revenue Code, because you are an organization of the type described in section 509(a)(1)*. Your exempt status under section 501(c)(3) of the code is still in effect.

Grantors and contributors may rely on this determination until the Internal Revenue Service publishes notice to the contrary. However, a grantor or a contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act that resulted in your loss of section 509(a)(1)* status, or acquired knowledge that the Internal Revenue Service had given notice that you would be removed from classification as a section 509(a)(1)* organization.

Because this letter could help resolve any questions about your private foundation status, please keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown above.

Sincerely yours,



District Director

*and 170(b)(1)(A)(vi)

P.O. Box 2508, Cincinnati, Ohio 45201

sab

Letter 1050 (DO) (7-77)

JUN 2 1983

FILED IN OFFICE
A 29567

ORIGINAL COPY FILED
SECRETARY OF STATE OF KENTUCKY,
FRANKFORT, KENTUCKY

CREATED BY, Clerk
OF
ARTICLES OF INCORPORATION
OF
THE OLD LOUISVILLE INFORMATION CENTER, INC.

MAY 16 1983

Carroll J. Hill
SECRETARY OF STATE

I, THE UNDERSIGNED, for the purpose of forming a non-profit, non-stock corporation, under and pursuant to the laws of the Commonwealth of Kentucky, and more particularly Chapter 273 of the Kentucky Revised Statutes, hereby certify as follows:

ARTICLE I

The name of the Corporation shall be:
THE OLD LOUISVILLE INFORMATION CENTER, INC.

ARTICLE II

The duration of the Corporation shall be perpetual.

ARTICLE III

The principal place of business of the Corporation is to be located at 1340 So. Fourth Street (in Central Park), Louisville, Kentucky, 40208 and such other places in said city or elsewhere as its Board of Directors may by resolution designate.

The name and address of the registered agent for service of process is:

Richard L. Janes
1340 So. 4th Street (in Central Park)
Louisville, Kentucky 40208

ARTICLE IV

The Corporation is organized and shall be operated exclusively for charitable and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1954 (or corresponding provisions of any later Federal tax laws), including

for such purposes the making of distributions to organizations and individuals for the purpose of engaging in activity falling within the purposes of the Corporation and permitted for an organization exempt under said Section 501(c)(3).

The purposes of the Corporation shall be more specifically stated as follows:

1) To operate a resource center for the residents of the Old Louisville neighborhood which will provide a wide variety of educational material, information, and other services to help them meet social, health, welfare, educational and cultural needs.

2) To engage in educational and charitable activity designed to lessen neighborhood tensions and to encourage and promote community cooperation and pride.

3) To engage in educational and charitable activity designed to combat neighborhood deterioration and to promote community revitalization and development.

4) To encourage, promote, and provide activity for neighborhood youth designed to instill in them a friendly and cooperative spirit and to advance their educational and cultural development.

ARTICLE V

The Corporation shall be irrevocably dedicated to and operated exclusively for, non-profit purposes. No part of the net earnings of the Corporation shall inure to the benefit of or be distributable to its members, directors, officers, or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article IV hereof.

ARTICLE VI

The Corporation shall be empowered to do all acts reasonable and necessary and within the laws of the State of Kentucky, in particular those enumerated in KRS 273.171, to further its purposes set out in Article IV, except as follows and as otherwise stated in these Articles:

a) No substantial part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing or distribution of statements), any political campaign on behalf of any candidate for public office.

b) Notwithstanding, any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1954 or the corresponding provisions of any subsequent Federal tax laws. If and so long as the Corporation is a private foundation as defined in Section 509(a) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws:

1) The Corporation shall distribute its income for each taxable year at such time and in such manner as not to become subject to the tax on undistributed income imposed by Section 4942 of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

2) The Corporation shall not engage in any act of self-dealing as defined in Section 4941(d) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

3) The Corporation shall not retain any excess business holdings as defined in Section 4943(c) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

4) The Corporation shall not make any investments in such manner as to subject it to tax under Section 4944 of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

5) The Corporation shall not make any taxable expenditures as defined in Section 4945(d) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

ARTICLE VII

The names and addresses of the incorporators are:

INCORPORATOR

Richard L. Janes

MAILING ADDRESS

1409 So. Brook Street
Louisville, Kentucky 40208

ARTICLE VIII

The names and addresses of the members of the initial Board of Directors are:

Richard L. Janes
1409 So. Brook Street
Louisville, Kentucky 40208

Carolyn Beall
1216 So. Floyd Street
Louisville, Kentucky 40203

Rose Greenough Nett
940 So. 6th Street
Louisville, Kentucky 40203

ARTICLE IX

The initial By-Laws shall be adopted by the initial Board of Directors. Thereafter, the Corporation shall be governed by the By-Laws.

