

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

Applicant/Program: Louisville Nature Center Nature Education

Executive Summary of Request:

The Louisville Nature Center's vision is to be the model steward and guardian of 70 acres, including Beargrass Creek State Nature Preserve. They value outdoor education, nature awareness and care of natural resources.

The funding from this grant will support Nature Education by providing salaries and benefits, utility costs and program materials.

The salary costs associated with this grant will be used to allow staff to develop new and updated program materials in accordance with new JCPS education guidelines.

Is this program/project a fundraiser?

Yes No

Is this applicant a faith based organization?

Yes No

Does this application include funding for sub-grantee(s)?

Yes No

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

10

District #


Council Member Signature

\$2,000⁰⁰
Amount

Sept 4, 2015
Date

Primary Sponsor Disclosure

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

Rob Holtzmann, board member of Louisville Nature Center, is Councilman Magre's insurance agent.

Approved by:

Appropriations Committee Chairman

Date

Clerk's Office Only:

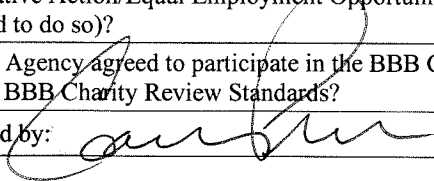
Request Amount: _____ Committee Amended Appropriation: _____

Original Appropriation: _____ Council Amended Appropriation: _____

**LOUISVILLE METRO COUNCIL
NEIGHBORHOOD DEVELOPMENT FUND APPLICATION CHECKLIST**

Legal Name of Applicant Organization: Louisville Nature Center

Program Name and Request Amount: Nature Education - \$25,000

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	<input type="checkbox"/> Yes
Is the funding proposed by Council Member(s) less than or equal to the request amount?	<input type="checkbox"/> Yes
Is the proposed public purpose of the program viable and well-documented?	<input type="checkbox"/> Yes
Will all of the funding go to programs specific to Louisville/Jefferson County?	<input type="checkbox"/> Yes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	<input type="checkbox"/> Yes
Has prior Metro Funds committed/granted been disclosed?	<input type="checkbox"/> Yes
Is the application properly signed and dated by authorized signatory?	<input type="checkbox"/> Yes
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	<input type="checkbox"/> Yes
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	<input type="checkbox"/> N/A
Is the entity in good standing with: <ul style="list-style-type: none"> • Kentucky Secretary of State? • Louisville Metro Revenue Commission? • Louisville Metro Government? • Internal Revenue Service? • Louisville Metro Human Relations Commission? 	<input type="checkbox"/> Yes
Is the current Fiscal Year Budget included?	<input type="checkbox"/> Yes
Is the entity's board member list (with term length/term limits) included?	<input type="checkbox"/> Yes
Is recommended funding less than 33% of total agency operating budget?	<input type="checkbox"/> N/A
Does the application budget reflect only the revenue and expenses of the project/program?	<input type="checkbox"/> Yes
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	<input type="checkbox"/> N/A
Is the most recent annual audit (if required by organization) included?	<input type="checkbox"/> N/A
Is a copy of Signed Lease (if rent costs are requested) included?	<input type="checkbox"/> N/A
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	<input type="checkbox"/> N/A
Are the Articles of Incorporation of the Agency included?	<input type="checkbox"/> Yes
Is the IRS Form W-9 included?	<input type="checkbox"/> Yes
Is the IRS Form 990 included?	<input type="checkbox"/> Yes
Are the evaluation forms (if program participants are given evaluation forms) included?	<input type="checkbox"/> N/A
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	<input type="checkbox"/> N/A
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	<input type="checkbox"/> No
Prepared by: 	Date: 8/17/15



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 - APPLICANT INFORMATION

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

Main Office Street & Mailing Address: 3745 Illinois Avenue, Louisville, KY 40213

Website: www.louisvillenaturecenter.org

Applicant Contact:	Kathy Morris	Title:	Director
Phone:	502-297-5096	Email:	kmorris@louisvillenaturecenter.org
Financial Contact:	Ellie Block	Title:	Bookkeeper
Phone:	502-458-1328	Email:	eblock@louisvillenaturecenter.org

Organization's Representative who attended NDF Training: Kathy Morris

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

Program Facility Location(s): 3745 Illinois Avenue, Louisville, KY 40213

Council District(s): 10 **Zip Code(s):** LNC serves all zip codes in Metro Louisville

SECTION 2 - PROGRAM REQUEST & FINANCIAL INFORMATION

PROGRAM/PROJECT NAME: Nature Education

Total Request: (\$) 25,000 **Total Metro Award (this program) in previous year: (\$)** 3,000

Purpose of Request (check all that apply):

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

The Following are Required Attachments:

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

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

Source:	na	Amount: (\$)
Source:		Amount: (\$)
Source:		Amount: (\$)

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

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



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

Louisville Nature Center's (LNC) vision is to be the model steward and guardian of 70 acres, including Beargrass Creek State Nature Preserve. The urban forest, along with the Louisville Nature Center education facility, will be the community's primary destination for discovering that nature begins in our own backyard where people and nature coexist.

Louisville Nature Center's values are:

- outdoor education is a means for connecting people to nature
- childhood outdoor education, presented as an extension of formal school programs, raises the status of nature awareness and promotes a lifelong quest for learning, discovery and stewardship of the natural world
- care of our natural resources creates a healthier planet
- every person can benefit mentally, physically, spiritually and emotionally from spending time in nature

Louisville Nature Center's mission is to provide nature education and encourage stewardship in an urban forest.

LNC follows its vision, values and mission in the following ways:

-Offered nature education programs to nearly 3,000 students from Jefferson County Public Schools, Archdiocese of Louisville, independent and home schools in the Metro Louisville area in 2014/2015 school year. All students from Title I schools attended programs at reduced rates or no charge and a portion of these students' bus fees were paid thanks to generous LNC supporters. A large portion of students were from under served schools and from minority groups. LNC held summer camps from June through early August and held nature themed birthday parties throughout the year.

LNC volunteers contributed over one thousand hours assisting with education programs, gardening, grounds and office work. Volunteers included six interns from Murray State, Bellarmine and University of Louisville who received college credit hours for volunteer service. Volunteers included senior citizens as well as teens who learned the value of giving back to the community. Adults with disabilities learned basic garden skills by planting the annual raised bed flower gardens.

LNC managed over 200 volunteers who completed over twenty-five hours of forest restoration work in Beargrass Creek State Nature Preserve, the 41 acre urban forest located adjacent to LNC.

LNC introduced, for the first time at the center, adult and youth programs designed to promote physical, spiritual and emotional health including yoga and meditation. The nature center provided Professional Development classes during the summer months for teachers from the Archdiocese of Louisville.

LNC held thirty-five adult education programs designed to promote good management of our natural resources, promoted water runoff solutions through the use of rain barrels and rain gardens and continues to expand the sensory garden designed for individuals with special needs -wheelchair accessibility, raised garden beds, etc. LNC is currently working with the Permaculture Guild to further enhance the LNC grounds to include sustainable ways to manage its ten acre grounds. A bee hive was installed to promote healthy bee activities and encourage bee pollinators within the community.



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.):

Louisville Nature Center (LNC) is centrally located for the convenience of residents in all areas of the city. Membership and program fees are affordable to ensure that all members of the community have access to LNC's services. The grounds, bird blind and preserve are open FREE to the public. This grant request is for operating funds to support the following programs and services offered at LNC:

- Free and/or reduced priced rentals for local non profit community groups
- Outdoor nature education programs for public and private schools
- Environmental education programs for adults
- Upkeep of LNC grounds with demonstration gardens - raised beds, rain gardens, butterfly garden, native plant gardens - and an indoor bird blind
- Site management for the 41 acre Beargrass Creek State Nature Preserve - trail maintenance, invasive species removal, monitoring of activities within the preserve
- Opportunities for volunteer service work for all ages from teen to senior citizen
- Opportunities for interns to earn college credit for hours worked
- Upkeep of an indoor visitor center with living native species
- This year, LNC delivered its first summer camp off site, at Chickasaw Park, under contract with Olmsted Conservancy. The camp was offered free to qualified applicants and the target market was children in zip codes in or near Chickasaw Park-40218,40212,40211,40216,40217,40214,40208,40210,40203, 40206.

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

Funding will be used to help pay for staff salaries, insurance premiums, utilities and telephone, program, office, grounds and facility supplies, marketing expenses, advertising and repair fees. \$9,000 of the grant request will be allocated as client assistance to cover school bus fees. A portion of the salary expense will be used to allow staff to develop new and updated program materials in accordance with new JCPS education guidelines.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

NA

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

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

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

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

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



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Adult and youths receive educational benefits by attending LNC nature programs. Students gain access to outdoor, hands-on education that compliments the approved JCPS school core content guidelines. Visitors benefit by visiting LNC's visitor center, grounds and nature preserve and viewing the local flora and fauna and demonstration gardens. The community has the opportunity to purchase earth friendly rain barrels at a discount rate. The community has access to a safe, well maintained 41 acre state nature preserve that offers opportunities for nature observation and exercise while hiking the trails. Individuals from youths to senior citizens have opportunities to exercise and learn through volunteer activities at LNC. Organizations and students earn credit for service hours worked at LNC, and interns earn college credit for time spent working at LNC. Individuals with physical or mental challenges have access to the sensory garden which is wheelchair accessible, and there are volunteer opportunities for these individuals in the raised beds.

LNC uses excel spreadsheets to track all activities. The spreadsheet tracks number of activities by type, number of attendees, number of under served schools attending nature education programs, age of students, number of free and reduced cost rentals for community non profits groups, hours spent on forest restoration activities and dollars donated to schools by LNC for bus and program fees. LNC is unable to track the hundreds of additional individuals who use the preserve each year and walk the grounds when the facility is closed.

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.

