

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


**Applicant/Program: Bridgegate Resident's Association, Inc./Bridgegate Retention Basin Silt Cleaning**

**Executive Summary of Request:**

**The Bridgegate Resident's Association is requesting \$2,715 to fund the cleaning of silt from the Bridgegate Retention Basin located at 3510 Bridgegate Court. The retention basin captures silt from Bridgegate & Non-Bridgegate property and channels the cleansed water downstream. The project will restore the depth of the basin from its current less than 12 inches to 8 feet. The total project is estimated at \$16,000 to which MSD will supply \$7,500 and Bridgegate Resident's Association has collected \$5,785.**

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

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

<u>25</u> District #	 Primary Sponsor Signature	<u>\$2,715</u> Amount	<u>12/3/14</u> Date
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**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

**Approved by:**

\_\_\_\_\_ Date  
Appropriations Committee Chairman

**Clerk's Office Only:**

Request Amount: \_\_\_\_\_ Committee Amended Appropriation: \_\_\_\_\_  
Original Appropriation: \_\_\_\_\_ Council Amended Appropriation: \_\_\_\_\_

OFFICE OF METRO COUNCIL CLERK  
REVIEWED

DATE 12-12-14 TIME 1:29 pm



**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

SECTION 1 – APPLICANT INFORMATION			
<b>Legal Name of Applicant Organization:</b>		<b>Bridgegate Residents Association, Inc.</b>	
<i>(as listed on: <a href="http://www.sos.ky.gov/business/records">http://www.sos.ky.gov/business/records</a>)</i>			
<b>Main Office Street &amp; Mailing Address:</b> 3404 Gatecreek Road Louisville, Ky 40272			
<b>Website:</b> N/A			
<b>Applicant Contact:</b>	Ron Willen	<b>Title:</b>	Treasurer
<b>Phone:</b>	(502)724-8476	<b>Email:</b>	randjwillen@twc.com
<b>Financial Contact:</b>	Ron Willen	<b>Title:</b>	Treasurer
<b>Phone:</b>	(502)724-8476	<b>Email:</b>	randjwillen@twc.com
<b>Organization's Representative who attended NDF Training:</b> Ron Willen			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
<b>Program Facility Location(s):</b>	3510 Bridgegate Court Louisville, Ky 40272		
<b>Council District(s):</b>	25	<b>Zip Code(s):</b>	40272
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
<b>PROGRAM/PROJECT NAME:</b> Bridgegate Retention Basin Silt Cleaning			
<b>Total Request: (\$)</b>	\$2,715	<b>Total Metro Award (this program) in previous year: (\$)</b>	N/A
<b>Purpose of Request (check all that apply):</b>			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget)			
<input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals			
<input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
<b>The Following are Required Attachments:</b>			
<input type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current Year Projected Budget <input checked="" type="checkbox"/> List of Board of Directors (include term & term limits) <input 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 <input checked="" type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense		<input type="checkbox"/> Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 <input type="checkbox"/> Evaluation forms if used in the proposed program <input type="checkbox"/> Annual audit (if required by organization) <input type="checkbox"/> Faith Based Organization Certification Form, if required <input checked="" type="checkbox"/> Staff including the 3 highest paid staff	
<b>For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.</b>			
<b>Source:</b>	N/A	<b>Amount: (\$)</b>	0
<b>Source:</b>	N/A	<b>Amount: (\$)</b>	0
<b>Source:</b>	N/A	<b>Amount: (\$)</b>	0
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Has the applicant met the BBB Charity Review Standards? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 3 – AGENCY DETAILS

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

See Article III of the attached Articles of Incorporation of Bridgegate Residents Association.

**Article III**

"The objects and purposes of the corporation shall be to promote the social welfare and serve the common good and general welfare of the owners of the lots in Bridgegate Subdivision, to provide for maintenance and repair of the streets, common areas, cross walks, storm drains, basins, retention basins and entrances to the subdivision, and to accept common areas for purpose of operation, maintenance and repair. The association shall have power to levy assessments to secure funds for the aforesated purposes."

Handwritten initials in blue ink, appearing to be "RR".



**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

**SECTION 4 – PROGRAM/PROJECT NARRATIVE**

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

The Bridgegate Retention Basin Silt Cleaning is a project to remove silt & debris that have built up in the wet retention basin at the front of the Bridgegate Neighborhood.

MSD has stated that the retention basin does provide a public good by filtering the storm water providing cleaner water down stream.