ARTICLE X

The officers and members of this Corporation shall not be held personally liable for any debt or obligation of the Corporation solely because of their position as officers and members of the Corporation.

ARTICLE XI

In the event of dissolution of the Corporation, the Board of Directors shall, after paying or making provision for the payment of all liabilities of the Corporation, dispose of all assets of the Corporation exclusively for the purposes of the Corporation, in such manner, or to such organizations organized and operated exclusively for charitable or educational purposes as shall at the time qualify as an exempt organization under Section 501(c)(3) of the Internal Revenue Code of 1954 (or corresponding provisions of any later Federal tax laws), as the Board of Directors shall determine.

The remaining assets, if any, shall be disposed of by the Circuit Court of the county in which the principal office for the Corporation is then located, exclusively for such purposes or to such organizations as said Court shall determine are organized and operated exclusively for such purposes.

ARTICLE XII

Amendments to these Articles shall be made pursuant to the provisions of K.R.S. 273.263.

IN TESTIMONY WHEREOF, witness the signatures of the Incorporator of this Corporation on this 2 day of May, 1983.



Before me, the undersigned authority, personally appeared RICHARD L. JANES and being first duly sworn, acknowledged that he was an incorporator of the aforementioned Corporation, and that he signed the foregoing Articles of Incorporation as his free act and deed.

Witness my signature and seal of office this 2 day of May, 1983.

My Commission Expires: 8-16-86


NOTARY PUBLIC, STATE-AT-LARGE,
KENTUCKY

This Document Prepared By:

JEFFREY B. SEGAL
ATTORNEY AT LAW
LEGAL AID SOCIETY, INC.
425 W. Muhammad Ali Blvd.
Louisville, Kentucky 40202
(502) 584-1254

2014 Old Louisville Information Center Officers and Board

OFFICE	NAME	ADDRESS	TEL NO.	EMAIL ADDRESS
Chair	Howard Rosenberg	1202 S. 6TH ST. 40203	896-9833	hrosenberg@twc.com
Vice-Chair	Jason Scott	521 W. Ormsby Ave. 40203	802-5273	jasonsc99@yahoo.com
Secretary	Leah Weisman	526 W. St. Catherine 40208	703-909-2706	Weisman.leah@gmail.com or leah@strategexe.com
Treasurer	Mona Jackson	1344 S. 6th St. 40208	291-9471 635-2411	monak_jackson@hotmail.com
OLIC Board	Bob Bajandas	1412 S. 6 th St. 40208	637-1160	rbajandas@insightbb.com
OLIC Board	Roz Fishman	1360 Ouerbacker Ct., 40208	636-3257	RozFishman@aol.com
OLIC Board	Victor Marquardt	127 W. Ormsby Ave. 40203	749-8513	kentuckyblue29@yahoo.com
OLIC Board	Ron Harris	1390 S. 3rd St. 40208	637-2227	kentuckysquire@twc.com

Administrative Assistant: Linda Plunkett

The Old Louisville Information Center is an incorporated, non-profit, 501-C3 organization.

The Old Louisville Information Center is committed to promoting the Old Louisville neighborhood and its unique architectural and historical characteristics by serving as a source of information and reference.

The Old Louisville Neighborhood Council, the umbrella organization for 14 block associations in Old Louisville, also operates in the Information Center.

The Old Louisville Journal, the neighborhood newsletter, is published monthly by the Information Center. It is in its 33rd year of continuous publication.

