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

Applicant/Program: Auburndale Neighborhood Association / ANA Picnic & Holiday Community Party

Executive Summary of Request:

The Auburndale Neighborhood Association (ANA) has requested a total of \$1,500 to fund two community events and one beatification project.

\$450 - ANA's Annual Summer Community Picnic at Kenwood Elementary School for food, supplies, entertainment.

\$450 - ANA's Annual Holiday Party at Kenwood Elementary School for food, supplies, entertainment. \$300 - ANA Berm Maintenance at entrance of Neighborhood, tree planting, mulch, etc.

\$300 - Liability insurance for Holiday Party also required for holding Neighborhood Association meetings at Kenwood Elementary.

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. <u>Have also completed</u> the disclosure section below, if required.

25 District # Council Member Signature

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.

N/A, but Ray Crider, Treasurer of Auburndale Neighborhood Association is the Father of CW Madonna Flood's Legislative Assistant, Andrea Derouen.

Approved by:	
Appropriations Committee Chairman	Date
Clerk's Office Only:	
Request Amount:	Committee Amended Appropriation:
Original Appropriation:	Council Amended Appropriation:

1|Page Effective February 2014

Applicant/Program: Auburndale Neighborhood Association / ANA Picnic & Holiday Community Party

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.

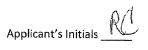
13 District #	Virki Aubrey Welch Council Member Signature	$\frac{\# 500^{50}}{\text{Amount}}$	2/11/16 Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date

NDF NON-PROFIT APPLICATION CHECKLIST	
Legal Name of Applicant Organization: Auburndale Neighborhood Association	naam ta'a da faran na katala da katala na
Program Name: ANA Picnic& Holiday Community Party Request Amount: \$1,500.00	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?	Yes
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?	NA
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?	NA
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?	NA
 Good Standing: Is the entity in good standing with: 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?	NA
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)	NA
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?	NA
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?	NA
Annual Audit: Is the most recent annual audit (if required by organization) included?	NA
Rent Requests: Is a copy of signed lease included?	NA
Articles of Incorporation: Are the Articles of Incorporation of the organization included?	Yes
RS Form W-9: Is the IRS Form W-9 included?	Yes
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?	NA
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement ncluded (if required by the organization)?	NA
Prepared by: Brian Boles Date: 2/3/16	



		SI	ECTION 1 - APPL	ICANT INFORMATI	ON	
Legal Name of Appli	icant Orgar	nization:				
(as listed on: <u>http://www</u>	.sos.ky.gov/b	usiness/re	Cords)	NDALE NEIG	HBORHOOD AS	SOCIATION
Main Office Street 8	& Mailing A	ddress:	1120 FRANELN	I ROAD, LOUISVIL	LE, KY 40214	
Website:						
Applicant Contact:	RAY C	RIDER		Title:	TREASURER	
Phone:	502-36	8-1196		Email:	RAYCRIDER2@	@GMAIL.COM
Financial Contact:	RAY C	RIDER		Title:	TREASURER	
Phone:	502-36	8-1196		Email:	RAYCRIDER2	@GMAIL.COM
Organization's Repr	esentative	who att	ended NDF Trair	ning: KEN MCFAR	LAND	
GEO	GRAPHICA	L AREA(S) WHERE PROG	RAM ACTIVITIES A	RE (WILL BE) PROVIDED)
Program Facility Loc	ation(s):	KENW	OOD ELEMEN	TARY SCHOOL		
Council District(s):		25		Zip Code(s):	40214	
	SECTI	ON 2 – F	ROGRAM REQU	EST & FINANCIAL II	NFORMATION	
PROGRAM/PROJECT	NAME: AN	IA PICN	IC & HOLIDAY	COMMUNITY PAR	RTY	
Total Request: (\$)	\$1500.0	00	Total Metro A	ward (this program	n) in previous year: (\$)	\$650.00
Purpose of Request	(check all ti	hat appl	y):			
				6 of agency's total c		
Programmi	ng/services	s/events	for direct benef	it to community or	qualified individuals	
Capital Pro	ject of the	organiza	tion (equipment	, furnishing, buildin	g, etc)	
The Following are Re	quired Att	achmen	ts:	P		
IRS Exempt Status D		n Letter		Signed lease if re	ent costs are being reques	ted
Current Year Project	-			IRS Form W9		
List of Board of Dire		e term &	term limits	Evaluation form	s if used in the proposed p	rogram
 Current financial sta Most recent IRS For 		20.11			required by organization)	
Articles of Incorpora		20-H			anization Certification Forr	n, if required
Cost estimates from		endor if r	equest is for	Staff including t	he 3 highest paid staff	
capital expense						
For the current fiscal	year endin	ig June 3	10, list all funds a	ppropriated and/or	r received from Louisvill	le 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.	. or metro t	sourier /		cignbornood Dever	opinient i unus). Attach	additional
Source:	Holiday F	Party N	DF Grant	Amount: (\$)	\$650	
Source:				Amount: (\$)		
Source:				Amount: (\$)		
Has the applicant contacted the BBB Charity Review for participation?						
Has the applicant met	the BBB C	harity Re	eview Standards	? 🗌 Yes 🔳 No		