The contractor will begin as soon as possible after any NDF funding has been granted and appropriate permits have been issued. The completion time is two to three weeks, depending on weather conditions.

This project will address the residents of Bridgegate subdivision and surrounding areas that have surface runoff into the Bridgegate retention basin.

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

The funding will be used entirely to help offset the cost of removing silt from the Bridgegate retention basin.

The contractor is: Tarter Stone Works, 3233 Hebron Road, Shelbyville, KY 40065  
502-523-4230

Total Estimate of the Project: \$16,000

MSD supplied funding: \$7,500

Bridgegate Resident funding: \$5,785

Requested Metro funding: \$2,715

\$16,000 Total



*Louisville and Jefferson County Metropolitan Sewer District  
700 West Liberty Street  
Louisville Kentucky 40203-1911  
502-540-6000  
www.msdlouky.org*

September 15, 2014

Mrs. Elaine Morgan  
Bridgeway Neighborhood Association  
3408 Gatecreek Road  
Louisville, KY 40272

Subject: Bridgeway Retention Basin

Dear Mrs. Morgan,

There is often confusion regarding the maintenance responsibilities for wet detention or retention basins. MSD has discouraged the construction of such basins due to the high cost of maintenance relative to the additional benefits that are derived in comparison to dry basins. MSD has made it clear that these basins are the sole responsibility of the owner to maintain. MSD has chosen to clear this type of basin on a few occasions and has been applied in an inconsistent manner.

It appears that the retention basin was constructed in accordance with the construction plans approved by the Louisville/ Jefferson Co. Metropolitan Sewer District. As part of the initial agreement, the "Owner/Developer" as Principal agreed as a condition of final approval of said basin installation since the basin is for the benefit of the development and would assume all maintenance responsibilities for the basin and that the installation will remain free from defects in materials and workmanship, after the expiration and release of the initial bond. The owner / developer and the associated design engineer decided on the best means of handling the on-site and off-site flows in the area. MSD does not generally dictate the solutions to such issues, but reviews them and ultimately approves them if they are acceptable. MSD does agree that some of the eroded material is being transported from areas outside of your neighborhood boundary. Typically, it is much more expensive to remove sediment from a wet basin than from a dry basin. This is one of the reasons that MSD discourages the construction of wet basins.



*Beneficial Use of Louisville's Biosolids*  
[www.louisvillegreen.com](http://www.louisvillegreen.com)

September 15, 2014  
Bridgegate Detention Basin  
Page 2

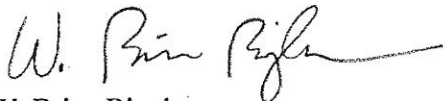
In an effort to partner with property owners and associations, MSD has developed a pilot program to try to assist with the infrequent, expensive maintenance of such basins as well as provide benefit to all ratepayers. MSD has selected the Bridgegate Basin to be one of the first sites to participate in this pilot program.

MSD Pilot Basin Re-establishment Program:

- Eligibility is based on the basin including of-site drainage and not being eligible to receive a drainage credit through other MSD Programs.
- MSD will pay for 50% of the total cost of the improvement project up to a maximum of \$7,500. Therefore, MSD will split the costs for a project up to a total of \$15,000 and will pay a maximum of \$7,500 for any projects over \$15,000. The actual invoiced amount will be utilized to make the determination of participation.
- MSD prefers to deliver the funds to the accounts of Louisville Metro Council Members but may consider transmitting the funds to a properly established and active neighborhood association. Funds will not be transmitted to individuals or companies.
- Any work must be designed by a Professional Engineer licensed by the State of Kentucky. The work must be reviewed and approved by MSD's Plan Review staff.
- Any basin taking part in this program will not be eligible to participate in this program again for 10 years unless the program is subsequently modified to lessen this requirement.
- Participants shall acknowledge their maintenance responsibilities and make reasonable efforts to maintain the basin in accordance with the applicable standards.

MSD understands that Council Member David Yates has agreed to receive and disperse these funds in accordance with this MSD Pilot Program. MSD also understands that the anticipated costs exceed \$15,000 and agree to providing the maximum amount of the Pilot Program of \$7,500. If the programs outlined in this letter are agreeable, MSD will finalize the agreement outlining the Pilot Program and forward it to you in the near future.

Sincerely,



W. Brian Bingham  
MSD Chief of Operations

cgt

cc: David Yates



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

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

- Effective October 24, 2013, reimbursements should not be made unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):
- ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
  - ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.