Updated 12/4/13

**OLD LOUISVILLE INFORMATION CENTER
CENTRAL PARK IMPROVEMENT DAY
Profit & Loss 2013**

Prepared for
2014 NDF Grant

Ordinary Income/Expense

Income

43400 · Direct Public Support	
43460 · Individ, NA, Business Cntrbtns	3,625.00
Total 43400 · Direct Public Support	<u>3,625.00</u>

Total Income 3,625.00

Expense

62100 · Contract Services	
62160 · Outside Contract/Labor Services	0.00
Total 62100 · Contract Services	<u>0.00</u>

62800 · Facilities and Equipment	
62885 · Park Grounds	877.16
Total 62800 · Facilities and Equipment	<u>877.16</u>

65000 · Operations	
65025 · Postage, Mailing Service	201.34
65035 · Refreshments	1,082.83
65040 · Supplies	425.19
Total 65000 · Operations	<u>1,709.36</u>

68300 · Travel and Meetings	
68320 · Travel	0.00
Total 68300 · Travel and Meetings	<u>0.00</u>

Total Expense 2,586.52

Net Ordinary Income 1,038.48

Net Income 1,038.48

**OLD LOUISVILLE INFORMATION CENTER
2013 Profit & Loss**

	Jan - Dec 13
Ordinary Income/Expense	
Income	
43400 · Direct Public Support	
43450 · Grant Income	6,080.38
43460 · Individ, NA, Business Cntrbtns	9,338.00
Total 43400 · Direct Public Support	15,418.38
45000 · Investments	
45030 · Interest	5.20
Total 45000 · Investments	5.20
47200 · Program Income	
47240 · Program Service Fees	180.00
Total 47200 · Program Income	180.00
47210 · Advertising	364.67
Total Income	15,968.25
Expense	
62100 · Contract Services	
62130 · Commissions	280.00
62110 · Accounting Fees	826.25
62160 · Outside Contract/Labor Services	2,318.05
Total 62100 · Contract Services	3,424.30
62800 · Facilities and Equipment	
62808 · Community Garden	6,300.77
62840 · Equip Rental and Maintenance	191.18
62885 · Park Grounds	5,772.82
Total 62800 · Facilities and Equipment	12,264.77
65000 · Operations	
65010 · Books, Subscriptions, Reference	78.90
65025 · Postage, Mailing Service	315.34
65030 · Printing and Copying	393.95
65035 · Refreshments	1,191.83
65040 · Supplies	601.04
65060 · Telephone, Telecommunications	1,566.85
65090 · Utilities	113.53
Total 65000 · Operations	4,261.44
68300 · Travel and Meetings	
68320 · Travel	35.52
Total 68300 · Travel and Meetings	35.52
Total Expense	19,986.03
Net Ordinary Income	-4,017.78

OLD LOUISVILLE INFORMATION CENTER

Balance Sheet

As of December 31, 2013

	<u>Dec 31, 13</u>
ASSETS	
Current Assets	
Checking/Savings	
10000 · Checking/Savings	
10030 · Chase Checking	8,789.90
10031 · Chase Savings	4,909.11
10020 · Friends SYB Checking	8,536.00
10050 · Petty Cash	577.44
Total 10000 · Checking/Savings	<u>22,812.45</u>
Total Checking/Savings	22,812.45
Accounts Receivable	
11000 · Accounts Receivable	900.00
Total Accounts Receivable	<u>900.00</u>
Total Current Assets	23,712.45
Fixed Assets	
15000 · Furniture and Equipment	825.00
Total Fixed Assets	<u>825.00</u>
TOTAL ASSETS	<u><u>24,537.45</u></u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Credit Cards	
20000 · Chase Credit Card	327.99
Total Credit Cards	<u>327.99</u>
Total Current Liabilities	<u>327.99</u>
Total Liabilities	327.99
Equity	
31500 · Temp. Restricted Net Assets	
31501 · Tennis Courts	8,536.00
Total 31500 · Temp. Restricted Net Assets	<u>8,536.00</u>
32000 · Unrestricted Net Assets	19,691.24
Net Income	-4,017.78
Total Equity	<u>24,209.46</u>
TOTAL LIABILITIES & EQUITY	<u><u>24,537.45</u></u>

THE OLD LOUISVILLE INFORMATION CENTER, INC.