- Jefferson County Master Gardener Association receives free rental for their member activities and community programs in exchange for master gardener time spent working on LNC gardens.
- Kentucky Herpetological Society receives reduced priced rentals in exchange for LNC having an onsite native snake specimen.
- LNC is the site manager for Beargrass Creek State Nature Preserve. In exchange, LNC uses the preserve as its outdoor classroom for nature programs.
- LNC offer volunteer opportunities to UAW and United Parcel Service employees who plant trees and build rain barrels for LNC.
- Cultivating Connections provides media communications assistance in exchange for free rentals and rain barrels.
- Permaculture Guild offers advice and assistance with utilization of the LNC grounds for earth friendly garden methods in exchange for assistance in promoting their programs.
- LNC is a volunteer site every year for the Mayor's Give a Day week. Organizations and individuals from around the city have the opportunity to volunteer their time and talent during this week. LNC has also been a host site for the FFA for the past two years and again this year will host 160 youths who will spend two days volunteering to do invasive species removal and trail maintenance in the preserve.



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
A: Personnel Costs Including Benefits	\$9,000	\$18,541	\$27,541
B: Rent/Utilities	\$551	\$1,024	\$1,575
C: Office Supplies	\$796	\$0	\$796
D: Telephone	\$294	\$546	\$840
E: In-town Travel	0	0	0
F: Client Assistance (Attach Detailed List)	\$9,000	0	\$9,000
G: Professional Service Contracts	\$3,675	\$6,825	\$10,500
H: Program Materials	\$677	0	\$677
I: Community Events & Festivals (Attach Detail List)	0	0	0
J: Machinery & Equipment	0	0	0
K: Capital Project	0	0	0
L: Other Expenses (Attach Detail List)	\$1,007	\$1,870	\$2,877
*TOTAL PROGRAM/PROJECT FUNDS	\$25,000	\$28,806	\$53,806
% of Program Budget:	46 %	54 %	100%

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

Other State, Federal or Local Government	0
United Way	0
Private Contributions (do not include individual donor names)	\$8,506
Fees Collected from Program Participants	\$18,000
Other (please specify)	\$6,600
Total Revenue for Column 2 Expenses ***	\$33,106

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

**Must equal or exceed total in column 2.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Detail of In-Kind Contributions for this PROGRAM only: Includes Volunteers, Space, Utilities, etc. (Include anything not bought with cash revenues of the agency).

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Volunteer education assistants	\$4,860	60 programs x 3 volunteers x 3 hours x \$9/hr
Interns - program materials & research	\$1,800	2 interns x 100 hours x \$9/hr
<i>Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)</i>	\$6,660	

* 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: July 1, 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:

Decrease in donations due to one time donation in 2014 in the amount of \$56,000 from a board member from sell of one of his stocks. LNC is working toward finding new donations, such as this NDF grant, to fill the gap so the budget can remain the same as this year. If the \$25,000 grant is approved, LNC hopes to fill the additional \$31,000 in lost revenue with the increase in programs this grant will help create. The free buses will be an enticement for more schools to attend because it will reduce their total cost of bringing the schools to the outdoor classroom. LNC also plans to offer a new series of adult education programs that will bring in additional program revenue to help with the shortfall.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – CERTIFICATIONS & ASSURANCES

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

Standard Assurances

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

Standard Certifications

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

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

SECTION 7 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:	Kathy Morris <i>Kathy Morris</i>	Date:	7/23/2015
Legal Signatory: (please print):	Kathy Morris	Title:	Director
Phone:	502-297-5096	Extension:	na
		Email:	kmorris@louisvillenaturecenter.org

Addendum to budget for Louisville Nature Center NDF grant

Client Assistance:

To reimburse JCPS for 60 buses to come to LNC nature programs	\$9,000
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INTERNAL REVENUE SERVICE

District
Director

Date: MAR 26 1982

Louisville Nature Center Inc
PO Box 7414
Louisville, KY 40257-0414

-1 copy
Department of the Treasury

P.O. Box 2508
Cincinnati, OH 45201

Person to Contact:
Gordon Schur

Telephone Number:
513-684-3957

Refer Reply to:
EP/EO

Employer Identification Number:
[REDACTED]

Dear Sir or Madam:

This is in response to your request for a copy of your determination letter.

Our records indicate that by a determination letter issued in March, 1965 your organization was recognized as exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code of 1954. That letter is still in effect.

Based on information subsequently submitted, we classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Code because you are an organization described in section 509(a)(1) and 170(b)(1)(A)(vi).

The classification was based on the assumption that your operations would continue as stated in the application. If your sources of support, or your purposes, character, or method of operations have changed, please let us know so we can consider the effect of the change on your exempt status and foundation status.

As of January 1, 1984, you are liable for taxes under Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment, or other Federal taxes, please let us know.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

(2)

Louisville Nature Center Inc.

You are required to file Form 990, Return of Organization Exempt from Income Tax, only if your gross receipts each year are normally more than \$25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. The law imposes a penalty of \$10 a day, up to a maximum of \$5,000, when a return is filed late, unless there is reasonable cause for the delay.

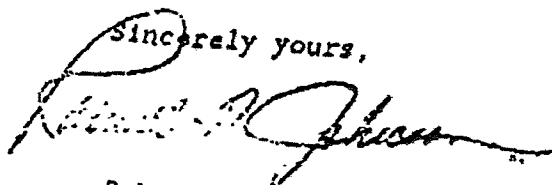
You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax you must file an income tax return on Form 990-T, Exempt Organization Business Income Return. In this letter, we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

Because this letter could help resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

If you have any questions, you may contact us at the address or telephone number shown in the heading of this letter.

This is an affirmation letter.

Sincerely yours,



Robert T. Johnson
District Director

	Last	First	Business/Professional Associations
Member	Bowling	Kevin	owner - Bowling Nursery
President	Christensen	Walt	owner - Backyard Birds
Member	Cotton	Russell	financial advisor - Raymond James Assoc
Member	Dorroh	Helen	member - Jefferson County Master Gardener Assoc
Member	Eason	Perri	professor - University of Louisville - Dept of Biology
Member	Eley	Mark	president - ID&A
Vice Pres	Fitzgerald	Phyllis	retired - active in numerous environmental endeavors
Secretary	Glauber	Pete	attorney - Boehl, Stopher, Graves, LLP
Treasurer	Jolly	Ron	Vice President - Republic Bank
Member	Luckett	Tom	I.T. Director - Louisville Metropolitan Sewer District
Member	Machtloff	Ken	retired - Humana Aviation Dept
Member	O'Bryan	Chris	finance - Thornton Oil
Member	Popp	Kenneth	grounds manager - Calvary Cemetery
Member	Reinhardt	Laura	area manager - Stock Yards Bank
			all are one year terms renewable in December

[]

10:03 AM
08/11/15
Cash Basis

Louisville Nature Center Balance Sheet 2014 As of July 31, 2015

	Jan 31, 15	Feb 28, 15	Mar 31, 15	Apr 30, 15	May 31, 15	Jun 30, 15	Jul 31, 15
ASSETS							
Current Assets							
Checking/Savings							
100005 · Total SYB Checking							
1000052 · SYB Regular Checking	-1,257.18	-5,762.38	-3,297.05	11,209.13	14,419.68	17,077.87	867.90
1000051 · SYB Temp. Restricted Checking	26,147.99	25,987.99	24,730.99	20,557.54	16,951.19	18,551.19	18,813.51
100005 · Total SYB Checking - Other	0.00	0.00	0.00	0.00	0.00	-1,599.38	-1,599.38
Total 100005 · Total SYB Checking	24,890.81	20,225.61	21,433.94	31,766.67	31,370.87	34,029.68	18,082.03
100002 · SYB -Charitable Gaming Acct	60.62	60.62	60.62	60.62	60.62	60.00	60.00
111100 · Petty Cash	100.00	100.00	100.00	100.00	100.00	100.00	100.00
Total Checking/Savings	25,051.43	20,386.23	21,594.56	31,927.29	31,531.49	34,189.68	18,242.03
Other Current Assets							
118999 · Invested Cash Accts							
18000 · Marketable Securities	10,950.83	10,950.83	11,228.75	11,181.36	11,267.40	11,134.46	11,134.46
119000 · CDs	15,730.41	15,730.41	15,730.41	15,730.41	15,730.41	15,730.41	15,730.41
Total 118999 · Invested Cash Accts	26,681.24	26,681.24	26,959.16	26,911.77	26,997.81	26,864.87	26,864.87
Total Other Current Assets	26,681.24	26,681.24	26,959.16	26,911.77	26,997.81	26,864.87	26,864.87
Total Current Assets	51,732.67	47,067.47	48,553.72	58,839.06	58,529.30	61,054.55	45,106.90
Fixed Assets							
190010 · Buildings	423,137.67	423,137.67	423,137.67	423,137.67	423,137.67	423,137.67	423,137.67
15000 · Furniture and Equipment	66,299.58	66,299.58	66,299.58	66,299.58	66,299.58	66,299.58	66,299.58
190030 · Accumulated Depreciation	-201,826.95	-201,826.95	-201,826.95	-201,826.95	-201,826.95	-201,826.95	-201,826.95
Total Fixed Assets	287,610.30	287,610.30	287,610.30	287,610.30	287,610.30	287,610.30	287,610.30
Other Assets							
18700 · Security Deposits Asset	395.00	395.00	395.00	395.00	395.00	395.00	395.00
Total Other Assets	395.00	395.00	395.00	395.00	395.00	395.00	395.00
TOTAL ASSETS	339,737.97	335,072.77	336,559.02	346,844.36	346,534.60	349,059.85	333,112.20
LIABILITIES & EQUITY							
Liabilities							
Current Liabilities							
Other Current Liabilities							
2110 · Direct Deposit Liabilities	0.00	0.00	0.00	-1,233.83	0.00	0.00	0.00
224100 · Deficit Payable	4,903.31	4,903.31	4,903.31	4,903.31	2,451.85	595.85	0.00
24000 · Payroll Liabilities							
24010 · Soc.Sec.-EE	211.53	225.52	299.40	297.24	401.43	437.37	802.38
24011 · Soc.Sec.-ER	211.53	225.52	299.40	297.24	401.43	437.37	802.38
24012 · Medicare-EE	49.47	52.74	70.03	69.50	93.89	102.30	187.66
24013 · Medicare-ER	49.47	52.74	70.03	69.50	93.89	102.30	187.66
24008 · Federal W/H Taxes	163.00	199.00	261.00	285.00	410.00	419.00	800.00
24009 · Fed. Unempl. Ins.	20.47	42.31	71.27	28.77	62.31	86.24	56.28
24003 · KY W/H Tax	65.95	78.39	112.76	99.91	127.25	192.35	463.47
24004 · KY SUJ	117.05	246.74	415.74	167.80	394.41	641.32	393.01
24005 · KY UI Surcharge	7.16	14.80	24.95	10.06	23.65	38.47	23.59
24001 · Lou Metro Resident W/H	36.24	77.76	143.78	57.71	130.83	232.65	191.44
24002 · Lou Metro Non-Res W/H	25.59	50.98	77.48	31.49	77.17	112.34	61.45