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

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

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

*RW*



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

The project will improve flow of storm water runoff by increasing the volume of water the retention basin can hold. By increasing the depth of the basin, mosquito spawning will be reduced. It will also reduce the chances of overflow and flooding of streets during heavy rain events.

Currently the Retention Basin Depth is less than 12 inches.

The original depth of the Retention Basin at its deepest is 8 feet.

The project seeks to attain the original depth of the Retention Basin.

**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.**

N/A





**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

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

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

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
<b>A: Personnel Costs Including Benefits</b>			
<b>B: Rent/Utilities</b>			
<b>C: Office Supplies</b>			
<b>D: Telephone</b>			
<b>E: In-town Travel</b>			
<b>F: Client Assistance (Attach Detailed List)</b>			
<b>G: Professional Service Contracts</b>	\$2,715	\$13,285	\$16,000
<b>H: Program Materials</b>			
<b>I: Community Events &amp; Festivals (Attach Detail List)</b>			
<b>J: Small Equipment</b>			
<b>K: Capital Equipment</b>			
<b>L: Other Expenses (Attach Detail List)</b>			
<b>*TOTAL PROGRAM/PROJECT FUNDS</b>	\$2,715	\$13,285	\$16,000
<b>% of Program Budget</b>	17 %	83 %	100%

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

Other State, Federal or Local Government	\$7,500
United Way	0
Private Contributions (do not include individual donor names)	0
Fees Collected from Program Participants	\$5785
Other (please specify)	0
<b>Total Revenue for Columns 2 Expenses **</b>	<b>\$13,285</b>

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

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

# Tarter Stone Works

3233 Hebron Road, Shelbyville, KY 40065

502-523-4230

## PROPOSAL

Page No. 1 of 1 Pages

Proposal Submitted To: <u>Bridgegate Residents Association Inc.</u>		
Address: <u>3rd Street Rd</u>	Phone: <u>502-553-0785</u>	Date: <u>9-26-14</u>
City, State, Zip Code: <u>Lou, Ky 40272</u>		
Job Name: <u>Bridgegate Basin Cleanout</u>	Job Location: <u>3rd Street Rd</u>	
Architect: <u>N/A</u>	Date of Plans:	
Job Phone Number:		

We hereby propose to furnish materials and labor necessary for the completion of:

- clean out silt in pond basin at entrance to Bridgegate Estates.

- will pump out surface clean water into nearby stream.
- only clean water no silt will be pumped into stream.
- Dig out silt and muck and haul away to be used as recycled top soil.
- Digging will be done with excavator.

We Propose hereby to furnish material and labor - complete in accordance with above specifications, for the sum of: Fifteen thousand five hundred dollars (\$15,500<sup>00</sup>). Payment to be made as follows: at completion of job.

All material is guaranteed to be specified. All work to be completed in a substantial workmanlike manner according to specifications submitted, per standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado, and other necessary insurance.

Authorized Signature [Signature]

Note: This proposal may be withdrawn by us if not accepted within \_\_\_\_\_ days.

ACCEPTANCE OF PROPOSAL - The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Signature [Signature]

Signature [Signature]

Date of Acceptance: Dec. 2, 2014

**Tarter Stone Works**  
**3233 Hebron Road, Shelbyville, KY 40065**  
**502-523-4230**

**PROPOSAL**

Page No. / of / Pages

Proposal Submitted To: <u>Bridge oak Home Owners Associates</u>	
Address: <u>3404 Gate Creek Rd</u>	Date: <u>12-2-14</u>
City, State, Zip Code: <u>Lov, Ky 40272</u>	
Job Name: <u>Attn: Ron Willen</u>	Job Location: <u>Bridge oak.</u>
Architect:	Date of Plans:
Job Phone Number:	

**We hereby propose to furnish materials and labor necessary for the completion of:**

Amendment to original contract for dredging  
And cleaning out retention basin / pond.

Adding catch basin at the exit of one  
large drain pipe & moving rip rap up and  
around drain pipes.

**We Propose hereby to furnish material and labor – complete in accordance with above specifications, for the sum of:** five hundred dollars (\$ 500<sup>00</sup>/<sub>100</sub>). Payment to be made as follows: \_\_\_\_\_

All material is guaranteed to be specified. All work to be completed in a substantial workmanlike manner according to specifications submitted, per standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado, and other necessary insurance.

Authorized Signature \_\_\_\_\_

Note: This proposal may be withdrawn by us if not accepted within 100 days.