General Information

Organization Number 0177929
Name THE OLD LOUISVILLE INFORMATION CENTER, INC.
Profit or Non-Profit N - Non-profit
Company Type KCO - Kentucky Corporation
Status ~~A - Active~~
Standing ~~G - Good~~
State KY
File Date 5/16/1983
Organization Date 5/16/1983
Last Annual Report 1/24/2014
Principal Office 1340 S. 4TH ST.(IN CENTRAL PARK)
 LOUISVILLE, KY 40208
Registered Agent OLD LOUISVILLE NEIGHBORHOOD COUNCIL INC.
 1340 S. 4TH. ST.
 IN CENTRAL PARK
 LOUISVILLE, KY 40208

Current Officers

President Howard Rosenberg
Vice President Jason Scott
Secretary Leah Weisman
Treasurer MONA JACKSON
Director BOB BAJANDAS
Director ROSALIND FISHMAN
Director Victor Marquardt Marquardt
Director Ron Harris

Individuals / Entities listed at time of formation

Director RICHARD L. JANES
Director COROLYN BEALL
Director ROSE GREENOUGH NETT
Incorporator RICHARD L. JANES

Images available online

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

<u>Annual Report</u>	1/24/2014	1 page	<u>PDF</u>
<u>Annual Report</u>	1/10/2013	1 page	<u>PDF</u>
<u>Annual Report</u>	1/3/2012	1 page	<u>PDF</u>
<u>Annual Report</u>	1/13/2011	1 page	<u>PDF</u>
<u>Annual Report</u>	1/26/2010	1 page	<u>PDF</u>

Annual Report	1/21/2009	1 page	PDF
Annual Report	8/5/2008	1 page	PDF
Annual Report	6/14/2007	1 page	tiff PDF
Annual Report	6/16/2006	2 pages	tiff PDF
Annual Report	4/21/2005	1 page	tiff PDF
Statement of Change	7/12/2004	1 page	tiff PDF
Annual Report	6/10/2003	1 page	tiff PDF
Annual Report	7/2/2002	1 page	tiff PDF
Annual Report	11/29/2001	1 page	tiff PDF
Statement of Change	10/1/2001	1 page	tiff PDF
Annual Report	10/30/2000	1 page	tiff PDF
Sixty Day Notice Return	9/1/2000	1 page	tiff PDF
Statement of Change	8/31/1999	1 page	tiff PDF
Annual Report	8/3/1999	1 page	tiff PDF
Annual Report	5/14/1998	1 page	tiff PDF
Annual Report	7/1/1997	1 page	tiff PDF
Annual Report	7/1/1996	1 page	tiff PDF
Annual Report	7/1/1995	1 page	tiff PDF
Annual Report	7/1/1994	1 page	tiff PDF
Annual Report	3/22/1993	1 page	tiff PDF
Annual Report	3/27/1992	1 page	tiff PDF
Annual Report	7/1/1991	1 page	tiff PDF
Annual Report	7/1/1991	1 page	tiff PDF
Annual Report	7/1/1990	1 page	tiff PDF
Annual Report	7/1/1989	1 page	tiff PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	1/24/2014 4:05:07 PM	1/24/2014 4:05:07 PM	
Annual report	1/10/2013 3:24:35 PM	1/10/2013 3:24:35 PM	
Annual report	1/3/2012 4:58:06 PM	1/3/2012 4:58:06 PM	
Annual report	1/13/2011 4:30:17 PM	1/13/2011 4:30:17 PM	
Annual report	1/26/2010 5:04:12 PM	1/26/2010 5:04:12 PM	
Annual report	1/21/2009 3:18:23 PM	1/21/2009 3:18:23 PM	
Annual report	8/5/2008 1:34:22 PM	8/5/2008 1:34:22 PM	
Annual report	6/14/2007 1:29:37 PM	6/14/2007	
Annual report	6/16/2006 11:48:40 AM	6/16/2006	
Registered agent address change	7/12/2004 1:56:04 PM	7/12/2004	

Registered agent address change	10/1/2001 11:46:30 AM	10/1/2001
Annual report	8/31/2001 2:28:33 PM	8/31/2001
Annual report	10/3/2000	10/3/2000
Registered agent address change	8/31/1999	8/31/1999
Amendment - Miscellaneous amendments	10/24/1985	10/24/1985

Microfilmed Images

Microfilm images are not available online. They can be ordered by faxing a Request For Corporate Documents to the Corporate Records Branch at 502-564-5687.