10:03 AM

08/11/15

Cash Basis

Louisville Nature Center
Balance Sheet 2014
 As of July 31, 2015

	Jan 31, 15	Feb 28, 15	Mar 31, 15	Apr 30, 15	May 31, 15	Jun 30, 15	Jul 31, 15
24006 - Indiana W/H Tax	35.95	35.48	38.02	49.39	69.71	49.20	56.10
24007 - IN-Clark Co. Tax	15.79	15.59	16.70	21.69	30.61	21.61	24.63
Total 24000 - Payroll Liabilities	1,009.20	1,317.57	1,900.56	1,485.30	2,316.58	2,872.52	4,050.05
25500 - Sales Tax Payable	0.00	0.00	0.00	-48.33	-48.33	826.23	-30.00
Total Other Current Liabilities	5,912.51	6,220.88	6,803.87	5,106.45	4,720.10	4,294.60	4,020.05
Total Current Liabilities	5,912.51	6,220.88	6,803.87	5,106.45	4,720.10	4,294.60	4,020.05
Total Liabilities	5,912.51	6,220.88	6,803.87	5,106.45	4,720.10	4,294.60	4,020.05
Equity							
30000 - Opening Balance Equity	1,749.36	1,749.36	1,749.36	1,749.36	1,749.36	1,749.36	1,749.36
31300 - Perm. Restricted Net Assets	25,550.00	25,550.00	25,550.00	25,550.00	25,550.00	25,550.00	25,550.00
31500 - Temp. Restricted Net Assets	3,345.20	3,345.20	3,345.20	3,345.20	3,345.20	3,345.20	3,345.20
32000 - Unrestricted Net Assets	303,584.13	303,584.13	303,584.13	303,584.13	303,584.13	303,584.13	303,584.13
Net Income	-403.23	-5,376.80	-4,473.54	7,509.22	7,585.81	10,536.56	-5,136.54
Total Equity	333,825.46	328,851.89	329,755.15	341,737.91	341,814.50	344,765.25	329,092.15
TOTAL LIABILITIES & EQUITY	339,737.97	335,072.77	336,559.02	346,844.36	346,534.60	349,059.85	333,112.20

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization LOUISVILLE NATURE CENTER, INC.	D Employer identification number [REDACTED]
	Doing business as	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 3745 ILLINOIS AVENUE	E Telephone number 502-458-1328
	City or town, state or province, country, and ZIP or foreign postal code LOUISVILLE, KY 40213	G Gross receipts \$ 201,562.
	F Name and address of principal officer: WALT CHRISTENSEN SAME AS C ABOVE	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ **WWW.LOUISVILLENATURECENTER.ORG**

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: **1965** **M** State of legal domicile: **KY**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROVIDE NATURE EDUCATION AND ENCOURAGE STEWARDSHIP IN AN URBAN FOREST.
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3 Number of voting members of the governing body (Part VI, line 1a) 3 15
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 15
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 10
	6 Total number of volunteers (estimate if necessary) 6 65
	7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b 0.
Revenue	8 Contributions and grants (Part VIII, line 1h) 86,038. 130,300.
	9 Program service revenue (Part VIII, line 2g) 53,877. 32,934.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0. 665.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 9,236. 26,597.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 149,151. 190,496.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0.
	14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 46,102. 38,003.
	16 a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) 15,442.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 111,388. 123,383.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 157,490. 161,386.
	19 Revenue less expenses. Subtract line 18 from line 12 -8,339. 29,110.
Net Assets or Fund Balances	20 Total assets (Part X, line 16) 295,005. 316,102.
	21 Total liabilities (Part X, line 26) 14,716. 6,703.
	22 Net assets or fund balances. Subtract line 21 from line 20 280,289. 309,399.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer WALT CHRISTENSEN, PRESIDENT	Date			
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name BARBARA A. LASKY	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN [REDACTED]
	Firm's name ANDERSON, BRYANT, LASKY & WINSLOW, PSC	Firm's address 943 SOUTH FIRST STREET LOUISVILLE, KY 40203			

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: TO PROVIDE NATURE EDUCATION AND ENCOURAGE STEWARDSHIP IN AN URBAN FOREST.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 30,000. including grants of \$) (Revenue \$ 15,572.) SUMMER CAMPS FOR KIDS AGES 4 THROUGH 12 TO PROVIDE NATURE AND CONSERVATION PROGRAMS. 190 PARTICIPANTS OVER 43 DAYS DID THE FOLLOWING ACTIVITIES: TRACK EM, BUG HUNTERS, HARRY POTTER, MY HOME, BUGS AND SLUGS, AND WILD ABOUT ARTS.

4b (Code:) (Expenses \$ 30,000. including grants of \$) (Revenue \$ 17,946.) EDUCATIONAL PROGRAMS FOR ELEMENTARY SCHOOL STUDENTS PROVIDES EDUCATIONAL PROGRAMS FOR ELEMENTARY SCHOOL STUDENTS. THE NATURE EDUCATION PROGRAMS ARE ALIGNED WITH CORE CONTENT ELEMENTARY SCHOOL GUIDELINES AND SERVE AS AN OUTDOOR SUPPLEMENT TO IN-SCHOOL CURRICULUM. 74 PROGRAMS FOR STUDENTS FROM PUBLIC AND PRIVATE SCHOOLS AND HOME SCHOOL GROUPS. 2,582 STUDENTS ATTENDED. PARTICIPANTS ARE PRE-K THROUGH MIDDLE SCHOOL, 50/50 MALE TO FEMALE RATIO.

4c (Code:) (Expenses \$ 30,000. including grants of \$) (Revenue \$ 0.) INTERNSHIPS AND VOLUNTEERS OVER 300 HUNDRED VOLUNTEERS RECEIVED OPPORTUNITIES TO EARN A TOTAL OF SEVERAL THOUSAND COMMUNITY SERVICES HOURS AS WELL AS RECEIVE EDUCATIONAL GUIDANCE ON THE VALUE OF URBAN FOREST AND ENVIRONMENTAL AWARENESS. IMPROVEMENTS TO THE NATURE CENTER INCLUDED FOREST MAINTENANCE, GARDEN MAINTENANCE AND UPDATES, BUILDING AND GROUNDS ENHANCEMENTS, CLEANING AND REPAIRS, ASSISTANCE WITH EVENTS AND PROGRAM ASSISTANCE. THE OBJECTIVE FOR VOLUNTEERS AND INTERNS IS TO ADDRESS THE NEEDS OF LOUISVILLE NATURE CENTER AND OFFER SERVICE HOURS AND EDUCATIONAL OPPORTUNITIES FOR VOLUNTEERS. INTERNS ALSO EARN COLLEGE CREDIT FOR HOURS WORKED AT THE NATURE CENTER.

4d Other program services (Describe in Schedule O.) (Expenses \$ 30,591. including grants of \$) (Revenue \$ 6,410.)

4e Total program service expenses 120,591.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b <i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i>		

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a	a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b	b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b	b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	15	
b	Enter the number of voting members included in line 1a, above, who are independent	15	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6	Did the organization have members or stockholders?	6	X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	X
b	Each committee with authority to act on behalf of the governing body?	8b	X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	
13	Did the organization have a written whistleblower policy?	13	X
14	Did the organization have a written document retention and destruction policy?	14	X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	X
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b	X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **KY**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: **COMPANY - 502-458-1328**
3745 ILLINOIS AVENUE, LOUISVILLE, KY 40213

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CHARLIE MARSH BOARD MEMBER	1.00	X					0.	0.	0.	
(2) ROB HOLTZMAN VICE PRESIDENT	1.00	X		X			0.	0.	0.	
(3) RON JOLLY TREASURER	1.00	X		X			0.	0.	0.	
(4) PHYLLIS FITZGERALD SECRETARY	1.00	X		X			0.	0.	0.	
(5) KEVIN BOWLING BOARD MEMBER	1.00	X					0.	0.	0.	
(6) WALT CHRISTENSEN PRESIDENT	2.00	X		X			0.	0.	0.	
(7) RUSSELL COTTON BOARD MEMBER	1.00	X					0.	0.	0.	
(8) PERRI EASON BOARD MEMBER	1.00	X					0.	0.	0.	
(9) MARK ELEY BOARD MEMBER	1.00	X					0.	0.	0.	
(10) PETE GLAUBER BOARD MEMBER	1.00	X					0.	0.	0.	
(11) KEN MACHTOLFF BOARD MEMBER	1.00	X					0.	0.	0.	
(12) CHRIS O'BRYAN BOARD MEMBER	1.00	X					0.	0.	0.	
(13) KENNY POPP BOARD MEMBER	1.00	X					0.	0.	0.	
(14) LAURA REINHARDT BOARD MEMBER	1.00	X					0.	0.	0.	
(15) HELEN DORROH BOARD MEMBER	1.00	X					0.	0.	0.	
(16) KATHY MORRIS DIRECTOR	40.00			X			37,498.	0.	0.	



Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total							37,498.	0.	0.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							37,498.	0.	0.	