**ACCEPTANCE OF PROPOSAL** – The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Date of Acceptance: Dec 2 2014



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

\* DONOR INFORMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION. VOLUNTEERS NEED NOT BE LISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NOTING HOW MANY HOURS PER PERSON PER WEEK

Agency Fiscal Year Start Date: January 1<sup>st</sup>, 2015

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:



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 6 – CERTIFICATIONS & ASSURANCES

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

#### Standard Assurances

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

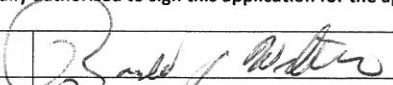
#### Standard Certifications

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

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

### SECTION 7 – CERTIFICATIONS & ASSURANCES

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

<b>Signature of Legal Signatory:</b>		<b>Date:</b>	12/2/14
<b>Legal Signatory: (please print):</b>	Ronald J. Willen	<b>Title:</b>	Treasurer
<b>Phone:</b>	(502)724-8476	<b>Extension:</b>	N/A
<b>Email:</b>	randjwillen@twc.com		

**BRIDGEGATE RESIDENT ASSOCIATION**  
**Profit & Loss Budget Overview**  
 January through December 2014

	<u>Jan - Dec 14</u>
Ordinary Income/Expense	
Income	
2014 DUES	39,130.00
LOT MAINTENANCE FEE	400.00
POND CLEAN OUT FUND	5,785.00
POND CLEAN UP FUND	
2014 CLEAN UP ASSESSMENT	2,150.00
POND CLEAN UP FUND - Other	5,785.00
Total POND CLEAN UP FUND	<u>7,935.00</u>
VACCANT LOT DUES	1,400.00
Total Income	<u>54,650.00</u>
Gross Profit	54,650.00
Expense	
CHRISTMAS EXPENSES	1,000.00
CHRISTMAS LIGHTS	200.00
DIRECTOR FEES	
DIRECTOR FEE	1,400.00
Total DIRECTOR FEES	<u>1,400.00</u>
ENTRANCE-ESTATE-SEC 4-SECT 5	
FLOWERS	150.00
Total ENTRANCE-ESTATE-SEC 4-SECT 5	<u>150.00</u>
INSURANCE	
DISHONESTY BOND	201.00
GENERAL LIABILITY	434.00
Total INSURANCE	<u>635.00</u>
LAWN	
CHEMICALS-WEED KILLERS,ETC	30.00
IRRIGATION-STRUP/SHUTDN-REPAIR	500.00
LANDSCAPING PLANTS,ETC	200.00
LAWN SERVICE-GRASS CUTTING,ETC	5,225.00
LAWN TREATMENT	720.00
MULCHING	2,500.00
Total LAWN	<u>9,175.00</u>
LEGAL	200.00
OFFICE EXPENSE	
OFFICE SUPPLIES	165.00
POST OFFICE BOX	90.00
POSTAGE	100.00
Total OFFICE EXPENSE	<u>355.00</u>
POND	
MAINTENANCE	
LIGHTS,LANDSCAPE	50.00
POND CHEMICALS	300.00
POND CLEANING	15,500.00
Total MAINTENANCE	<u>15,850.00</u>
Total POND	15,850.00
SNOW AND ICE REMOVAL	200.00
TAXES/FEES	
LICENSE TAX & ANNUAL FEE	15.00
Total TAXES/FEES	15.00
TRASH COLLECTION FEE	9,030.00

5:17 PM  
11/10/14  
Accrual Basis

**BRIDGEGATE RESIDENT ASSOCIATION**  
**Profit & Loss Budget Overview**  
January through December 2014

	<u>Jan - Dec 14</u>
UTILITIES	
ENTRANCE WATER	2,200.00
ISLAND WATER	350.00
LG&E ENTRANCE	3,000.00
LG&E STREET LIGHTS	9,700.00
Total UTILITIES	<u>15,250.00</u>
Total Expense	<u>53,460.00</u>
Net Ordinary Income	1,190.00
Other Income/Expense	
Other Income	
INTEREST INCOME	25.00
OTHER INCOME	
ADVERTISING INCOME	40.00
FINANCE CHARGE	60.00
Total OTHER INCOME	<u>100.00</u>
Total Other Income	<u>125.00</u>
Net Other Income	<u>125.00</u>
Net Income	<u><u>1,315.00</u></u>

Organization ID # 0268423  
State of origin KY  
Filing fee \$15.00

Commonwealth of Kentucky  
Alison Lundergan Grimes, Secretary of State



Alison Lundergan Grimes  
Secretary of State  
P. O. Box 1150  
Frankfort, KY 40602-1150  
(502) 564-3490  
<http://www.sos.ky.gov>

Amended 2014 Annual Report

ARA

**Exact organization name and principal office address**  
BRIDGEGATE RESIDENTS ASSOCIATION, INC.  
3404 GATECREEK RD  
LOUISVILLE KY 40272-2686

The principal office address and registered agent name/office address cannot be changed on this form. You can file online at [app.sos.ky.gov/ftsearch](http://app.sos.ky.gov/ftsearch) or forms can be downloaded from our website.

