

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

**Applicant/Program:** Friends of the Jefferson County Public Law Library / Fresh Start Expungement Program  
**Applicant Requested Amount:** \$20,000.00  
**Appropriation Request Amount:**

**Executive Summary of Request**  
Request \$20,000 for an expungement program to assist those with financial hardship standards set at 250% of the Federal Poverty Level. Program seeks to address those persons eligible for expungement but who may "fall through the cracks" of eligibility at Legal Aid, the only other program currently offering expungement representation for free. Funds will pay per case for = \$150 to attorney, \$40 certificate of eligibility, \$100 Court Filing Fee for Misdemeanors & \$500 Court Filing Fee for Felonies. \$20,000 = 40 Misdemeanors & 6 Felonies.

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

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

25 District #      \_\_\_\_\_ Primary Sponsor Signature      \$2,000 Amount      11/20/17 Date

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

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

**Applicant/Program:**

Friends of the Jefferson County Public Law Library / Fresh Start Expungement Program

**Additional Disclosure and Signatures**

**Additional Council Office Disclosure**

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

**Council Member Signature and Amount**

District 1 _____	\$ 2,000
District 2 _____	\$ _____
District 3 _____	\$ _____
District 4 _____	\$ _____
District 5 _____	\$ _____
District 6 _____	\$ 2,000
District 7 _____	\$ 2,000
District 8 _____	\$ _____
District 9 _____	\$ 2,000
District 10 _____	\$ _____
District 11 _____	\$ _____
District 12 _____	\$ _____
District 13 _____	\$ _____
District 14 _____	\$ _____
District 15 _____	\$ _____

**Applicant/Program:**

Friends of the Jefferson County Public Law Library / Fresh Start Expungement Program

**Additional Disclosure and Signatures**

**Additional Council Office Disclosure**

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

District 16 \_\_\_\_\_ \$ \_\_\_\_\_

District 17 \_\_\_\_\_ \$ \_\_\_\_\_

District 18 \_\_\_\_\_ \$ \_\_\_\_\_

District 19 \_\_\_\_\_ \$ \_\_\_\_\_

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

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

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

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

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

District 25 \_\_\_\_\_ \$ \_\_\_\_\_

District 26 \_\_\_\_\_ \$ 2,000

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

<b>Legal Name of Applicant Organization</b> Friends of the Jefferson County Public Law Library	
<b>Program Name and Request Amount</b> Fresh Start Expungement Program - \$20,000	
	<b>Yes/No/NA</b>
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	<input type="checkbox"/> Yes
Is the funding proposed by Council Member(s) less than or equal to the request amount?	<input type="checkbox"/> Yes
Is the proposed public purpose of the program viable and well-documented?	<input type="checkbox"/> Yes
Will all of the funding go to programs specific to Louisville/Jefferson County?	<input type="checkbox"/> Yes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	<input type="checkbox"/> N/A
Has prior Metro Funds committed/granted been disclosed?	<input type="checkbox"/> N/A
Is the application properly signed and dated by authorized signatory?	<input type="checkbox"/> Yes
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	<input type="checkbox"/> Yes
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	<input type="checkbox"/> N/A
Is the entity in good standing with: <ul style="list-style-type: none"> <li>▶ Kentucky Secretary of State?</li> <li>▶ Louisville Metro Revenue Commission?</li> <li>▶ Louisville Metro Government?</li> <li>▶ Internal Revenue Service?</li> <li>▶ Louisville Metro Human Relations Commission?</li> </ul>	<input type="checkbox"/> Yes
Is the current Fiscal Year Budget included?	<input type="checkbox"/> N/A
Is the entity's board member list (with term length/term limits) included?	<input type="checkbox"/> Yes
Is recommended funding less than 33% of total agency operating budget?	<input type="checkbox"/> N/A
Does the application budget reflect only the revenue and expenses of the project/program?	<input type="checkbox"/> Yes
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	<input type="checkbox"/> N/A
Is the most recent annual audit (if required by organization) included?	<input type="checkbox"/> N/A
Is a copy of Signed Lease (if rent costs are requested) included?	<input type="checkbox"/> N/A
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	<input type="checkbox"/> N/A
Are the Articles of Incorporation of the Agency included?	<input type="checkbox"/> Yes
Is the IRS Form W-9 included?	<input type="checkbox"/> Yes
Is the IRS Form 990 included?	<input type="checkbox"/> Yes
Are the evaluation forms (if program participants are given evaluation forms) included?	<input type="checkbox"/> N/A
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	<input type="checkbox"/> N/A
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	<input type="checkbox"/> N/A
Prepared by: <b>Brian Boles</b>	Date: Nov 21, 2017