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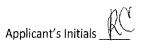


SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

Please see the attached ANA Vision Statement.

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VISIONING STATEMENT

Auburndale Neighborhood Association

We are a safe neighborhood with a strong sense of community and connectivity.

Those elements that make Aubumdale neighborhood special for us and reflect our values are seen in our commitments. We are committed to:

- 1. Safety and public health within the Auburndale community
- 2. Education and activities for children and adults.
- 3. Vibrant business growth, consistent with our area standards
- 4. Communication and involvement the neighborhood.
- 5. Respectful use and care for the environment including the city, river, parks and trails
- 6. Well thought out neighborhood planning which sustains the value of the land
- 7. Systemic and fiscally responsible long-term planning, working with the neighborhood, community, city, county, and state partners.

1. Safety and public health within the Auburndale community

- Support police and fire services; encourage use of neighborhood programs such as Block Watch and Arson Prevention.
- Sufficient lighting, parking and traffic control in our commercial areas.
- To support and protect the students of Kenwood Elementary and other neighboring schools.
- Encourage planning for sidewalks and bike paths along major streets
- Improved accessibility to and from the residential areas.
- Streets are repayed as required. The City informs the community of paying schedules on a yearly basis.
- An aggressively maintained drainage system for Bruce Ditch and adjoining residential areas.
- A mosquito control program.

2. Education and activities for children and adults

- Continuing the ANA "Holiday Party"
- To explore and develop a neighborhood based summertime event.
- In cooperation with JCPS board members and school administrators, promote volunteerism and involvement in public school activities such as Everyone Reads.
- To explore development of a neighborhood "pocket park".
- To study the need for a community center to be shared with adjoining neighborhoods.

3. Vibrant business growth, consistent with our area standards

- Be vigilant and maintain strict standards and codes regarding the types of businesses and structures in our commercial areas.
- To aggressively pursue commercial activities that positively impact to our neighborhood.
- Use planters, and landscaping to beautify our neighborhood streets.

4. Communication and involvement with the neighborhood.

- That we have an active Neighborhood Association that listens to all input, actively engages those impacted by decisions, employs behaviors that treat all with respect, and works collaboratively with City, State and Federal leaders to plan effectively.
 - To maintain up-to-date neighborhood resources and information on the Web.

5. Respectful use and care for the environment including the city, river, parks and trails

- Support Metro Government's Brightside program through use environmentally friendly solutions and support recycling in all things.
- Advocate regular maintenance of Iroquois and surrounding our parks; connecting trails and to assure that area parks are an
 integral part of the systemic planning for Metro Parks and Recreation.
- To try to save and actively plant trees and local flora throughout our neighborhood.