**Registered Agent and Registered Office Address**

RONALD J. WILLEN  
3404 GATECREEK RD.  
LOUISVILLE, KY 40272

**Principal Officers** - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian

Treasurer	RON WILLEN	_____
President	ELAINE MORGAN	_____
Vice President	MARK BRATCHER	_____
Secretary	JAN GRAY	_____

**Directors** - Non-profit corporations must have at least three (3) directors. All directors of the non-profit must be listed. If not specified, director addresses default to the principal office address.

ELAINE MORGAN	_____	_____
RON WILLEN	_____	_____
MARK BRATCHER	_____	_____
JAN GRAY	_____	_____

X

Signature of officer or chairman of the board (Required)

Title (Required)

Date (Required)



## BRIDGEGATE RESIDENTS ASSOCIATION, INC.

### General Information

<b>Organization Number</b>	0268423
<b>Name</b>	BRIDGEGATE RESIDENTS ASSOCIATION, INC.
<b>Profit or Non-Profit</b>	N - Non-profit
<b>Company Type</b>	KCO - Kentucky Corporation
<b>Status</b>	A - Active
<b>Standing</b>	G - Good
<b>State</b>	KY
<b>File Date</b>	1/29/1990
<b>Organization Date</b>	1/29/1990
<b>Last Annual Report</b>	3/13/2014
<b>Principal Office</b>	3404 GATECREEK RD LOUISVILLE, KY 40272-2686
<b>Registered Agent</b>	RONALD J. WILLEN 3404 GATECREEK RD. LOUISVILLE, KY 40272

### Current Officers

<b>President</b>	<u>ELAINE MORGAN</u>
<b>Vice President</b>	<u>MARK BRATCHER</u>
<b>Secretary</b>	<u>IAN GRAY</u>
<b>Treasurer</b>	<u>RON WILLEN</u>
<b>Director</b>	<u>Elaine Morgan</u>
<b>Director</b>	<u>Ron Willen</u>
<b>Director</b>	<u>MARK BRATCHER</u>
<b>Director</b>	<u>IAN GRAY</u>

### Individuals / Entities listed at time of formation

<b>Director</b>	<u>S. ALLAN DURST</u>
<b>Director</b>	<u>GORDON L. MOERT</u>
<b>Director</b>	<u>CONNIE D. FOLEY</u>
<b>Incorporator</b>	<u>S. ALLAN DURST</u>

### Images available online

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

<u>Annual Report</u>	3/13/2014	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	2/27/2013	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	2/14/2012	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	2/23/2011	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	4/2/2010	1 page	<u>tiff</u>	<u>PDF</u>

<u>Annual Report</u>	1/13/2009	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	2/14/2008	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	1/29/2007	1 page	<u>tiff</u>	<u>PDF</u>
<u>Statement of Change</u>	4/5/2006	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	4/5/2006	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	6/30/2005	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	8/20/2004	1 page	<u>tiff</u>	<u>PDF</u>
<u>Statement of Change</u>	11/17/2003	1 page	<u>tiff</u>	<u>PDF</u>
<u>Reinstatement</u>	11/17/2003	2 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1997	1 page	<u>tiff</u>	<u>PDF</u>
<u>Statement of Change</u>	5/2/1997	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1996	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1995	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	3/22/1994	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	4/1/1993	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1992	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1991	1 page	<u>tiff</u>	<u>PDF</u>
<u>Articles of Incorporation</u>	1/29/1990	2 pages	<u>tiff</u>	<u>PDF</u>