Annual Report	1/7/2005	1 page
Statement of Change	7/12/2004	1 page
Annual Report	4/13/2004	1 page
Annual Report	6/10/2003	1 page
Annual Report	7/2/2002	1 page
Annual Report	11/29/2001	1 page
Statement of Change	10/1/2001	1 page
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Annual Report	5/14/1998	1 page
Annual Report	7/1/1997	1 page
Annual Report	7/1/1996	1 page
Annual Report	7/1/1995	1 page
Annual Report	7/1/1994	1 page
Annual Report	3/22/1993	1 page
Annual Report	3/27/1992	1 page
Annual Report	7/1/1991	1 page
Annual Report	7/1/1990	1 page
Annual Report	7/1/1989	1 page
Amendment	10/24/1985	3 pages
Articles of Incorporation	5/16/1983	6 pages

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-1150

2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

A For the 2011 calendar year, or tax year beginning _____, and ending _____

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization
OLD LOUISVILLE INFORMATION CENTER

D Employer identification number
31-1106357

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
1340 SOUTH FOURTH ST-IN CENTRAL PAR

E Telephone number
502-635-5244

City or town, state or country, and ZIP + 4
LOUISVILLE KY 40208

F Group Exemption Number

G Accounting Method: Cash Accrual Other (specify) _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: **N/A**

J Tax-exempt status (check only one) — 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **65,617**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)
 Check if the organization used Schedule O to respond to any question in this Part I

	Description	Line	Amount
Revenue	1 Contributions, gifts, grants, and similar amounts received	1	16,250
	2 Program service revenue including government fees and contracts	2	49,367
	3 Membership dues and assessments	3	
	4 Investment income	4	
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
c Less: direct expenses from gaming and fundraising events	6c		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a Gross sales of inventory, less returns and allowances	7a		
b Less: cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8 Other revenue (describe in Schedule O)	8		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	65,617	
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	6,000
	13 Professional fees and other payments to independent contractors	13	675
	14 Occupancy, rent, utilities, and maintenance	14	1,729
	15 Printing, publications, postage, and shipping	15	2,663
	16 Other expenses (describe in Schedule O)	16	22,961
17 Total expenses. Add lines 10 through 16	17	34,028	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	31,589
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	57,193
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	-527
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	88,255

Part II Balance Sheets. (see the instructions for Part II.)

Check if the organization used Schedule O to respond to any question in this Part II X

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	57,054	22	97,745
23 Land and buildings	0	23	
24 Other assets (describe in Schedule O)	500	24	
25 Total assets	57,554	25	97,745
26 Total liabilities (describe in Schedule O)	361	26	9,490
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	57,193	27	88,255

Part III Statement of Program Service Accomplishments (see the instructions for Part III.)

Check if the organization used Schedule O to respond to any question in this Part III X

What is the organization's primary exempt purpose?

See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28 HOLIDAY HOUSE TOUR SHOWCASING THE NEIGHBORHOODS ARCHITECTURAL AND HISTORICAL SIGNIFICANCE	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	5,580
29 OPERATION OF OLD LOUISVILLE INFORMATION CENTER	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	9,051
30 CENTRAL PARK MAINTENANCE	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	5,004
31 Other program services (describe in Schedule O)	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	11,264
32 Total program service expenses (add lines 28a through 31a)		32	30,899

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (see the instructions for Part IV.)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
JOAN STEWART LOUISVILLE 1340 SOUTH 4TH ST KY 40208	PRESIDENT 0.00	0	0	0
RON HARRIS LOUISVILLE 1340 S 4TH KY 40208	VICE -PRESIDENT 0.00	0	0	0
MONA JACKSON LOUISVILLE 1340 S 4TH KY 40208	TREASURER 0.00	0	0	0
ERIKA WOLFE LOUISVILLE 1340 S 4TH KY 40208	SECRETARY 0.00	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a		
b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a		
b	Gross receipts, included on line 9, for public use of club facilities 39b		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed. ▶ None		
42a	The organization's books are in care of ▶ MONA JACKSON Telephone no. ▶ 502-291-9471 1344 SOUTH SIXTH ST Located at ▶ LOUISVILLE KY ZIP + 4 ▶ 40208		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No
42b			X
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶ _____		X
42c			X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
44b			X
c	Did the organization receive any payments for indoor tanning services during the year?		X
44c			X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
44d			
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		X
45b			X

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.
Check if the organization used Schedule O to respond to any question in this Part VI

47 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

	Yes	No
47		X

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

	Yes	No
48		X

49a Did the organization make any transfers to an exempt non-charitable related organization?