6. Well thought out neighborhood planning which sustains the value of the land

- Our freeway (Snyder and Watterson) neighborhood and business access is effective, efficient and safe for pedestrians and bicyclists.
- That Auburndale be served by an effective neighborhood public transportation that focuses on connectivity to centers of employment and commerce.
- Development needs to be consistent with the value of the area.
- Those developers take ownership for impact to the infrastructure such as streets, sidewalks, schools, water, sewer, etc.
- To foster and encourage development that sustains a park-like environment with homes with livable lot sizes that add value and beauty to the neighborhood.
- Sponsor a farmers market

7. Systemic and fiscally responsible long-term planning, working with the neighborhood, community, city, county, and state partners.

- To view planning as multiple "phases" that will eventually reach our goals within neighborhood and legal boundaries.
- To partner with Metro Government and it's planners for effective planning for Aubumdale.
- That we work to influence improvement to the regulations, laws and initiatives that impact our neighborhood.



SECTION 4 - PROGRAM/PROJECT NARRATIVE

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

1. ANA Annual Community Picnic will be held in June at Kenwood Elementary School. This event will feature both purchased food and pot luck, musical entertainment for adults and children, and displays by LMPD and LMFD.

This events purpose is to afford our ethnic diverse community an opportunity to meet and socialize. This event is very well publicized and attended. Mayor Fisher has attended several times.

2. The ANA Community Holiday Party at Kenwood School will be held in December. Food and musical entertainment will be provided. Santa Claus will visit the children. Again, this events purpose is to afford our ethnic diverse community an opportunity to meet and socialize.

Both of these community events encourage community involvement, elected officials attend and have a chance to meet and talk with their constituents.

3. Liability Insurance needed to hold the Community Events and Neighborhood Association Meetings

4. Neighborhood Berm Maintenance needed for Neighborhood entrance. Tree Planting, Mulch, etc.

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

June Community Picnic; food. condiments, ice, entertainment - \$450.00

December Community Holiday Party; food. condiments, ice, entertainment - \$450.00

Liability Insurance (for Community Picnic, Party & Neighborhood Meetings) - \$300.00

Neighborhood Berm Maintenance - \$300.00

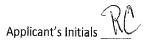
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C: If this request is a fundraiser, please detail how the proceeds will be spent:
N/A
 D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances: Effective October 24, 2013, reimbursements should not be made unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.
 The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement: If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application. The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.
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E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served:

The Computer Program "Next Door" has generated more community participation by providing a communication device for the community and increased Public Safety Awareness.

The Holiday Party encourages community involvement in Neighborhood Watch Programs and other Civic Activities.

This event's purpose is to afford our ethnic diverse community an opportunity to meet and socialize.

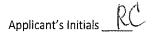
Participation has increased throughout the years.

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.

LG&E assists with some printing.

We have partnership with Kenwood Elementary School in which the ANA supports various school activities in exchange for monthly space.

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SECTION 5 – PROGRAM/PROJECT BUDGET SUMMARY

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

Program/Project Expenses	Column 1 Proposed Metro Funds	Column Z Non- Metro Funds	Column (1+2)=3 Total Funds
A: Personnel Costs Including Benefits	0	300	300
B: Rent/Utilities	0	720	720
C: Office Supplies	0	200	200
D: Telephone	0	0	0
E: In-town Travel	0	0	0
F: Client Assistance (Attach Detailed List)	0	0	0
G: Professional Service Contracts	300	0	300
H: Program Materials	0	0	0
I: Community Events & Festivals (Attach Detail List)	900	0	900
J: Machinery & Equipment	0	0	0
K: Capital Project	300	300 0	
L: Other Expenses (Attach Detail List)	0	0 0	
*TOTAL PROGRAM/PROJECT FUNDS	1500	1220	2720
's of Program Budget	55 %	45 %	100%

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

United Way	\$0	
Private Contributions (do not include individual donor names) Fees Collected from Program Participants	\$1220.00 \$0	
Other (please specify)	\$0	
"otel Revenue for Columns 7 Excenses **	\$1220.00	

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

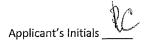
**Must equal or exceed total in column 2.