- 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**
- | | Yes | No |
|---|-----|----|
| 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | | X |
| 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> | | X |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> | | X |

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		0



Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	7,100.				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	123,200.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			130,300.			
Program Service Revenue	2 a FEE BASED EDUCATIONAL	Business Code 611110	32,934.	32,934.			
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			32,934.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		665.			665.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a		30,669.			
		b Less: direct expenses		11,066.			
		c Net income or (loss) from fundraising events			19,603.		19,603.
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses							
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a MISCELLANEOUS		900099	6,994.	6,994.			
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			6,994.			
12 Total revenue. See instructions.			190,496.	39,928.	0.	20,268.	



Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	34,193.	25,645.	5,129.	3,419.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	3,810.	2,857.	572.	381.
11 Fees for services (non-employees):				
a Management	37,498.	28,123.	5,625.	3,750.
b Legal				
c Accounting	1,068.		1,068.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	7,283.	5,817.	1,328.	138.
12 Advertising and promotion	236.	177.	35.	24.
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	865.	648.	130.	87.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	609.	457.	91.	61.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	14,558.	10,918.	2,184.	1,456.
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a TEMPORARY STAFFING	31,302.	23,477.	4,695.	3,130.
b SUPPLIES	12,069.	9,051.	1,811.	1,207.
c INSURANCE	4,927.	3,695.	739.	493.
d UTILITIES	4,226.	3,169.	634.	423.
e All other expenses	8,742.	6,557.	1,312.	873.
25 Total functional expenses. Add lines 1 through 24e	161,386.	120,591.	25,353.	15,442.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	36,296.	1	52,926.	
	2 Savings and temporary cash investments		2		
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net		4		
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges		9		
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 515,224.			
	b Less: accumulated depreciation	10b 252,443.	258,314.	10c	262,781.
	11 Investments - publicly traded securities		11		
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11		395.	15	395.
16 Total assets. Add lines 1 through 15 (must equal line 34)		295,005.	16	316,102.	
Liabilities	17 Accounts payable and accrued expenses	34.	17	6,703.	
	18 Grants payable		18		
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		14,682.	25	0.
	26 Total liabilities. Add lines 17 through 25		14,716.	26	6,703.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets		280,289.	27	309,399.
	28 Temporarily restricted net assets			28	
	29 Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds			30	
	31 Paid-in or capital surplus, or land, building, or equipment fund			31	
	32 Retained earnings, endowment, accumulated income, or other funds			32	
33 Total net assets or fund balances		280,289.	33	309,399.	
34 Total liabilities and net assets/fund balances		295,005.	34	316,102.	



Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	190,496.
2	Total expenses (must equal Part IX, column (A), line 25)	2	161,386.
3	Revenue less expenses. Subtract line 2 from line 1	3	29,110.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	280,289.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	309,399.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2014)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization **LOUISVILLE NATURE CENTER, INC.** Employer identification number [REDACTED]

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see Instructions)	(vi) Amount of other support (see Instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		▶ <input type="checkbox"/>
b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		▶ <input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		▶ <input type="checkbox"/>
b 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		▶ <input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		▶ <input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	54,879.	54,742.	57,573.	95,106.	130,300.	392,600.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	72,907.	28,590.	90,488.	53,878.	70,597.	316,460.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	127,786.	83,332.	148,061.	148,984.	200,897.	709,060.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b						0.
8 Public support. (Subtract line 7c from line 6.)						709,060.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6	127,786.	83,332.	148,061.	148,984.	200,897.	709,060.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4.	2.	738.	167.	665.	1,576.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	4.	2.	738.	167.	665.	1,576.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	127,790.	83,334.	148,799.	149,151.	201,562.	710,636.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	99.78 %
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	99.65 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	.22 %
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	.35 %

19a 33 1/3% support tests - 2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer (b) below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):

a The organization satisfied the Activities Test. Complete **line 2** below.

b The organization is the parent of each of its supported organizations. Complete **line 3** below.

c The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

2 Activities Test. **Answer (a) and (b) below.**

	Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		

3 Parent of Supported Organizations. **Answer (a) and (b) below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

Lined area for supplemental information.

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Name of the organization

LOUISVILLE NATURE CENTER, INC.

Employer identification number

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization LOUISVILLE NATURE CENTER, INC.	Employer identification number 61-0030061
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<p>CHARLIE MARSH</p> <p>██</p> <p>LOUISVILLE, KY 40207</p>	\$ <u>65,278.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<p>BURTON D MORGAN FOUNDATION</p> <p>22 AURORA ST.</p> <p>HUDSON, OH 44236</p>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<p>ALEX RAITZ</p> <p>██</p> <p>SAN FRANCISCO, CA 94118</p>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

LOUISVILLE NATURE CENTER, INC.

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization LOUISVILLE NATURE CENTER, INC.	Employer identification number 6 [REDACTED]
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014
Open to Public Inspection

Name of the organization

LOUISVILLE NATURE CENTER, INC.

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included in Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Temporarily restricted endowment _____ %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations		
(ii) related organizations		
3b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		448,064.	187,901.	260,163.
c Leasehold improvements				
d Equipment		67,160.	64,542.	2,618.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 262,781.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions. Total revenue is reported on line 5.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions. Total expenses are reported on line 5.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Multiple horizontal lines provided for entering supplemental information.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2014

Open to Public Inspection

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

LOUISVILLE NATURE CENTER, INC.

Employer identification number

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			

Total ▶

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2014

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		RAIN BARREL SALES (event type)	EVENT (event type)	NONE (total number)	
Revenue	1 Gross receipts	5,045.	25,624.		30,669.
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	5,045.	25,624.		30,669.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages		1,427.		1,427.
	8 Entertainment		300.		300.
	9 Other direct expenses	1,249.	5,090.		6,339.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				8,066.
	11 Net income summary. Subtract line 10 from line 3, column (d)				22,603.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

- 13 Indicate the percentage of gaming activity conducted in:

13a		%
13b		%

 - a The organization's facility
 - b An outside facility

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

- 16 Gaming manager information:
 - Name ▶ _____
 - Gaming manager compensation ▶ \$ _____
 - Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).



Part IV Supplemental Information (continued)

Lined area for supplemental information

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

LOUISVILLE NATURE CENTER, INC.

Employer identification number

6 [REDACTED]

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

THERE WERE 8 UNIVERSITY INTERNS WHO EARNED 800 VOLUNTEER HOURS AND
NEARLY 24 UNIVERSITY CREDIT HOURS. EAGLE SCOUTS, SENIOR CITIZENS, TEEN
GROUPS, MASTER GARDENERS, ADULTS WITH PHYSICAL AND MENTAL DISABILITIES
AND OTHERS VOLUNTEERED AT THE NATURE CENTER AND COMPLETED OVER 3,000
SERVICE HOURS FOR HELPING WITH MAINTENANCE, FOREST RESTORATION,
GARDENING AND OTHER PROJECTS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

ADULT, FAMILY, AND COMMUNITY NATURE PROGRAMS
EXPENSES \$ 30,591. INCLUDING GRANTS OF \$ 0. REVENUE \$ 6,410.

FORM 990, PART VI, SECTION B, LINE 11:

DISCUSSION AT BOARD MEETINGS AND UPON REQUEST.

FORM 990, PART VI, SECTION B, LINE 12C:

MONITORS AT BOARD MEETING DISCUSSIONS

FORM 990, PART VI, SECTION B, LINE 15A:

THE BOARD DISCUSSES

FORM 990, PART VI, SECTION C, LINE 18:

FORM 990 IS AVAILABLE UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL

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

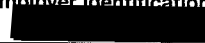
Schedule O (Form 990 or 990-EZ) (2014)

432211
08-27-14

Name of the organization

LOUISVILLE NATURE CENTER, INC.

Employer identification number



STATEMENTS ARE AVAILABLE BY REQUEST TO ANY MEMBER OF THE PUBLIC WHO SO REQUESTS.

Multiple horizontal lines for providing statements.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number

Type or print	Name of exempt organization or other filer, see instructions. LOUISVILLE NATURE CENTER, INC.	Employer identification number (EIN) or <div style="background-color: black; width: 100px; height: 15px;"></div>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 3745 ILLINOIS AVENUE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOUISVILLE, KY 40213	

Enter the Return code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

COMPANY

• The books are in the care of ▶ **3745 ILLINOIS AVENUE - LOUISVILLE, KY 40213**

Telephone No. ▶ **502-458-1328** Fax No. ▶ _____

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2015**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2014** or
▶ tax year beginning _____, and ending _____

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

**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) Louisville Nature Center, Inc.	
	Business name, if different from above Louisville Nature Center	
	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"/> Other (see instructions) ▶	
	<input checked="" type="checkbox"/> Exempt payee	
	Address (number, street, and apt. or suite no.) 3745 Illinois Ave	
City, state, and ZIP code Louisville KY 40213-1017		
List account number(s) here (optional)		Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is 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 : : : : : : :

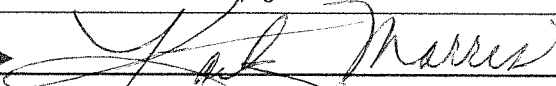
Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

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 ▶ <u>8-10-15</u>
------------------	--	-----------------------

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,

Louisville Nature Center - Permanent Part Time Staff

Kathy Morris
Ellie Block
Jessica Wheatley
Judy Gardner
Rosemary Bauman
Cathy Neeley
Kerry Jones
Joan Shanahan
Beth Hensley