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 -- APPLICANT INFORMATION			
Legal Name of Applicant Organization:		Friends of the Jefferson County Public Law Library	
<i>(as listed on: <a href="http://www.sos.ky.gov/business/records">http://www.sos.ky.gov/business/records</a>)</i>			
Main Office Street & Mailing Address: 514 W. Liberty Street, Suite 240, Louisville, KY 40202			
Website: www.jcpll.net			
Applicant Contact:	Todd Lewis	Title:	Vice President
Phone:	502-855-7599	Email:	todd.lewis@toddlewislaw.com
Financial Contact:	Melissa Reynolds	Title:	Director
Phone:	502-876-5353	Email:	mreynolds@louisvilleprosecutor.g
Organization's Representative who attended NDF Training: Todd Lewis			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	514 W. Liberty Street, Suite 240, Louisville, KY 40202		
Council District(s):	all	Zip Code(s):	all
SECTION 2 -- PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: Fresh Start Expungement Program			
Total Request: (\$)	20,000	Total Metro Award (this program) in previous year: (\$)	NA
Purpose of Request (check all that apply):			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget)			
<input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals			
<input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter Current year projected budget <input checked="" type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation (current & signed) Cost estimates from proposed vendor if request is for capital expense		Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 Evaluation forms if used in the proposed program Annual audit (if required by organization) Faith Based Organization Certification Form, if applicable	
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.			
Source:	NA	Amount: (\$)	
Source:	NA	Amount: (\$)	
Source:	NA	Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Has the applicant met the BBB Charity Review Standards? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

**SECTION 3 – AGENCY DETAILS**

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

The Friends of the Jefferson County Public Law Library is the fundraising and outreach arm of the Jefferson County Public Law Library. The Friends group consists of patrons of the library who believe in its mission of providing the community with a current collection of legal reference materials based upon the belief that access to knowledge and information is essential to the promotion of justice and respect for the law. The Friends group is a new organization which was formed in late 2016 and has worked this past year to promote the law library within the community by offering informational programs and services such as Law Day in the Park and Know Your Rights seminars. Its mission is to offer programs for the financial support of the law library and the benefit of the community as a whole.





## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 5 - PROGRAM/PROJECT NARRATIVE

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

The Friends of the Jefferson County Public Law Library is interested in providing a service to the community at large to help those who have a qualifying misdemeanor or felony obtain an expungement. Funds are being requested to provide these services by employing an attorney at a reduced fee to research and prepare the documents necessary in these cases and to cover the court filing fees applicable to the offense. The goal is to start January 1, 2018 and continue until the allotted funds are depleted. Through the application process eligibility will be determined with preference given to single parents. Applicants must also meet financial hardship standards which will be set at 250% of the Federal Poverty level. This program seeks to address those persons eligible for expungement but who may "fall through the cracks" of eligibility at Legal Aid, the only other program currently offering expungement representation for free.

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

The budget allows for \$3000 to be used for a complete computer terminal dedicated to the project which would include a desktop computer, printer and Court Net subscription. This would be used by the attorney to research applicant history as well as prepare and print court documents. Legal malpractice insurance would need to be obtained to address any liability on the part of the preparer. A professional service contract would be issued and the preparing attorney would be compensated for his/her time and experience at \$150 per case. Outreach will be made to recent U of L Brandeis Law School graduates, with preference that reflects community diversity and a commitment to community development of under-served persons. An additional \$40 per case is needed for the costs of obtaining a certificate of eligibility from the Administrative Office of the Courts. Court filing fees are set by statute and are \$100 per charge for eligible misdemeanors and eligible felonies are \$500 per charge. With \$20,000 in Neighborhood Development Funds this program could help with the expungement of forty misdemeanors, and 6 felonies. If petitions to proceed in forma pauperis are granted, numbers could go "as high as" 78 misdemeanors. At \$10,000 in funding, the program expects to provide services to about 1/2 this number of persons. Any additional funds allotted would of course increase the number of applicants that could be serviced.