Applicant's Initials ______



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			
	KENWOOD MEETING SPACE	\$720.00	ACTUAL COST			
	EVENT VOLUNTEERS	\$300.00	30 HRS X \$10			
	FOOD DONATIONS	\$200.00	\$100 PIZZA, \$100 POT LUCK			
	Total Value of In-Kind (to match Program Budget Line Item. 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						
A	gency Fiscal Year Start Date: January 1	st				
	oes your Agency anticipate a significant increase udget projected for next fiscal year? NO 🏢	e or decrease in your budget YES 🛄	from the current fiscal year to the			
lf	YES, please explain:					



	А	В	С	D	E	F	G	Н		
1	ANA PROPOSED) BUDGET 2	016		· · · · · · · · · · · · · · · · · · ·					
2	SUMMER PICNIC	C & HOLIDA	Y PARTY			Te				
3								na da muni i ndumi premo de 1997 e la sinual destr destructura		
4	1/1/2016 THRU 12/31/2016									
5										
6			·		ACTUAL	BUDGET	DIFFERENCE			
7										
8	N	INCOME								
9	······	GOVERNM	ENT GRANT		\$0.00	\$1,500.00	\$1,500.00			
10		MEMBER D	ONATION		\$0.00	\$400.00	\$400.00			
11		TOTAL INC	OME		\$0.00	\$1,900.00	\$1,900.00			
12			11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1							
13		EXPENSES			· · · · · · · · · · · · · · · · · · ·					
14	11	GOVERNM	ENT		\$15.00	\$50.00	\$35.00			
15		SUMMER P	ICNIC		\$0.00	\$450.00	\$600.00			
16		LIBILITY INS	SURANCE		\$0.00	\$350.00	\$350.00			
17		SUPPLIES			\$23.15	\$300.00	\$300.00			
18		HOLIDAY P	ARTY		\$0.00	\$450.00	\$600.00			
19		NEIGHBOR	HOOD BERM	<u>s</u>	\$0.00	\$300.00	\$300.00			
20		OTHER			\$0.00	\$25.00	\$25.00			
21	· · · · · · · · · · · · · · · · · · ·									
22		TOTAL EXP	ENSES		\$38.15	\$1,925.00	\$2,210.00			
23	1.000 C									
24		OVERALL T	OTAL		(\$38.15)	(\$25)	(\$10)			
25										
	Projected cost ar	17.1.2.10 feet made Vicenself describing assessments on a Vicense processing			NUMBER OF STREET, STRE			To 1 while a looke beauty at an useful state and		
	listed here. Any	cost over th	e amount ap	propiate	d for the ov	erall year will	be ANA's respo	nsipility.		
28	*****									



SECTION 6 – CERTIFICATIONS & ASSURANCES

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

Standard Assurances

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

Standard Certifications

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

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

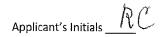
Please See Altached

SECTION 7 - CERTIFICATIONS & ASSURANCES

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

Signatur	e of Legal Signatory:	RayC	uler		Date:	1/26/2016
Legal Sig	natory: (please print):	RAY CRIDER			Title:	TREASURER
Phone:	502-368-1196	Extension:		Email:	RAYCRID	ER2@GMAIL.COM

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Boles, Brian

From: Sent: To: Subject: Ray Crider <raycrider2@gmail.cdm> Wednesday, February 03, 2016 8:26 AM Boles, Brian RE: ANA NDF

My daughter, Andrea Crider Derouen, is MC Madonna Flood's Administrative Assistant.

Ray Crider, Treasurer ANA

From: Boles, Brian [mailto:Brian.Boles@louisvilleky.gov] Sent: Tuesday, February 02, 2016 10:45 PM To: Ray Crider (<u>Raycrider2@gmail.com</u>) <<u>Raycrider2@gmail.com</u>> Subject: RE: ANA NDF

Ray,

Please send me a statement via email describing yours or any relationships that any ANA board members have with any Councilpersons, staff or Metro Government employee.