Louisville Nature Center

2014/2015 school program schedule

<u>Program</u> <u>Date</u>	<u>School</u> <u>Name</u>	<u>School</u> <u>Zip Code</u>	<u>School</u> <u>Type</u>	<u>Title I</u>	<u>Number</u> <u>Participants</u>
5/13/15	Holy Spirit	40206	Arch		45
4/28/15	Our Lady of Lourdes	40207	ARCH		52
5/4/15	St Gabriel school	40291	ARCH		42
5/5/15	St Gabriel school	40291	ARCH		42
10/20/14	St Nicholas	40214	ARCH	Yes	34
5/14/15	St Nicholas	40214	ARCH	Yes	29
Archdiocese Ttl					244
10/17/14	Homeschool	various	HS		
11/20/14	Homeschool	various	HS		4
12/19/14	Homeschool	various	HS		5
6/4/15	Homeschool	various	HS		
10/10/14	Homeschool	various	HS		5
11/14/14	Homeschool	various	HS		6
12/12/14	Homeschool	various	HS		5
1/9/15	Homeschool	various	HS		5
2/13/15	Homeschool	various	HS		4
3/13/15	Homeschool	various	HS		5
	Homeschool	various	HS		5
5/8/15	Homeschool	various	HS		5
Homeschool Ttl					49
9/23/14	Hayfield Montessori	40205	IN		25
2/4/15	Hayfield Montessori	40205	IN		
10/15/14	KCD	40241	IN		58
4/21/15	Louisville Classical Academy	40205	IN		16
10/14/14	Meredith Dunn School	40220	IN		28
2/27/15	Montessori School of Louisville	40241	IN		
2/27/15	Montessori School of Louisville	40241	IN		
3/13/15	Our Savior Lutheran School	40222	IN		29
4/23/15	Rock Creek Community Acader	47172	IN		41
5/11/15	Second Presbetarian	40207	IN		
5/11/15	Second Presbetarian	40207	IN		
Independent Ttl					197

4/22/15 Academy at Shawnee	40212 JCPS	Yes	54
10/24/14 Audubon Elementary	40217 JCPS		48
10/24/14 Audubon Elementary	40217 JCPS		48
3/3/15 Blue Lick Elementary	40299 JCPS	Yes	56
3/3/15 Blue Lick Elementary	40299 JCPS	Yes	28
4/2/15 Camp Taylor Elem	40213 JCPS	Yes	25
4/14/15 Camp Taylor Elem	40213 JCPS	Yes	46
4/16/15 Camp Taylor Elem	40213 JCPS	Yes	33
3/27/15 Carter Traditional Elementary	40211 JCPS		47
3/27/15 Carter Traditional Elementary	40211 JCPS		48
6/1/15 Chenoweth Elementary	40207 JCPS		24
6/1/15 Chenoweth Elementary	40207 JCPS		49
9/18/14 Coleridge-Taylor	40203 JCPS		48
9/18/14 Coleridge-Taylor	40203 JCPS		42
2/26/15 Crums Lane Elementary	40216 JCPS	Yes	39
2/26/15 Crums Lane Elementary	40216 JCPS	Yes	40
3/18/15 Crums Lane Elementary	40216 JCPS	Yes	41
3/18/15 Crums Lane Elementary	40216 JCPS	Yes	36
5/6/15 Dunn Elementary	40207 JCPS		48
5/7/15 Dunn Elementary	40207 JCPS		48
9/26/14 Eisenhower Elementary	40258 JCPS		40
10/1/14 Eisenhower Elementary	40258 JCPS		25
11/19/14 Eisenhower Elementary	40258 JCPS		48
11/20/14 Eisenhower Elementary	40258 JCPS		48
10/22/14 Engelhard Elementary	40203 JCPS	Yes	59
2/25/15 Engelhard Elementary	40203 JCPS	Yes	35
3/2/15 Engelhard Elementary	40203 JCPS	Yes	60
3/2/15 Engelhard Elementary	40203 JCPS	Yes	60
4/15/15 Engelhard Elementary	40203 JCPS	Yes	58
4/29/15 Fraysere Elementary	40215 JCPS	Yes	60
2/11/15 Gilmore Lane Elementary	40213 JCPS	Yes	50
5/26/15 Greenwood Elementary	40258 JCPS	Yes	50
5/27/15 Greenwood Elementary	40258 JCPS	Yes	50
10/22/14 Jacob Elementary	40215 JCPS	Yes	60
10/23/14 Jacob Elementary	40215 JCPS	Yes	60
10/10/14 Kerrick El (K)	40216 JCPS	Yes	50
11/14/14 Portland Elementary	40212 JCPS		40

5/8/15 Portland Elementary	40212 JCPS	Yes	58
5/15/15 Portland Elementary	40212 JCPS	Yes	50
5/22/15 Portland Elementary	40212 JCPS	Yes	64
9/25/14 Price Elementary	40218 JCPS	Yes	47
9/25/14 Price Elementary	40218 JCPS	Yes	47
3/20/15 Trunnell Elementary School	40214 JCPS		30
3/20/15 Trunnell Elementary School	40214 JCPS		30
3/30/15 Trunnell Elementary School	40214 JCPS		30
3/30/15 Trunnell Elementary School	40214 JCPS		30
9/12/14 Wilder Elementary	40222 JCPS	Yes	50
9/12/14 Wilder Elementary	40222 JCPS	Yes	50
10/8/14 Wilder Elementary	40222 JCPS	Yes	50
10/9/14 Wilder Elementary	40222 JCPS	Yes	50
11/7/14 Wilder Elementary	40222 JCPS	Yes	50
11/7/14 Wilder Elementary	40222 JCPS	Yes	50

JCPS Total			2387
TOTAL SCHOOLS			2877



Mt. Paul Camp

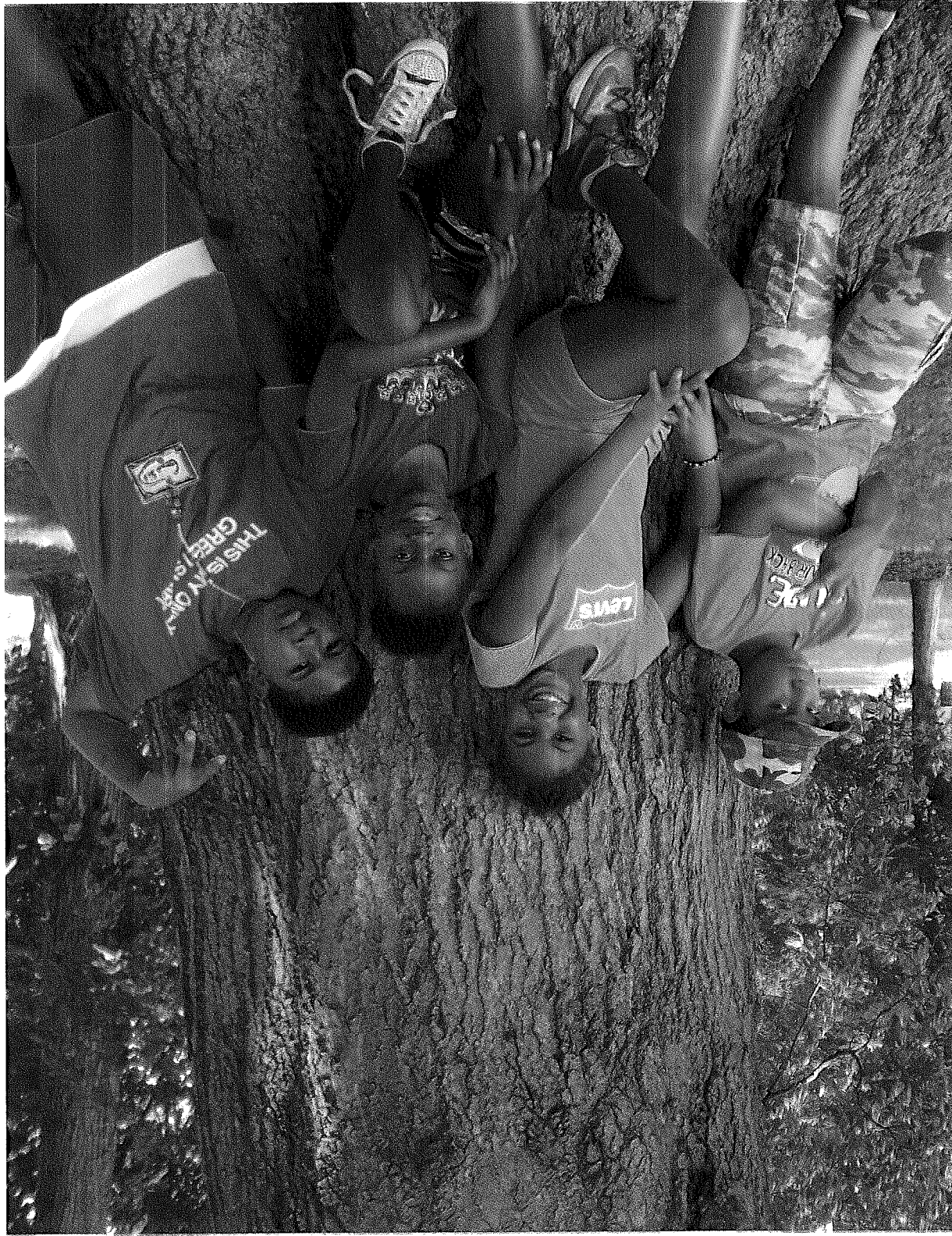


Metro Park Camp



Chickasaw Park - Olmsted Company





Chickasaw
Park -
Amstel
Conservation

Chickasaw Park - Olmsted Conservancy



ERIC KASPER / VISUAL PICTURES



Park-It Camp 10-12 Evaluation

July 20-24, 2015

9:00am – 4:00 pm

Evaluation

Your response to this evaluation form is extremely important to us. The information you provide will be used to improve our summer camps. Please take a few moments to fill out this form and return it to us. We appreciate your input. Thank you, LNC staff.

How did you learn about this camp?

- Email () Other _____
() Flyer () Website
() Word of mouth () Newspaper

Was the content what you expected? Why or why not?

no. It was better than I expected

What activities did your child enjoy the most?

bat + moth

What activities did your child enjoy the least?

Journal writing

Is there anything you feel should be changed?

no

How would you rate overall quality of this camp?

- 1 Poor
2 Below average
3 Average
④ Above average
5 Excellent

Would you recommend this camp to someone else? Why or why not?