	Yes	No
49a		X

b If "Yes," was the related organization a section 527 organization?

	Yes	No
49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

	Yes	No
	X	

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. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer MONA JACKSON		Date TREASURER	
	Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name Mary C Morrow	Preparer's signature	Date 10/25/12	Check <input type="checkbox"/> if self-employed PTIN P00769897
	Firm's name Mary Morrow & Associates	Firm's EIN 73-1688464		
	Firm's address 1347 S 3rd St Ste 304 Louisville, KY 40208-3300	Phone no. 502-638-0665		

May the IRS discuss this return with the preparer shown above? See instructions

	Yes	No

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2011

Open to Public Inspection

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

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

Department of the Treasury Internal Revenue Service

Name of the organization

OLD LOUISVILLE INFORMATION CENTER

Employer identification number

31-1106357

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

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

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

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

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

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

Table with 7 main columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization in col. (i) listed in your governing document?, (v) Did you notify the organization in col. (i) of your support?, (vi) Is the organization in col. (i) organized in the U.S., (vii) Amount of support. Rows (A) through (E) and Total.

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

Schedule A (Form 990 or 990-EZ) 2011

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		8,341	29,522	16,646	16,250	70,759
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3		8,341	29,522	16,646	16,250	70,759
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						70,759

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4		8,341	29,522	16,646	16,250	70,759
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						70,759
12 Gross receipts from related activities, etc. (see instructions)					12	49,367
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	100.00%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	92.71%
16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ X		
b 33 1/3% support test—2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶		
b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests—2011. 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—2010. 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 ▶

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2011Open to Public
Inspection

Name of the organization

OLD LOUISVILLE INFORMATION CENTER

Employer identification number

31-1106357**Form 990-EZ, Part I, Line 16 - Other Expenses**

Description	Amount
HOLIDAY HOUSE TOUR	
	\$ 15
POSTCARDS	\$ 2,194
REFRESHMENTS	\$ 736
BANK FEES	\$ 572
EVENT	\$ 50
VEHICLE RENTAL	\$ 150
MISCELLANEOUS	\$ 86
	\$ 1,711
	\$ 148
OLD LOUISVILLE INFO CTR	
COMPUTER	\$ 47
REFRESHMENTS	\$ 63
SUPPLIES	\$ 522
LICENSE	\$ 15
BANK FEES	\$ 183
COMPUTER SUPPORT	\$ 90
CONTRACT LABOR	\$ 500
PARK GROUNDS	\$ 68
DUES	\$ 17
OFFICE EQUIP MAINTENANCE	\$ 117
CENTRAL PARK MAINTENANCE	
REFRESHMENTS	\$ 972

Name of the organization OLD LOUISVILLE INFORMATION CENTER	Employer identification number 31-1106357
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SUPPLIES	\$	85
CONTRACT LABOR	\$	1,273
FACILITIES & EQUIPMENT	\$	2,637
EDUCATION		
BANK FEES	\$	4
FRIENDS OF CENTRAL PARK		
CONTRACT LABOR	\$	350
PARK GROUNDS	\$	10,356
Total	\$	22,961

Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
PRIOR YEAR ADJUSTMENT	\$ -527

Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beg. of Year	End of Year
Pledges Receivable	\$ 500	\$ 0
Total	\$ 500	\$ 0

Form 990-EZ, Part II, Line 26 - Other Liabilities

Description	Beg. of Year	End of Year
Accounts Payable and Accrued Expenses	\$ 361	\$ 0
CLEARING ACCOUNT	\$ 0	\$ 2,923
PAYROLL LIABILITIES	\$ 0	\$ 6,000
SALES TAX PAYABLE	\$ 0	\$ 567

Form 990-EZ, Part III - Primary Exempt Purpose

Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization

OLD LOUISVILLE INFORMATION CENTER

Employer identification number
31-1106357

THE OLD LOUISVILLE INFORMATION CENTER IS COMMITTED TO PROMOTING THE OLD
LOUISVILLE NIGHBORHOOD AND ITS UNIQUE ARCHITECTURAL AND HISTORICAL
CHARACTERISTICS BY SERVING AS A SOURCE OF INFORMATION, REFERENCE AND
PROJECT SUPPORT

Form 990-EZ, Part III, Line 31 - All Other Accomplishment

OTHER PROGRAMS INCLUDE THE FRIEND OF CENTRAL PARK 9(FOR THE BENEFIT OF THE
TENNIS COURTS) AND EDUCATIONAL FORUMS.