## Assumed Names

## Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	3/13/2014 11:34:54 AM	3/13/2014	
Annual report	2/27/2013 1:44:56 PM	2/27/2013	
Annual report	2/14/2012 7:46:15 AM	2/14/2012	
Annual report	2/23/2011 4:18:31 PM	2/23/2011	
Annual report	4/2/2010 8:35:53 AM	4/2/2010	
Annual report	1/13/2009 2:03:40 PM	1/13/2009	
Annual report	2/14/2008 9:06:38 AM	2/14/2008	
Annual report	1/29/2007 12:52:28 PM	1/29/2007	
Annual report	4/5/2006 2:21:39 PM	4/5/2006	
Registered agent address change	4/5/2006 2:15:38 PM	4/5/2006	
Registered agent address change	11/17/2003 1:38:03 PM	11/17/2003	
Principal office change	11/17/2003 1:36:38 PM	11/17/2003	
Reinstatement	11/17/2003 1:36:09 PM	11/17/2003	
Admin Dis. A. report not in	11/3/1997	11/3/1997	

Registered agent address change	5/2/1997	5/2/1997
Principal office change	7/2/1996	7/2/1996

## Microfilmed Images

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

Annual Report	11/4/2004	1 page
Statement of Change	11/17/2003	1 page
Reinstatement	11/17/2003	2 pages
Administrative Dissolution	11/3/1997	1 page
Annual Report	7/1/1997	1 page
Statement of Change	5/2/1997	1 page
Annual Report	7/1/1996	1 page
Annual Report	7/1/1995	1 page
Annual Report	3/22/1994	1 page
Annual Report	4/1/1993	1 page
Annual Report	7/1/1992	1 page
Annual Report	7/1/1991	1 page
Articles of Incorporation	1/29/1990	2 pages

**Bridgegate Residents Association, Inc.**

**Board**

<b>Office</b>	<b>Name</b>	<b>Term Ending</b>	<b>Term Limit</b>
President	Elaine Morgan	Dec. 31 <sup>st</sup> , 2014	None
Vice President	Mark Bratcher	Dec. 31 <sup>st</sup> , 2014	None
Secretary	Jan Gray	Dec. 31 <sup>st</sup> , 2014	None
Treasurer	Ron Willen	Dec. 31 <sup>st</sup> , 2014	None

# REPUBLIC BANK

601 West Market Street  
Louisville, Kentucky 40202-2700

www.republicbank.com  
Member FDIC

RPBK

Address Service Requested



NO INS



000276 0.8500 WCL0001

Bridgegate Residents Association Inc  
PO Box 72545  
Louisville KY 40272-0545

Your Account Managed By  
DIXIE HIGHWAY BANKING CTR  
(502) 448-7000  
PHILLIP PEERCY  
Banking Center Manager

Statement Date 11/07/14 Page 1

### YOUR ACCOUNTS AT A GLANCE

Checking Balance \$ 33,015.51

## ACCOUNT STATEMENT

TRAVELING OUT OF TOWN THIS HOLIDAY SEASON?  
DON'T RISK MAKING LATE PAYMENTS. USE OUR FREE BILL PAY SERVICE.  
YOU CAN PAY BILLS ONLINE AND SCHEDULE BILLS TO BE PAID AUTOMATICALLY.

### COMMUNITY ASSOCIATION

Beginning balance on 10/10/14	\$	37,712.47	Days in period	31
+ Deposits and other credits (2)	\$	27.91	Annual Percentage Yield Earned	0.10%
Interest Paid	\$	2.91	Average Daily Balance	34,289.00
- Checks and other debits (6)	\$	4,724.87	Average Daily Balance for APY	34,288.52
Service Charges	\$	3.00	YTD Interest Paid	36.51
Ending balance on 11/07/14	\$	33,015.51		

### CHECKS & OTHER DEBITS

(\* indicates break in check sequence)

Check#	Date	Amount	Check#	Date	Amount	Check#	Date	Amount
1879	10/15	180.00	1880	10/15	752.50	1881	10/15	2,612.50
<b>Date</b>	<b>Description</b>							<b>Amount</b>
10/29	LOUISVILLE GAS &/PAYMENT BRIDGEGATE RESIDENTS A							370.27
10/29	LOUISVILLE GAS &/PAYMENT BRIDGEGATE RESIDENTS A							806.60
11/07	PAPER STATEMENT FEE							3.00

### DEPOSITS & OTHER CREDITS

Date	Description	Amount
11/03	DEPOSIT	25.00
11/07	INTEREST EARNED	2.91

RPBK-003-000276-001-002-141110 000276 K06  
40272054545

U.S. Income Tax Return for Homeowners Associations

Department of the Treasury Internal Revenue Service

2013

Information about Form 1120-H and its separate instructions is at www.irs.gov/form1120h.