Thank you,

Brian Boles

Legislative Assistant Councilman David Yates District 25 601 West Jefferson St, 3rd floor Louisville, KY 40202 Email: <u>brian.boles@louisvilleky.gov</u> Office: (502) 574-1125

From: Boles, Brian Sent: Tuesday, February 02, 2016 4:49 PM To: Boles, Brian Subject: ANA NDF

ANA NDF

Thank you,



Brian Boles Legislative Assistant President David Yates Do not use the browser's back, forward, refresh, home, or stop buttons to navigate through this program. Always use the buttons provided on the forms to proceed through the annual report process.

0744470 - AUBURNDALE NEIGHBORHOOD ASSOCIATION, INC.

Your annual report has been filed successfully.

<u>Click here</u> to view the filing created for this annual report.

You can print this page to use as your verification that the annual report has been filed, and as a receipt for your payment.

Company ID:	0744470.09.99999
Annual Report Date:	1/4/2016
Principal Office:	1120 FRANELM RD LOUISVILLE, KY 40214
Registered Agent:	RAY CRIDER 1120 FRANELM RD LOUISVILLE, KY 40214
EPay Transaction ID:	16862075
Credit Card Authorization Number:	093735
SOS Accounting ID:	3979654.5367568
Filing Fee:	\$15.00
Signature:	Ray Crider
Title:	Treasurer

Current Officers

OfficeName and AddressPresidentKEN WILLIAMS, 1018 Franelm Rd., Louisville, Ky 40214SecretaryBOB DAWSON, 7305 Ticonderoga, louisville, KY, 40214TreasurerRAY CRIDER, 1120 Franelm Rd., Louisville, Ky 40214Vice PresidentKENNY MCFARLAND, 7520 Merlyn Cir, Louisville, Ky 40214

Directors

Name and Address

PATSY BLACK, 1011 Cristland Rd, Louisville, Ky 40214 JOYCE WHALIN, 1050 Runnel, Louisville, Ky 40214 KAREN BOSTON, 1048 Franelm Rd. Louisville, Ky 40214

View entity

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

Date: JUL 2 1 2015

AUBURNDALE NEIGHBORHOOD ASSOCIATION INC C/O RAY CRIDER 1120 FRANELM RD LOUISVILLE, KY 40214 DEPARTMENT OF THE TREASURY

Employer Identification Number: DLN: 17053168338025 Contact Person: NICHOLAS R HINDS ID# 31662 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Form 990 Required: Yes Effective Date of Exemption: September 24, 2009 Contribution Deductibility: NO Addendum Applies: NO

Dear Applicant:

We are pleased to inform you that upon review of your application for taxexempt status we have determined that you are exempt from Federal income tax under section 501(c)(4) of the Internal Revenue Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-NC" in the search bar to view Publication 4221-NC, Compliance Guide for Tax-Exempt Organizations (Other than 501(c)(3) Public Charities and Private Foundations), which describes your recordkeeping, reporting, and disclosure requirements.

sincerely,

Jeffrey I. Cooper Director, Exempt Organizations Rulings and Agreements

Letter 948

AUBURNDALE NEIGHBORHOOD ASSOCIATION OFFICERS 2015-2016

PRESIDENT	KEN WILLIAMS		Franelm Rd	DEC. 2016	2 YEAR
VICE-PRESIDENT	KEN MACFARLAND	an a	Merlyn Circle	DEC. 2015	2 YEAR
SECRETARY	BOB DAWSON		et Ticonderoga	DEC. 2016	2 YEAR
TREASURER	RAY CRIDER		Franelm Rd	DEC. 2015	2 YEAR
SGT-AT-ARMS	JOYCE WHALEN		Runell Rd.	DEC. 2016	2 YEAR
AT-LARGE-	JANET PEARSON	n an	Franelm Rd	DEC. 2016	2 YEAR
MEMBERS		and a second			-
	CAROLYN NOWLIN		Cristland Rd	DEC. 2015	2 YEAR
	ELLA WILLIAMS		Franelm Rd.	DEC. 2016	2 YEAR
PRESIDENT	RAY WHITERNER		Sunnybrook		
EMERITUS					