**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

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

NA

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

- The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:
  - ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.

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

- Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):
  - ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
  - ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

A criminal record can affect a person's chances of acquiring an education, become a volunteer, obtaining housing or credit and can make it especially hard for those who are seeking employment. This is a problem in the community that can prevent citizens from bettering themselves and providing for their families. Providing expungement services to those who may not have an income that allows for that expense can help to put these citizens on an even playing field and increase their chances of success. An individual's success can lead to the betterment of family situations and ultimately the betterment of the community as a whole through a lower unemployment rate, decrease in need for public assistance and stable environments for children. Through this program, records will be kept on applicants and follow up information will be obtained to determine the success of the program.

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

The Friends of the Jefferson County Public Law Library work first and foremost with the county law library itself. The Jefferson County Public Law Library, located in the Old Jail Building, will be the hub of the program. Applicants will apply through the library and the attorney will meet with the applicants at that location. Staff will provide any needed support. The Legal Aid society also works alongside the Friends group to help provide Know Your Rights programming. Legal Aid has agreed to refer those who do not fit their income guidelines to the Friends program for assessment. The Friends will provide program contact information to each member of Metro Council, to share with their individual and organizational constituents who have identified this need.



**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

**SECTION 6 – PROGRAM/PROJECT BUDGET SUMMARY**

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

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (See Detailed List on Page 8)	\$3400-\$9100*		\$16000
G: Professional Service Contracts	\$6900-\$12600*		\$16000
H: Program Materials			
I: Community Events & Festivals (See Detailed List on Page 8)			
J: Machinery & Equipment	\$3000		\$3000
K: Capital Project			
L: Other Expenses (See Detailed List on Page 8)	\$1000		\$1000
<b>*TOTAL PROGRAM/PROJECT FUNDS</b>			
% of Program Budget	100 %	100 %	100%

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

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


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

\*\*Must equal or exceed total in column 2.



**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7 (circle one and use multiple sheets if necessary)	Column 1	Column 2	Column (1 + 2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
*A total of \$16000 is allotted for expungements. The amount of expungements possible will vary according to whether or not court filing fees are waived by in forma pauperis. If IFP is granted, more expungements will be filed and then the professional services fees will increase. Total number of expungements performed cannot be predicted.			
*Professional services = \$6900 for 46 expungement cases = \$12600 for 84 expungement cases			
*Client Assistance includes court filing fees and KSP assessment fees for each case			
<b>Total</b>			

Applicant's Initials 

**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
<p align="center"><i>Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution &amp; Other In Kind)</i></p>		

\* 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:

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:

Applicant's Initials 

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 7 – CERTIFICATIONS & ASSURANCES

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

#### Standard Assurances

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

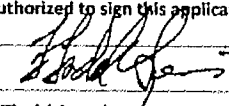
#### Standard Certifications

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

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

### SECTION 8 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:		Date:	11-20-17
Legal Signatory: (please print):	Todd Lewis	Title:	Vice President
Phone:	502-855-7599	Extension:	
	(c) 550-4139	Email:	todd.lewis@toddlewislaw.com



## FRIENDS OF THE JEFFERSON COUNTY PUBLIC LIBRARY, INC

### General Information

**Organization Number** 0964706  
**Name** FRIENDS OF THE JEFFERSON COUNTY PUBLIC LIBRARY, INC  
**Profit or Non-Profit** N - Non-profit  
**Company Type** KCO - Kentucky Corporation  
**Status** A - Active  
**Standing** G - Good  
**State** KY  
**File Date** 10/6/2016  
**Organization Date** 10/6/2016  
**Last Annual Report** 6/8/2017  
**Principal Office** 514 W LIBERTY STREET  
 SUITE 240  
 LOUISVILLE, KY 40202  
**Registered Agent** LINDA MILLER ROBBINS  
 514 W LIBERTY STREET  
 SUITE 240  
 LOUISVILLE, KY 40202