For calendar year 2013 or tax year beginning

, 2013, and ending

, 20

Name: Bridgegate Residents Association
Number, street, and room or suite no. If a P.O. box, see instructions: 3404 Gatecreek Road
City or town, state or province, country, and ZIP or foreign postal code: Louisville, Ky. 40272
Date association formed: 1/23/1990

Check if: (1) Final return (2) Name change (3) Address change (4) Amended return

A Check type of homeowners association: Residential real estate association
B Total exempt function income: 42,655
C Total expenditures made for purposes described in 90% expenditure test: 42,328
D Association's total expenditures for the tax year: 42,328
E Tax-exempt interest received or accrued during the tax year

Gross Income (excluding exempt function income)

Table with 8 rows: Dividends, Taxable interest, Gross rents, Gross royalties, Capital gain net income, Net gain or (loss) from Form 4797, Part II, line 17, Other income, Gross income (excluding exempt function income). Total: 64

Deductions (directly connected to the production of gross income, excluding exempt function income)

Table with 18 rows: Salaries and wages, Repairs and maintenance, Rents, Taxes and licenses, Interest, Depreciation, Other deductions, Total deductions, Taxable income before specific deduction of \$100, Specific deduction of \$100. Total: \$100.00

Tax and Payments

Table with 19 rows: Taxable income, Enter 30% of line 19, Tax credits, Total tax, Tax overpayment/credit, Amount owed, Overpayment, Enter amount of line 25 you want. Total: 0

Sign Here

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

Signature of officer: [Signature] Date: 1/15/14 Title: Treasurer

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

Paid Preparer Use Only

Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's address, Firm's EIN, Phone no.

Multi-page document. Select page: 1 2

26843

RECEIVED AND FILED

DATE JAN 30 1980

TIME 9:45 am

AMOUNT \$ 8.00

ARTICLES OF INCORPORATION  
OF  
BRIDGEGATE RESIDENTS ASSOCIATION INC.

BREMER ENFLER  
SECRETARY OF STATE  
COMMONWEALTH OF KENTUCKY  
LSB

I, S. ALLAN DURST, for myself, associates and successors, do hereby form a corporation having no capital stock under the provisions of Chapter 273, Kentucky Revised Statutes, and do hereby adopt the following Articles of Incorporation therefor:

ARTICLE I

The name of the corporation shall be BRIDGEGATE RESIDENTS ASSOCIATION, INC.

588331

ARTICLE II

The place in which the principal office of the corporation shall be is 12200 Shelbyville Road, Louisville, Jefferson County, Kentucky 40243, and GORDON L. MOERT, 12200 Shelbyville Road, Louisville, Jefferson County, Kentucky 40243, shall be its registered agent.

ARTICLE III

The objects and purposes of the corporation shall be to promote the social welfare and serve the common good and general welfare of the owners of the lots in Bridgegate Subdivision, to provide for maintenance and repair of the streets, common areas, cross walks, storm drains, basins, retention basins and entrances to the subdivision, and to accept common areas for purpose of operation, maintenance and repair. The association shall have power to levy assessments to secure funds for the aforesated purposes.

ARTICLE IV

The corporation may acquire by purchase or otherwise and hold, maintain and manage such property as may be necessary or convenient for carrying on the purposes of the corporation hereinabove set out, including the right to purchase supplies for maintenance, repairs and all other necessary matters which are incidental to carrying out the purposes set out in Article III, the same as a person might to in an individual capacity.

ARTICLE V

The executive authority of this corporation shall be vested in a Board of Directors hereby composed of the following: S. Allan Durst, 12200 Shelbyville Road, Louisville, Kentucky 40243; Gordon L. Moert, 12200 Shelbyville Road, Louisville,

**Kentucky 40243; and Connie D. Foley, 12200 Shelbyville Road, Louisville, Kentucky**

**40243, shall be the initial directors and two additional persons to be named at a later**

Multi-page document. Select page: 1 2



## 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.

Name (as shown on your income tax return) <b>Bridgegate Residents Association, Inc.</b>	
Business name, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ ..... <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.) <b>3404 Gatecreek Road</b>	Requester's name and address (optional)
City, state, and ZIP code <b>Louisville, Ky 40272</b>	
List account number(s) here (optional)	

### Part I Taxpayer Identification Number (TIN)

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

Social security number
or
Employer identification number

**Note.** If the account is in more than one name, see the chart on page 4 for 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).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

**Sign Here**

Signature of  
U.S. person ▶

Date ▶

### General Instructions

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

#### Purpose of Form

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

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

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.