No TERM LIMITS



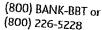
759-09-01-00 55109 0 C 001 30 AUBURNDALE NEIGHBORHOOD ASSOCIATION 50 003 1120 FRANELM RD LOUISVILLE KY 40214-4152

Your account statement

⁵or 11/30/2015

Contact us





BBS

Accept Apple Pay and Chip Cards With \$200 Off a New Terminal!

rotecting your customers and your business has never been more important. BB&T Merchant Services is one of the first to offer rminals that accept both EMV-secured chip cards and contactless payments. Provide your customers with the latest in processing

- From now through December 31, 2015, \$200⁺ off chip card terminal
- Accept Apple Pay and any mobile wallet that supports NFC contactless payments
- Next-business-day funding to your BB&T business checking account

Live 24/7 technical support, extensive fraud monitoring and robust payment processing analytics ∠T, Member FDIC © 2015, Branch Banking and Trust Company. All rights reserved.

rvices are subject to business type and credit approval.

st applicable to the wireless or Bluetooth 00ι

ount summary	
previous balance as of 10/30/2015 \$842.14 :ks -0.00 er withdrawals, debits and service charges -171.03 >sits, credits and interest +0.00 new balance as of 11/30/2015 = \$671.11 If Withdrawals, debits and service charges	•
BB&T CHECK CARD BURCHASE PROVIDENT	
BB&T CHECK CARD PURCHASE-PIN 11-23-15 SAM'S CLUB 2838 8276 WAL-SAMS LOUISVILLE KY other withdrawals debits and the second	AMOUNT(S)
other withdrawals, debits and service charges	49.14
	121.89

= \$171.03

Organization: AUBURNDALE NEIGHBORHOOD ASSOCIATION EIN: Submission Type: Form 990-N Year: 2015 Submission ID: 7800582016009de53064 e-File Postmark: 1/9/2016 11:59:08 AM Accepted Date: 1/9/2016

The IRS has accepted the e-Postcard described above. Please save this receipt for your records.

Thank you for filing.

e-Postcard technical support Phone: 866-255-0654 (toll free) email:ePostcard@<u>urban.org</u>

AUBURNDALE NEIGHBORHOOD ASSOCIATION 1120 Franelm Rd Louisville, KY 40214

0744470.09

dcornish ADD

Articles of Incorporation

of

Auburndale Neighborhood Association, Inc.

Trey Grayson, Secretary of State Received and Filed: 9/24/2009 3:34 PM Fee Receipt: \$8.00

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 shall be:

Auburndale Neighborhood Association, Inc.

Article II

The duration of the corporation shall be perpetual.

Article III

The address of the registered and principal office of the corporation is:

7536 Merlyn Circle Louisville, KY 40214

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

Kathy Recktenwald 7536 Merlyn Circle Louisville, KY 40214

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 shall be operated exclusively for the promotion of social welfare as described within Section 501(c)(4) 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)(4).

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

1) Enhance the health, safety and welfare of the community;

2) Provide a forum wherein neighborhood issues and concerns may be publicly expressed and discussed;

3) Improve the economic life of the Auburndale area;

4) Encourage a spirit of friendliness and cooperation with other groups in the Auburndale neighborhood and throughout the Louisville/Jefferson County Metro area;

5) Foster cooperation and unity between property owners, business people, tenants, and others;

6) Meet the educational and cultural needs of the community;

7) Encourage improvements in municipal services through public involvement and cooperation with local government;

8) Encourage, plan, and coordinate the beautification, preservation, rehabilitation, and revitalization of all residential and public properties, structures and physical environment

Page 1 of 3

9) Seek the assistance and cooperation from government agencies and other neighborhood associations to resolve common neighborhood problems, achieve common neighborhood objectives and goals, and to maintain and improve the quality of life for residents of all neighborhoods;

10) Support other charitable, educational and cultural activities which advance the general well being of the community and its people.