Yes because the workers knowledge of nature captured the creative and curiosity of natures trees plant animals and insects i

What other program topic(s) would interest your child?

- () birding
() geology
() other wilderness survival

my ~~child~~
child

Please return this form to the Park-It Camp staff, email it to lgardner@louisvillenaturecenter.org or fax it to us at 458-0232

Park-It Camp 10-12 Evaluation

July 20-24, 2015

9:00am – 4:00 pm

Evaluation

Your response to this evaluation form is extremely important to us. The information you provide will be used to improve our summer camps. Please take a few moments to fill out this form and return it to us. We appreciate your input. Thank you, LNC staff.

How did you learn about this camp?

- Email Other _____
 Flyer Website
 Word of mouth Newspaper

Was the content what you expected? Why or why not?

Yes - outdoors camp / park where kids will be learning about nature.

What activities did your child enjoy the most?

All activities!

What activities did your child enjoy the least?

N/A

Is there anything you feel should be changed?

Time -- early drop-off for parents who have to beat work by 8:00 a.m.

How would you rate overall quality of this camp?

- | | |
|------------------------------------|---------------|
| 1 | Poor |
| 2 | Below average |
| 3 | Average |
| 4 | Above average |
| <input checked="" type="radio"/> 5 | Excellent |

Would you recommend this camp to someone else? Why or why not?

Yes - knowledgeable camp giving kids useful nature knowledge.

What other program topic(s) would interest your child?

- birding
 geology
 other map + campus

Please return this form to the Park-It Camp staff, email it to gardner@louisvillenaturecenter.org or fax it to us at 458-0232

Anita M. Spencer
[REDACTED]
Louisville, KY 40211
[REDACTED]
[REDACTED]

June 3, 2015

Louisville Nature Center
3745 Illinois Avenue
Louisville, KY 40213

Dear Sir or Madam,

I understand that you are considering Kelden Abernathy as a participant in the Park It Camp. Over the last two years, I have had the pleasure of getting to know Mr. Kelden Abernathy while teaching the 4th-5th grade Bible Class at the West End Church of Christ. I have had the pleasure of teaching at least 2-3 quarters of the 4th-5th grade Bible class with Kelden as a student. It has also been a pleasure to worship with Kelden and his family.

I find that Kelden is very knowledgeable and has a thirst to learn more on just about *any* topic. He does enjoy nature and science. And he is not afraid of creepy-crawlies! Kelden is what I would refer to as a very sharp and quick witted individual. I love that about him! I was very pleased to learn that it is his goal to one day be a scientist! He and I even purchased the same book and read it at the same time (comparing/discussing the book as we read and as the plot unfolded). He was courteous enough to allow me to finish the book first!

Kelden is interested in the nature camp. And, he would welcome the opportunity to share in teamwork as he works with the team and grows his love for the Parks. I believe that Kelden would be an asset to the Park It Camp.

It is my recommendation that Kelden be selected as a participant in the Park It Camp.

I appreciate your time in considering this letter. If you need additional information or have questions, please do not hesitate to contact me at the address or phone number listed above.

Cordially,

Anita M. Spencer

Anita M. Spencer
Member and Teacher
West End Church of Christ

Dear Nature Lover!

In the space below please write

- 1) What you love about nature and
- 2) tell why you want to come to the Park-it camp

You may add a picture if you would like
Please send this in with your application.

Why I would like to go this camp is because I love nature. Somethings that I like about nature are the animals that live in it. My favourite animal is the lynx it is like a cat but it's hearing is better. What I also like about nature are the bugs when I grow up I would like to studie bugs. I love nature and I would like to learn more about it. Once I had a pet caterillar named Wormy when I was young. It finally turned into a butterfly it was a very very very colorful one. So I let it go and I thought if I would ever see him again.



Deborah Barnes-Byers
[REDACTED]
Louisville, Kentucky 40212
[REDACTED]

To Whom It May Concern:


I write this recommendation letter on behalf of Kevin Walker. I have known Kevin all of his life. We both are members of Mount Olive Missionary Baptist Church. Kevin is an active youth missionary worker in our church and is a member of many youth groups. Kevin is kind and a compassionate missionary and is always willing to help in any way he can.

Kevin would be a great candidate for the Park-It Camp because he is such a lover of nature. His two favorite places are the library, where he is always checking out books about animals and the zoo where he can get up close and personal to nature.

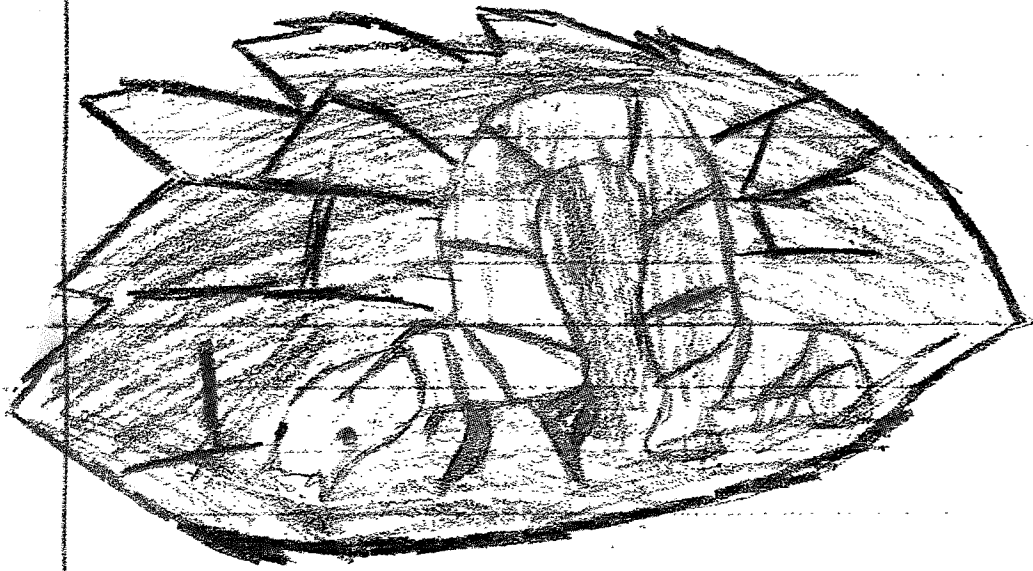
Kevin is a very well- behaved kid, one that I believe you would enjoy having in your camp.

If you have any questions, please feel free to call me.

Sincerely,



Deborah Barnes-Byers



Kevin Walker

Kevin Walker

June 5, 2015

Why I Want to Come to Park-It Camp

My name is Kevin Walker, II and I am 11 years old. The reason I want to come to Park-It Camp is because it is a nature camp and I love nature. Nature is all around us. Sometimes nature is beautiful with its wonderful creatures and plants, but nature can also be gross, with its icky creatures and plant too.

Some people just want to know and learn about the beautiful, nice, stuff in nature, but I want to learn and know about everything, even the gross stuff because I think all of nature is awesome! I also like to study animals and plants at home. I watch nature documentaries and read all kinds of nature and animals books.

When my parents told me about Park-It Camp, I was very excited and wanted this camp to be all summer! I just know I would have such a great time here.

P.S. I hope you enjoy the picture that I drew of a caterpillar on a leaf.

Sincerely,

Kevin Walker, II

Park-It Camp 10-12 July 20-24, 2015

Number applications received- 11

Number attending 9

M- 8

F- 3

Ages

10- 4

11- 3

12- 4

Zip codes – 40216-1, 40211-5, 40206- 2, 47129-1, 40210-1,
40014-1

6-9 Pokey Camp

Thank you for providing such a well organized and safe learning environment for the kids! My kids (Adrian & Autumn Milan) were sad that it was over. They absolutely loved every second of the camp and were excited to tell me about it everyday when I picked them up! We will definitely be attending next summer if you guys were to offer it again.

The Olmsted Parks Conservancy
and
The Louisville Nature Center

Park -It Camp ! 2015
June 22-24 2015
9:00am - 4:00 pm
Evaluation

Your response to this evaluation form is extremely important to us. The information you provide will be used to improve our summer camps. Please take a few moments to fill out this form and return it to us. We appreciate your input. Thank you, Park - It staff.

How did you learn about this camp?

- LNC Newsletter Email
 Flyer Website
 Word of mouth Newspaper

Other Daycare

Was the content what you expected? Why or why not?

YES wish it was longer

What activities did your child enjoy the most?

all of it

What activities did your child enjoy the least?

N/A

Is there anything you feel should be changed?

NO

How would you rate overall quality of this camp?

- 1 Poor
2 Below average
3 Average
4 Above average
5 Excellent

5

Would you recommend this camp to someone else? Why or why not?

YES son loved it

What other program topic(s) would interest your child?