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

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

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

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

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

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

## **Bridgegate Residents Association, Inc.**

### **Board**

<b>Office</b>	<b>Name</b>	<b>Term Ending</b>	<b>Term Limit</b>
President	Elaine Morgan	Dec. 31 <sup>st</sup> , 2014	None
Vice President	Mark Bratcher	Dec. 31 <sup>st</sup> , 2014	None
Secretary	Jan Gray	Dec. 31 <sup>st</sup> , 2014	None
Treasurer	Ron Willen	Dec. 31 <sup>st</sup> , 2014	None

There is no salary for any Board Member or Section Representative. All positions are voluntary. Each of the 4 Board Members receives a \$350.00 discount on the Annual Dues of \$455.00.



Louisville Metro Government  
Office of Management and Budget

### Neighborhood Development Fund Training Attestation

Organization Name: Bridgeway Residents Association, Inc.

Participant Name: Ronald J. Willen, Treasurer

*I agree that I am an authorized representative and/or signatory of the organization named above and attest to having participated in Neighborhood Development Fund training. In addition, I understand the requirements of the Neighborhood Development Fund grant process.*

Please check:



I participated in the NDF training session on ~~May 14, 2014~~

*on line version on 11/14/14*

Ronald J Willen  
Participant Signature

11 / 14 / 14  
Date

**NOTE:** Please return to Roxanne Steele:

E-mail address: [Roxanne.Steele@louisvilleky.gov](mailto:Roxanne.Steele@louisvilleky.gov) or Fax: 502-574-3219

Mailing Address: Louisville Metro Government ATTN: NDF Coordinator 611 West Jefferson St.  
Louisville, Kentucky 40202

## NDF NON-PROFIT APPLICATION CHECKLIST

<b>Legal Name of Applicant Organization:</b> Bridgegate Resident's Association, Inc		
Program Name: <b>Bridgegate Retention Basin Silt Cleaning</b>	Request Amount: \$2,715	<b>Yes/No/NA</b>
<b>Request form:</b> Is the NDF request form signed by all Council Member(s) appropriating funding?		Y
<b>Request form:</b> Is the funding proposed less than or equal to the request amount?		Y
<b>Request form:</b> Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?		Y
<b>Application Page 1:</b> Has prior Metro funds committed/granted been disclosed?		Y
<b>Application Page 1:</b> Is the application properly signed and dated by authorized signatory?		Y
<b>Application Page 3:</b> Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?		Y
<b>Application Pages 3 – 5:</b> Is the proposed public purpose of the program well-documented?		Y
<b>Application 4:</b> Is there adequate documentation of how the proceeds of the fundraiser will be spent?		NA
<b>Application Budget Page 6:</b> Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for "Metro, Non Metro and Total" expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?		Y
<b>Faith Based Organizations:</b> Is the signed Faith Based Form signed and included?		NA
<b>Jefferson County Only:</b> Will all funding be spent in Louisville/Jefferson County?		Y
<b>Capital Project(s) request:</b> Is the cost estimate(s) from proposed vendor(s) included?		Y
<b>Good Standing:</b> Is the entity in good standing with: <ul style="list-style-type: none"> <li>• Kentucky Secretary of State – include Secretary of State website information on organization</li> <li>• Louisville Metro Government – check OMB monthly report filed in Council Financial Reports</li> <li>• Internal Revenue Service – most recent Form 990 included</li> </ul>		Y
<b>Separate Taxing Districts:</b> If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?		NA
<b>Small Cities:</b> Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)		NA
<b>Operating Requests:</b> Is recommended operating funding less than or equal to 33% of total operating budget?		NA
<b>IRS Exempt Proof:</b> Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?		Y
<b>Operating Budget:</b> Is the organization's current fiscal year operating budget included?		Y
<b>Ordinance Required:</b> Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.		N
<b>Board Members:</b> Is the entity's board member list (with term length/term limits) included?		Y
<b>Staff:</b> Is a list of the highest paid staff included with their expected annual personnel costs?		NA
<b>Annual Audit:</b> Is the most recent annual audit (if required by organization) included?		NA
<b>Rent Requests:</b> Is a copy of signed lease included?		NA
<b>Articles of Incorporation:</b> Are the Articles of Incorporation of the organization included?		Y
<b>IRS Form W-9:</b> Is the IRS Form W-9 included?		Y
<b>Evaluation Forms:</b> Are the evaluation forms (if program participants are given evaluation forms) included?		NA
<b>Affirmative Action:</b> Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?		NA
Prepared by: Brian Gregory Boles	Date: 12/3/14	