### Current Officers

**President** [Robert F Smith](#)  
**Vice President** [Todd Lewis](#)  
**Secretary** [Jonathan Hardy](#)  
**Treasurer** [Robert Heleringer](#)  
**Director** [Melissa Spencer Reynolds](#)  
**Director** [Josephine Layne Buckner](#)  
**Director** [Michelle James](#)

### Individuals / Entities listed at time of formation

**Director** [ROBERT FREDERICK SMITH](#)  
**Director** [JONATHAN C. HARDY](#)  
**Director** [JOHN OLASH](#)  
**Incorporator** [TODD LEWIS](#)  
**Incorporator** [JONATHAN C. HARDY](#)

### 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.

<a href="#">Annual Report</a>	6/8/2017	1 page	<a href="#">PDF</a>
<a href="#">Articles of Incorporation</a>	10/6/2016	7 pages	<a href="#">tiff</a> <a href="#">PDF</a>

### Assumed Names

**Activity History**

<b>Filing</b>	<b>File Date</b>	<b>Effective Date</b>	<b>Org. Referenced</b>
Annual report	6/8/2017 1:17:15 PM	6/8/2017 1:17:15 PM	
Add	10/6/2016 9:57:34 AM	10/6/2016	

**Microfilmed Images**



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

DEPARTMENT OF THE TREASURY

Date: FEB 06 2017

FRIENDS OF THE JEFFERSON COUNTY  
PUBLIC LAW LIBRARY INC  
514 W LIBERTY STE 240  
LOUISVILLE, KY 40202-0000

Employer Identification Number:

DLN:

26053432001077

Contact Person:

CUSTOMER SERVICE

ID# 31954

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Public Charity Status:

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

Form 990/990-EZ/990-N Required:

Yes

Effective Date of Exemption:

October 6, 2016

Contribution Deductibility:

Yes

Addendum Applies:

No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

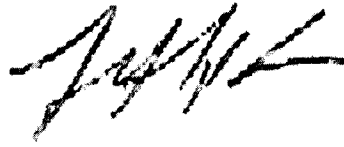
If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947

Sincerely,

A handwritten signature in black ink, appearing to read "Jeffrey I. Cooper". The signature is stylized with a large initial "J" and a long horizontal stroke at the end.

Jeffrey I. Cooper  
Director, Exempt Organizations  
Rulings and Agreements

# REPUBLIC BANK

It's just easier here.

RepublicBank.com Member FDIC

Account: XXXXXXXXXX  
 Statement Date: 10/31/17

Select Section to View ▼

Friends of the Jefferson County Public  
 Law Library Inc  
 514 W Liberty St Ste 240  
 Louisville KY 40202-2800

**YOUR ACCOUNTS AT A GLANCE**  
 Checking Balance

Your Account Managed By  
 \$ 5,710.85 CORPORATE CENTER BANKING CTR  
 (502) 584-3600  
 WENDE COSBY  
 Banking Center Manager

ACCOUNT STATEMENT

RUNNING SHORT ON TIME THIS HOLIDAY SEASON? MAYBE IT'S TIME TO GIVE  
 BUSINESS MOBILE DEPOSIT\* A TRY. SAVE TIME BY DEPOSITING CHECKS USING  
 YOUR SMARTPHONE. VISIT REPUBLICBANK.COM FOR REGISTRATION REQUIREMENTS.  
 \* MESSAGE AND DATA RATES MAY APPLY FROM YOUR WIRELESS CARRIER.