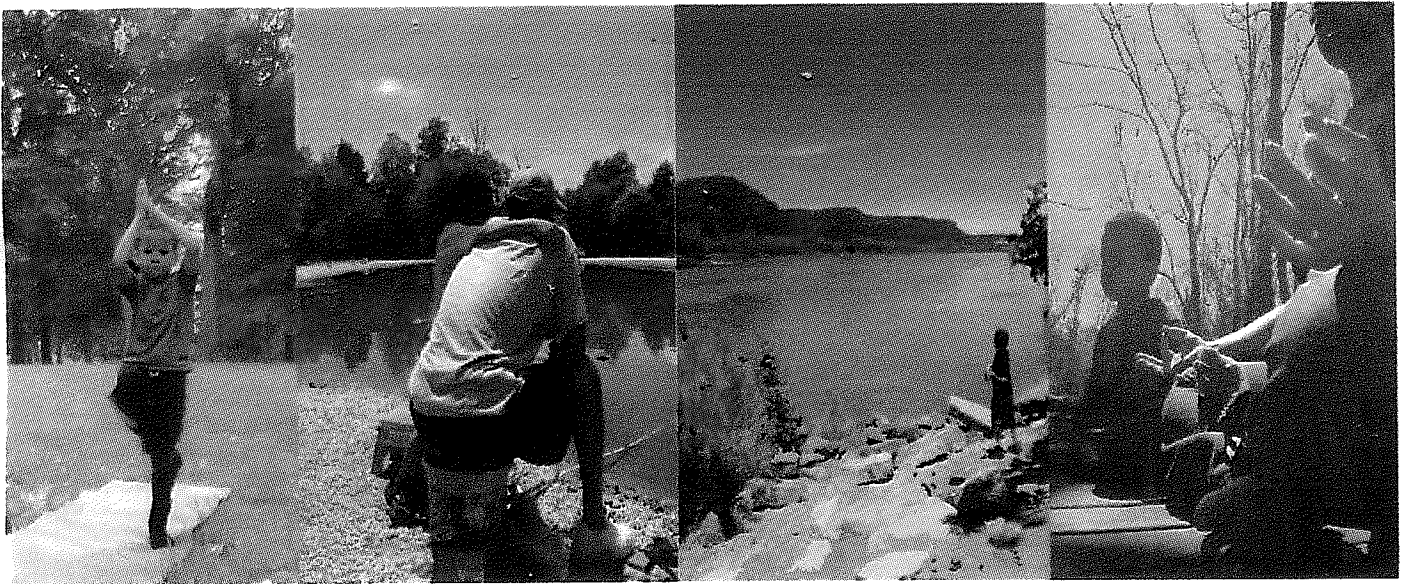
- birding
 geology
 other _____

Please return this form to the Park-It Staff at the Chickasaw Lodge.

PARK-IT CAMP

Rick Junior would be an excellent candidate for Park-It Camp. Junior loves everything about nature including taking regular hikes with his mom, fishing with his dad, and doing yoga sessions outside at parks. He is very curious about nature, whether it is skipping rocks at the lake, finding walking sticks, examining the creatures of the outside world, or simply observing the beautiful surroundings nature gives us. Junior's parents always search for ways to incorporate nature into the home, such as taking walks outside, and living a healthy organic lifestyle. Junior is also excited to be part of a camp, where he can take part of the community and bring back exciting and knowledgeable information back to the home.

I know Junior as a sweet little man that comes to my work environment on a regular basis with his mother. He is very inquisitive about all that nature has to offer. Hope he can make it to camp.



Shannon Davis
502-629-6041

my name is Rick,

I love bugs

and I want to

learn about

birds at camp.



Sarah Caragianis <sarahcaragianis@gmail.com>

Reference

2 messages

Sarah Caragianis <[REDACTED]>
To: susan.shapland@jefferson.kyschools.us

Wed, Jun 10, 2015 at 11:56 AM

We are applying to send Natalie to a nature camp. She needs a reference from a non-related adult. Would you mind to write a few sentences about why she would be a good candidate for a nature camp? I think doing so by reply email would be fine. Thanks, Sarah Caragianis

Shapland, Susan W <susan.shapland@jefferson.kyschools.us>
To: Sarah Caragianis <[REDACTED]>

Wed, Jun 10, 2015 at 6:49 PM

To the committee:

Natalie was one of my most outstanding 3rd grade students at JCPS Coleridge Taylor Montessori Elementary School. She was a straight O (comparable to straight A's in upper grades) student in all 6 grading periods and in all subject areas this year. She scored distinguished on all assessment tests in Language, Math, Science and Social Studies throughout the year and scored a "Distinguished" score on her writing portfolio.

Aside from being academically gifted, what comes to my mind most is her compassionate nature, leadership skills and intuitive thinking skills. She was highly admired by classmates and a role model to all. She was truly a friend to all. Natalie will be a future leader and peacekeeper in our world. I am 100% sure of it.

Sincerely,

Ms. Susan Shapland

Certified JCPS/ Montessori trained Elementary teacher at Coleridge Taylor Montessori Elementary School. Louisville, KY 40205

From: Sarah Caragianis <[REDACTED]>
Sent: Wednesday, June 10, 2015 11:56 AM
To: Shapland, Susan W
Subject: Reference

We are applying to send Natalie to a nature camp. She needs a reference from a

Natalie Lane Caragianis/

Nature Camp

I like Nature because, biology is Fun, I like Pandas + Cheetas a lot. But Dolphins are my favorite Animal, But things I would like in nature camp are Hiking, Fishing, Swimming, And meeting new friends.

I hope I can come

Natalie Lane Caragianis

Hi,

My name is Stanley Chase, and I have been Lajuan's big brother in Louisville's Big Brother program for a year and a half. Lajuan is truly a joy to be around. I think he would be an excellent fit for Park-it Camp as he is very curious, always asking great questions and loves to be involved in activities and adventures. Last summer Lajuan and I picked out some tomato plants and I let him use his own shovel to plant them in my backyard. He loved digging in the dirt and we've always had a great time outside. When it comes to behavior, Lajuan can be a little shy at first but once engaged quickly climbs out of his shell. He's polite always saying please and thank you and very compassionate with all living things around him. Lajuan collaborates well and is patient with others. I know this experience would stick with him for years to come as he's very eager to learn. Thank you for your time,

-Stanley Chase III

Stanley Chase III

[REDACTED]
Louisville, KY 40204
[REDACTED]



Judy Gardner <jgardner@louisvillenaturecenter.org>

Recommendation for LaJuan Odom

1 message

Ebonne Jones <ejones@louisvillenaturecenter.org>

Wed, Jun 10, 2015 at 3:58 PM

To: "jgardner@louisvillenaturecenter.org" <jgardner@louisvillenaturecenter.org>

Good Afternoon,

My name is Ebonne Ingram-Jones and I am sending this email to serve as a recommendation for prospective camper, LaJuan Odom. I have had the privilege of being LaJuan's teacher since Fall 2014 at Roosevelt-Perry Elementary where he was a smart, inquisitive and well-behaved 3rd grader. LaJuan works well with his peers and was consistently engaged during instruction. He took pride in his schoolwork and excelled in Science. LaJuan also took a keen interest in nature during the warmer days when we went outside, appreciating his surroundings and encouraging others to do the same.

I believe LaJuan would be a perfect addition to your program, as he definitely was to my class! If there are any further questions, please feel free to contact me.

Hello, my name is LaJuan. I go to Roosevelt-Perry Elementary. I am in 4th grade. I am 9 years old. What I like about nature is you get to see different creatures and explore the world, because it is so beautiful and peaceful. I want to go to the Park-it camp. My first reason is because you get to explore nature. My next reason is because I can make new friends. My last reason is when I have finished, I can teach people about nature!

Dear Nature Lover!

In the space below please write

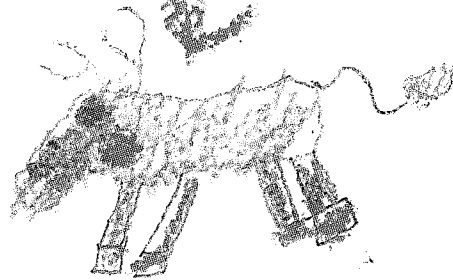
- 1) What you love about nature and
- 2) tell why you want to come to the Park-it camp

You may add a picture if you would like
Please send this in with your application.

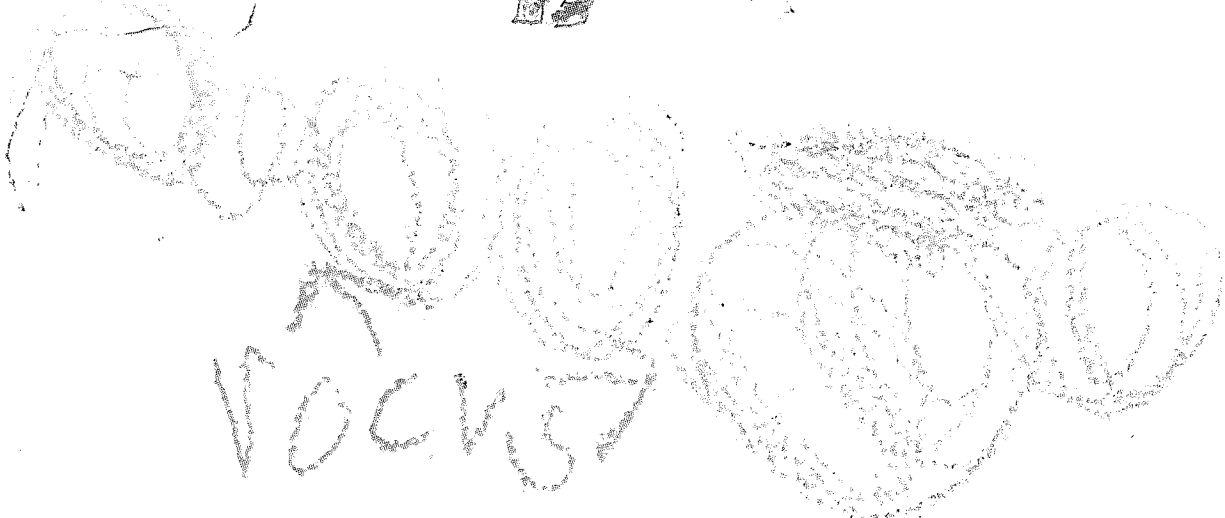
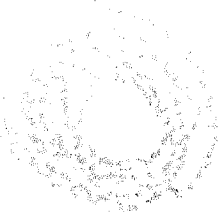
Charles

I love
the animals.
because I
can learn
about animals
and rocks.

bull



ROCKS



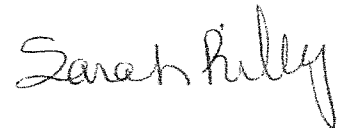
June 5, 2015

To Whom It Concerns:

I am writing a letter of recommendation for Christian Smith. He was a student in my class this past school year 2014-2015. Christian is very hands on and loves learning and using manipulatives. The Nature/Hands on Summer Activity Camp is perfect for him. He is one of the most hands on students I have seen. Christian loves learning new ideas, concepts, and challenging himself. He is a great candidate for the camp. I feel this camp is meant for children like Christian. He will love learning and exploring nature. If you have any questions please feel free to call me.