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

In carrying out the corporate purposes described in Article IV, the corporation shall 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) Notwithstanding any other provision of these Articles, the corporation shall 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)(4) of the Internal Revenue Code, or the corresponding provisions of any subsequent Federal tax laws.

Article VII

The name and address of the Incorporator is:

Incorporator

Kathy Recktenwald

Address

7536 Merlyn Circle Louisville, Kentucky 40214

Article VIII

The initial board of directors shall consist of four directors. The names and addresses of the members of the initial Board of Directors are:

Director Ray Whitener 5403 Sunnybrook Drive Louisville, Kentucky 40214 7520 Merlyn Circle Ken McFarland Louisville, Kentucky 40214 Ray Crider 1120 Franelm Road Louisville, Kentucky 40214 Stephen Cotton 5454 Bruce Avenue Louisville, Kentucky 40214 Article IX

The original bylaws shall be adopted by the initial Board of Directors. Thereafter, the Corporation shall be governed by the Bylaws.

Any director may be removed for cause pursuant to bylaws provisions regarding grounds and procedures for such removal.

Article X

a) The directors, officers and at-large members, employees and members of this Corporation shall not be held personally liable for any debt or obligation of the corporation solely because of their position in the Corporation.

Page 2 of 3

Address

b) Any person serving on the Board of Directors of this Corporation shall 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, officer and at-large member, or former director, officer and at-large member, of the Corporation against any expenses actually and reasonably incurred by him/her in connection with the defense of any action, suit or proceeding, civil or criminal, in which he/she is made a party by reason of being or having been such director, officer and atlarge member, except in relation to matters as to which he/she shall 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, By-laws or resolution adopted after notice to members entitled to vote.

Article XII

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 the promotion of social welfare as shall at the time qualify as an exempt organization under Section 501(c)(4) or 501 (c) 3 of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), or to a state or local government for a public purpose 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 XIII

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

IN TESTIMONY WHEREOF, witness the signature of the Incorporator of this Corporation, this 2nd day of September 2009.

Dathy Kicktenung Kathy Reckienwald, Secretary

Incorporator

STATE OF KENTUCKY)) SS **COUNTY OF JEFFERSON)**

Before me, the undersigned authority, personally appeared and being duly sworn, acknowledged that she is the incorporator and agent of process of the aforementioned Corporation, and that she signed the aforementioned articles of incorporation as her free act and deed.

Witness my signature and seal of office this _2 Md day of September, 2009.

My Commission Expires: Notary Public, State at Large, KY My con mission expires Nov. 20, 2012 This Document Prepared By:

mary Notary Public

State At Large, Kentucky

Amanda S. Clephas, Community Outreach Liaison Department of Neighborhoods

Page 3 of 3

Form M-9
(Rev. December 2014)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.				
	AUBURNDALE NEIGHBORHOOD ASSOCIATION				
page 2.	2 Business name/disregarded entity name, if different from above				
ő	Check appropriate box for federal tax classification; check only one of the following seven boxes: Individual/sole proprietor or Ic Corporation S Corporation Partnership single-member LLC Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership)	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any)			
Print or type Specific Instructions	Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box i the tax classification of the single-member owner.		Exemption from FATCA reporting code (if any)		
<u>T</u> - 5	✓ Other (see instructions) ▶		(Applies to accounts maintained outside the U.S.)		
<u>eifi</u>	5 Address (number, street, and apt. or suite no.)	Requester's name a	and address (optional)		
be b	1120 FRANELM ROAD				
	6 City, state, and ZIP code				
See	LOUISVILLE, KY, 40214				
	7 List account number(s) here (optional)				
Par	Taxpayer Identification Number (TIN)				
Enter	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to av	oid Social sec	curity number		
backu reside entitie	p withholding. For individuals, this is generally your social security number (SSN). However, fint alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other s, it is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i> 1 page 3.	ora	-		
	If the account is in more than one name, see the instructions for line 1 and the chart on page		identification number		
auida	inco on whom number to entry				

guidelines on whose number to enter.