MONEYMGR FREE BUSINESS

Account #####5768

▲ Top

Beginning Balance on 10/01/17	4,924.79		
+ Deposits and other Credits (3)	786.06		
Interest Paid	0.00	Average Daily Balance	5,333.00
- Checks and other Debits (0)	0.00		
Service Charges	0.00		
Ending Balance on 10/31/17	5,710.85		

DEPOSITS & OTHER CREDITS

▲ Top

Date	Description	Amount
10/10	DEPOSIT	120.00
10/10	DEPOSIT	7.40
10/17	DEPOSIT	658.66

DAILY BALANCE SUMMARY

▲ Top

Date	Balance	Date	Balance
10/01	4,924.79	10/12	5,052.19
10/02	4,924.79	10/13	5,052.19
10/03	4,924.79	10/14	5,052.19
10/04	4,924.79	10/15	5,052.19
10/05	4,924.79	10/16	5,052.19
10/06	4,924.79	10/17	5,710.85
10/07	4,924.79	10/18	5,710.85
10/08	4,924.79	10/19	5,710.85
10/09	4,924.79	10/20	5,710.85
10/10	5,052.19	10/21	5,710.85
10/11	5,052.19	10/22	5,710.85
		10/23	5,710.85
		10/24	5,710.85
		10/25	5,710.85
		10/26	5,710.85
		10/27	5,710.85
		10/28	5,710.85
		10/29	5,710.85
		10/30	5,710.85
		10/31	5,710.85



**Exempt Organizations Select Check**

[Exempt Organizations Select Check Home](#)

990-N (*e-Postcard*) filer information

**Tax Period:**

2016 (01/01/2016 - 12/31/2016)

**Employer Identification Number (EIN):**

**Legal Name:**

FRIENDS OF THE JEFFERSON COUNTY PUBLIC LAW LIBRARY

**Mailing Address:**

514 West Liberty Street Suite 240  
Louisville, KY 40202  
United States

**Doing Business As:**

**Gross receipts not greater than:**  
\$50,000

**Organization has terminated:**

No

**Principal Officer's Name and Address:**

Robert Frederick Smith  
222 South 1st Street Suite 305  
Louisville, KY 40202  
United States

**Website URL:**

**Related 990-N (*ePostcard*) Filings:**

If the organization has filed additional Forms 990-N (*e-Postcards*), link(s) to additional *e-Postcard* filings are displayed below. Click on the link(s) to see the information included in those filing(s).

No related filings available for this EIN.

[Return to Search Results](#) [Return to Search Page](#)



## Confirmation

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

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

- **Organization Name:** FRIENDS OF THE JEFFERSON COUNTY PUBLIC LAW LIBRARY
- **EIN:** [REDACTED]
- **Tax Year:** 2016
- **Tax Year Start Date:** 01-01-2016
- **Tax Year End Date:** 12-31-2016
- **Submission ID:** 10065520171631267460
- **Filing Status Date:** 06-12-2017
- **Filing Status:** Accepted

**MANAGE FORM 990-N SUBMISSIONS**

# ARTICLES OF INCORPORATION

OF

## FRIENDS OF THE JEFFERSON COUNTY PUBLIC LAW LIBRARY, INC

**WE, THE UNDERSIGNED**, having associated for the purposes of forming a non-profit, non-stock corporation, under and pursuant to the laws of the Commonwealth of Kentucky, and more particularly Chapter 273, Kentucky Revised Statutes (KRS), hereby certify as follows:

### ARTICLE I

The name of the Corporation is:

FRIENDS OF THE JEFFERSON COUNTY PUBLIC LAW LIBRARY, INC

### ARTICLE II

The duration of the Corporation is perpetual.

### ARTICLE III

The address of the registered office of the corporation is:

514 W Liberty Street  
Suite 240  
Louisville, KY 40202

The name of the initial registered agent for service of process, located at such address is:

Linda Miller Robbins

The principal office of the Corporation is located at 514 W Liberty Street, Suite 240, Louisville, KY 40202

Other places of business in said city or elsewhere may be designated by resolution of the Board of Directors.

#### **ARTICLE IV**

The Corporation is organized and will be operated exclusively for charitable and educational purposes as described within Section 501(c)(3) of the Internal Revenue Code (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 is more specifically to raise funds to support the Jefferson County Public Law Library.