Federal Statements

Schedule A, Part II, Line 1(e)

<u>Description</u>	<u>Amount</u>
1300 ASSOCIATION	\$ 5,000
3RD ST N A	4,000
TOONERVILLE	250
ST JAMES CT	5,000
MAURICE BYRNE	200
SIGN - VARIOUS	1,000
ST CATHERINE	800
FOCP - TENNIS	
PARK MAINTENANCE	
OTHER	
EDUCATIONAL SPONSORSHIP	
Total	\$ <u>16,250</u>

Schedule A, Part II, Line 12

<u>Description</u>	<u>Amount</u>
BANK INTEREST	\$ 32,107
HOLIDAY HOUSE TOUR	426
OLD LOUISVILLE INFO CTR	9,794
CENTRAL PARK MAINTENANCE	882
EDUCATION	6,158
FRIENDS OF CENTRAL PARK	
Total	\$ <u>49,367</u>

Forms 990 / 990-EZ Return Summary

For calendar year 2011, or tax year beginning _____, and ending _____

31-1106357

OLD LOUISVILLE INFORMATION CENTER

Net Asset / Fund Balance at Beginning of Year		<u>57,193</u>
Revenue		
Contributions	<u>16,250</u>	
Program service revenue	<u>49,367</u>	
Investment income	_____	
Capital gain / loss	_____	
Special events:		
Gross revenue	_____	
Direct expenses	_____	
Net income	_____	
Other income	_____	
Total revenue	<u>65,617</u>	
Expenses		
Program services	_____	
Management and general	_____	
Fundraising	_____	
Total expenses	<u>34,028</u>	
Excess / (deficit)		<u>31,589</u>
Other changes		<u>-527</u>
Net Asset / Fund Balance at End of Year		<u><u>88,255</u></u>

Reconciliation of Revenue

Total revenue per financial statements	_____
Less:	
Unrealized gains	_____
Donated services	_____
Recoveries	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total revenue per return	<u>_____</u>

Reconciliation of Expenses

Total expenses per financial statements	_____
Less:	
Donated services	_____
Prior year adjustments	_____
Losses	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total expenses per return	<u>_____</u>

Balance Sheet

	Beginning	Ending	Differences
Assets	<u>57,554</u>	<u>97,745</u>	
Liabilities	<u>361</u>	<u>9,490</u>	
Net assets	<u>57,193</u>	<u>88,255</u>	<u>31,062</u>

Miscellaneous Information

Amended return
 Return / extended due date 11/15/12
 Failure to file penalty _____

**Request for Taxpayer
 Identification Number and Certification**

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

Name (as shown on your income tax return)

Business name, if different from above
Old Louisville Information Ctr. ~~LLC~~

Check appropriate box: Individual/Sole proprietor Corporation Partnership
 Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ Exempt payee
 Other (see instructions) ▶

Address (number, street, and apt. or suite no.)
1340 S. 4th St.

City, state, and ZIP code
Louisville KY 40208

Requester's name and address (optional)

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

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

Social security number

or

Employer identification number
31 1106 357

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).

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 4.

Sign Here Signature of U.S. person ▶ **J. L. Pusketto** Date ▶ **8/17/10**

General Instructions

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

Purpose of Form

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

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

- 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.

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

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

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

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

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

**2014 Central Park Clean Up Day
Budget Detail Estimate**

Paint:	\$210
Paintbrushes, scrapers:	\$75
Tools – shovels, brooms, hoes, rakes:	\$150
Mulch:	\$150
Fertilizer:	\$150
Grass Seed:	\$130
Straw Bales:	\$20
Equipment Rental – spreader:	\$15
Total:	\$900