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 ▶	<u> </u>	y Cirber	Date 🕨	1/26.
<u>^</u>	نغد سخمها امد	·	· · · · · · · · · · · · · · · · · · ·	Form 1008 (home montanes	

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*.

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)

2016

- 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.

Reddington, Debbie

∼rom: ⊃ent: To:

Reddington, Debbie Tuesday, August 05, 2014 1:27 PM 'raycrider2@gmail.com'

Ray:

Your account number with the Revenue Commission in You will receive a letter stating your account number within the next 7 days.

1

If you have any other questions you can contact me at the email or phone number.

Debbie Reddington Processing Dept 617 West Jefferson Street Louisville, Kentucky (502) 574-4953 <u>debbie.reddington@metrorevenue.org</u>

AUBURNDALE NEIGHBORHOOD ASSOCIATION, INC.

General Information

Organization Number	0744470
Name	AUBURNDALE NEIGHBORHOOD ASSOCIATION, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	9/24/2009
Organization Date	9/24/2009
Last Annual Report	1/4/2016
Principal Office	1120 FRANELM RD LOUISVILLE, KY 40214
Registered Agent	RAY CRIDER 1120 FRANELM RD LOUISVILLE, KY 40214
Current Officers	
President	KEN WILLIAMS

President	KEN WILLIAMS
Vice President	KENNY MCFARLAND
Secretary	BOB DAWSON
Treasurer	RAY CRIDER
Director	PATSY BLACK
Director	JOYCE WHALIN
Director	KAREN BOSTON

Individuals / Entities listed at time of formation

Director	<u>RAY WHITENER</u>
Director	KEN MCFARLAND
Director	RAY CRIDER
Director	STEPHEN COTTON
Incorporator	KATHY RECKTENWALD

Images available online

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

Annual Report	1/4/2016	1 page	<u>PDF</u>
Annual Report	1/5/2015	1 page	PDF
Annual Report	1/4/2014	1 page	<u>PDF</u>
Annual Report	1/2/2013	1 page	PDF
Annual Report	1/11/2012	1 page	<u>PDF</u>

2/18/2016	Welcome to Fasttrack Organization Search				
	<u>Reinstatement Certificate of Existence</u>	7/19/2011 11:22:56 AM	2 pages	PDF	
	Reinstatement	7/19/2011 11:21:38 AM	2 pages	PDF	
	<u>Reinstatement Approval</u> <u>Letter Revenue</u>	7/19/2011 10:15:14 AM	1 page	<u>PDF</u>	
	<u>Principal Office Address</u> <u>Change</u>	7/19/2011	1 page	<u>tiff</u>	PDF
	<u>Registered Agent</u> name/address change	7/19/2011	1 page	<u>tiff</u>	PDF
	Administrative Dissolution Articles of Incorporation	11/2/2010 9/24/2009	1 page 3 pages	<u>PDF</u> <u>tiff</u>	<u>PDF</u>

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	1/4/2016 3:23:17 PM	1/4/2016 3:23:17 PM	
Annual report	1/5/2015 9:21:27 AM	1/5/2015 9:21:27 AM	
Annual report	1/4/2014 2:36:27 PM	1/4/2014 2:36:27 PM	
Annual report	1/2/2013 11:53:37 AM	1/2/2013 11:53:37 AM	
Annual report	1/11/2012 4:10:02 PM	1/11/2012 4:10:02 PM	
Registered agent address change	7/19/2011 11:23:55 AM	7/19/2011	
Principal office change	7/19/2011 11:23:25 AM	7/19/2011	
Reinstatement	7/19/2011 11:22:52 AM	7/19/2011	
Application For Reinstatement	7/18/2011 4:56:59 PM	7/18/2011	
Admin Dis. A. report not in	11/2/2010	11/2/2010	
Add	9/24/2009 3:34:08 PM	9/24/2009	

Microfilmed Images

4