#### **ARTICLE V**

The Corporation is irrevocably dedicated to and operated exclusively for, non-profit purposes. No part of the net earnings of the Corporation will inure to the benefit of or be distributable to its members, directors, officers, or other private persons, except that the Corporation is 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**

In carrying out the corporate purposes described in Article IV, the Corporation will have all the powers granted by the laws of the State of Kentucky, including in particular those listed in KRS 273.171 (or corresponding provision of any later State statute), except as follows and as otherwise stated in these Articles:

a) No substantial part of the activities of the Corporation will be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation will 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 will not carry on any other activities not permitted to be carried on:

1) by a corporation exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code, or the corresponding provisions of any subsequent Federal tax laws.

2) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws.

c) If and so long as the Corporation is a private foundation as defined in Section 509(a) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws:

1) The Corporation will 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, or corresponding provisions of any later Federal tax laws.

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

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

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

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

#### **ARTICLE VII**

The names and addresses of the incorporators are:

<b><u>INCORPORATOR</u></b>	<b><u>ADDRESS</u></b>
Todd Lewis	600 W. Main Street Ste. 500 Louisville KY 40202
Jonathan C. Hardy	8310 Westport Road Louisville, KY 40242

#### **ARTICLE VIII**

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



<u>Director</u>	<u>Address</u>
Robert Frederick Smith	222 S. 1st Street, Ste 305 Louisville, KY 40202
Jonathan C. Hardy	8310 Westport Road Louisville, KY 40242
John Olash	150 S. Third Street Louisville, KY 40202

### ARTICLE IX

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

Any director may be removed by a majority vote of the Board of Directors.

### ARTICLE X

a) A director, officer, employee or member of the Corporation will not be personally liable for the acts or debts of the Corporation except insofar as the member may become personally liable by reason of his or her own acts or conduct pursuant to KRS 273.187 (or corresponding provision of any later Kentucky statute).

b) Any person serving on the Board of Directors of this Corporation will not be held personally liable for monetary damages resulting from the breach of his/her duties as a director unless such act, omission or breach:

1) concerned or concerns a transaction in which the director's personal financial interest was or is in conflict with the financial interests of the Corporation;

2) was not in good faith or involved or involves intentional misconduct on the part of the director;

3) was known by the director to be a violation of law; or

4) resulted in an improper personal benefit to the director.

### ARTICLE XI

The Corporation may indemnify any director or officer or former director or officer of the Corporation against any expenses actually and reasonably incurred by him or her in connection with the defense of any action, suit or proceeding, civil or criminal, in which he or she is made a party by reason of being or having been such director or officer, except in relation to matters as to which they will be adjudged in such action, suit or proceeding to be liable for negligence or misconduct in the performance of duty to the Corporation. The Corporation may make any other indemnification permitted by law and authorized by its Articles of Incorporation, or its By-laws or a resolution adopted after notice to members entitled to vote.

**ARTICLE XII**

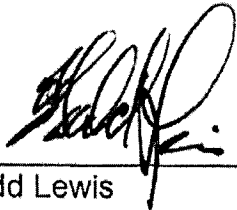
In the event of dissolution of the Corporation, the Board of Directors will, after paying or making provision for the payment of all liabilities of the Corporation, dispose of all assets of the Corporation exclusively for the purposes of the Corporation, in such manner, or to such organizations organized and operated exclusively for charitable or educational purposes qualified as exempt organization under Section 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), or to the Federal government or to a State or local government for a public purpose as the Board of Directors will determine.

The remaining assets, if any, will 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 determines are organized and operated exclusively for such purposes.

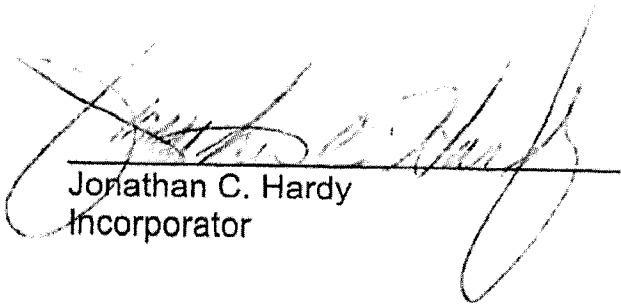
**ARTICLE XIII**

Amendments to these Articles will be made pursuant to the provisions of KRS 273.263 (or corresponding provision of any later State statute).

**IN TESTIMONY WHEREOF**, witness the signature(s) of the Incorporator(s) of this Corporation, this 12<sup>th</sup> day of September, 2016



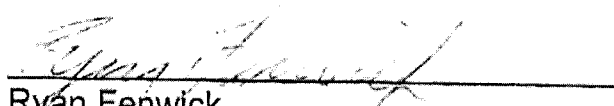
\_\_\_\_\_  
Todd Lewis  
Incorporator



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Jonathan C. Hardy  
Incorporator

**This Document Prepared By:**



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Ryan Fenwick  
Law Office of Ryan Fenwick  
1217 Logan Street  
Louisville, KY 40204

## CONSENT OF REGISTERED AGENT

The undersigned, having been named in the Articles of Incorporation of **Friends of the Jefferson County Public Law Library, INC.** (Corporation) as the registered agent of the Corporation, hereby consents to serve in that capacity.

A handwritten signature in cursive script, reading "Linda Miller Robbins". The signature is written in black ink and is positioned above a horizontal line.

Linda Miller Robbins  
Registered Agent



DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
CINCINNATI OH 45999-0023

Date of this notice: 09-30-2016

Employer Identification Number:  
[REDACTED]

Form: SS-4

Number of this notice: CP 575 A

FRIENDS OF THE JEFFERSON COUNTY  
PUBLIC LAW LIBRARY  
% ROBERT FREDERICK SMITH  
514 W LIBERTY ST  
LOUISVILLE, KY 40202

For assistance you may call us at:  
1-800-829-4933

IF YOU WRITE, ATTACH THE  
STUB AT THE END OF THIS NOTICE.

**WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER**

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN [REDACTED]. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1120

04/15/2017

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

**IMPORTANT INFORMATION FOR S CORPORATION ELECTION:**

If you intend to elect to file your return as a small business corporation, an election to file a Form 1120-S must be made within certain timeframes and the corporation must meet certain tests. All of this information is included in the instructions for Form 2553, *Election by a Small Business Corporation*.

If you are required to deposit for employment taxes (Forms 941, 943, 940, 944, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), you will receive a Welcome Package shortly, which includes instructions for making your deposits electronically through the Electronic Federal Tax Payment System (EFTPS). A Personal Identification Number (PIN) for EFTPS will also be sent to you under separate cover. Please activate the PIN once you receive it, even if you have requested the services of a tax professional or representative. For more information about EFTPS, refer to Publication 966, *Electronic Choices to Pay All Your Federal Taxes*. If you need to make a deposit immediately, you will need to make arrangements with your Financial Institution to complete a wire transfer.

The IRS is committed to helping all taxpayers comply with their tax filing obligations. If you need help completing your returns or meeting your tax obligations, Authorized e-file Providers, such as Reporting Agents (payroll service providers) are available to assist you. Visit the IRS Web site at [www.irs.gov](http://www.irs.gov) for a list of companies that offer IRS e-file for business products and services. The list provides addresses, telephone numbers, and links to their Web sites.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at [www.irs.gov](http://www.irs.gov). If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

**IMPORTANT REMINDERS:**

- \* Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- \* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- \* Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is FRIE. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.



## Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Friends of the Jefferson County Public Law Library</b>	
	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: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
	5 Address (number, street, and apt. or suite no.) <b>514 West Liberty Street, Suite 240</b>	
	6 City, state, and ZIP code <b>Louisville, Kentucky 40202</b>	
	7 List account number(s) here (optional)	

### Part I Taxpayer Identification Number (TIN)

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

Social security number																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>											<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>										

**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.

or

Employer identification number	

### Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 ▶ *[Handwritten Signature]*

Date ▶ *11-21-17*

### General Instructions

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

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

#### Purpose of Form

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

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)

- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.*

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. 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.