Sincerely,

Sarah Riley



K/1 Teacher

John F. Kennedy Montessori

513-560-8338

Christian

Dear Nature Lover!

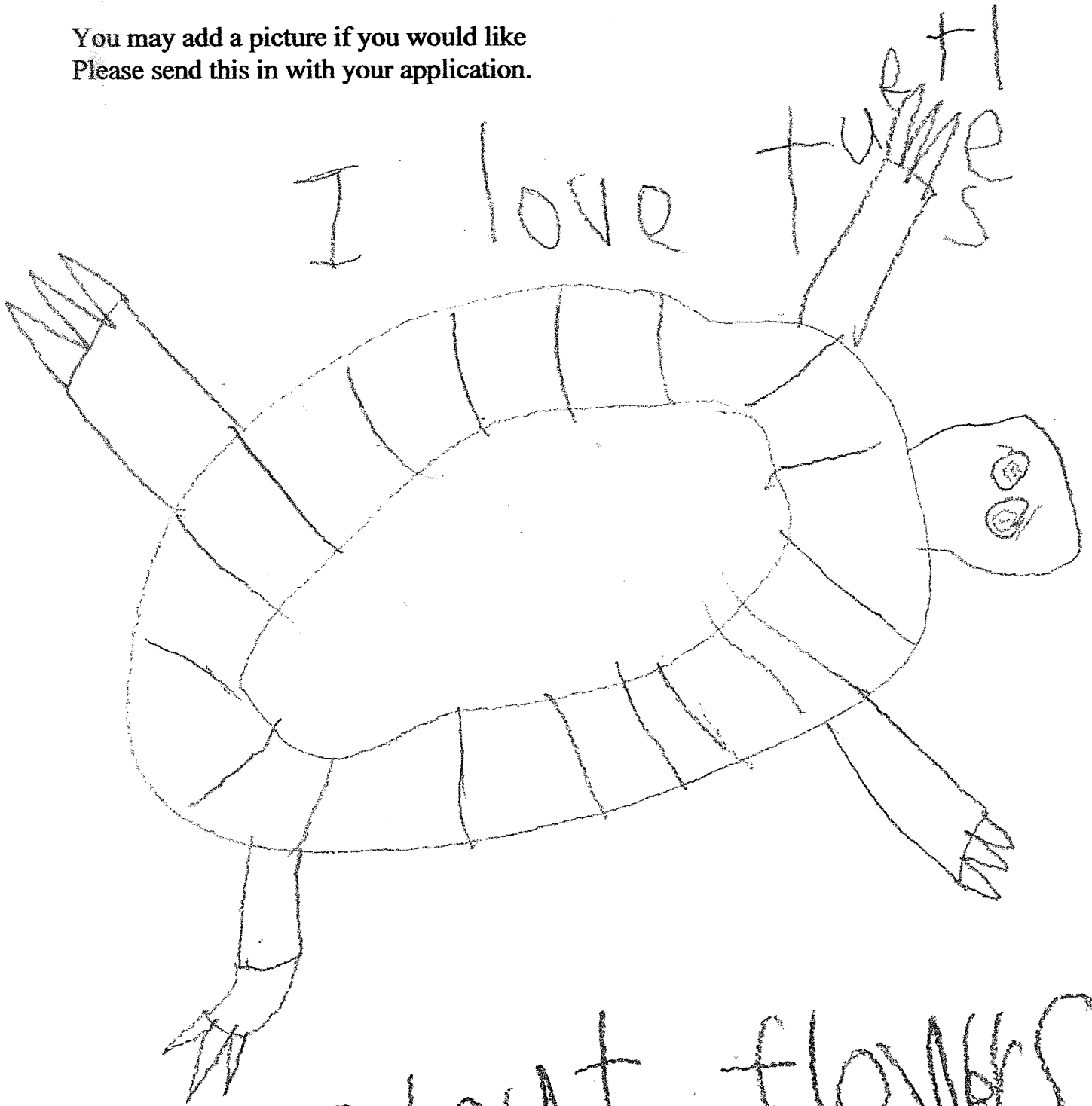
In the space below please write

- 1) What you love about nature and
- 2) tell why you want to come to the Park-it camp

You may add a picture if you would like

Please send this in with your application.

I love turtles



about flowers.
I want to learn

4075

June 4, 2015

To Whom It May Concern:

This letter supports Marley's application into the Nature Lovers Camp! I have known Marley since birth, and this little lady is sharp. She's always digging in dirt and arranging her flowers gathered from her yard. Marley enjoys nature and loves hands on activities. I am sure she will enjoy the camp and the learning. Feel free to call me with any follow questions.

Sincerely,

Regina Moore
[REDACTED]

Question - Why do you want to go to nature camp?
I want to learn about plants and have fun"
Marley said.

Marley wants
Leaves

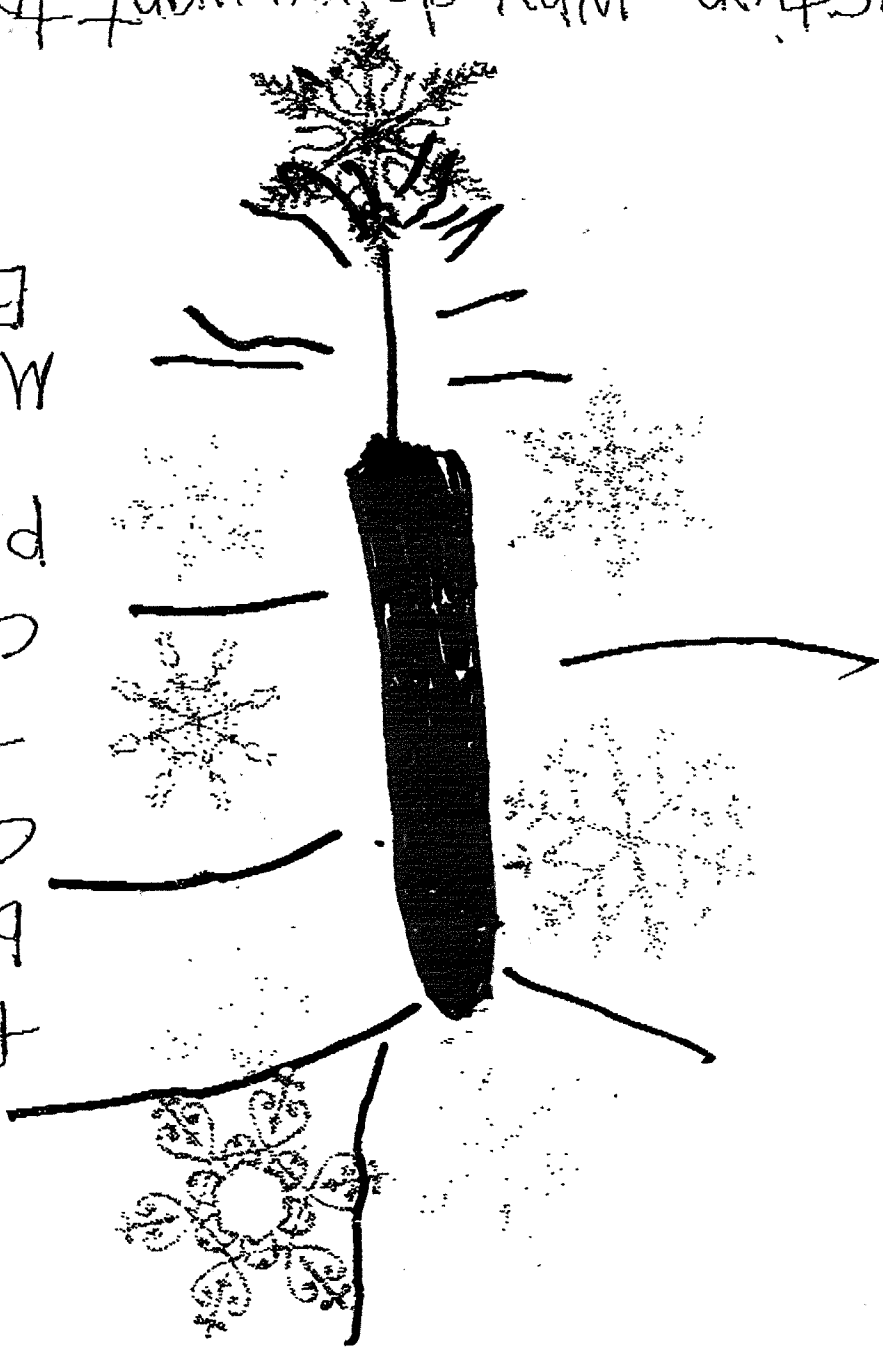
compost
pile"

can put
them in the

because ya
find worms

when you
because

nature
" I like



Marley here

Marley said

What do you like about nature?

Olmsted Parks Conservancy

Park-It Camp Application

Louisville Nature Center

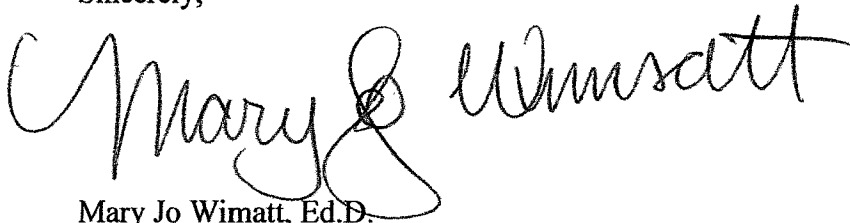
To Whom It May Concern,

I am writing on behalf of Kamria Jackson who is a 1st grader at Cane Run Elementary. She is interested in attending the "Park-It" Camp at the Louisville Nature Center this summer. Kamria is a curious and courteous and would benefit greatly from the Camp. She is always enthusiastic about spending time in our school gardens or on our field studies to locations such as Blackacre Nature Preserve.

I am the Environmental Education Magnet Coordinator for the entire school and though I didn't get to work with Kamria as much as I would have liked, the interaction I did have with her lets me believe she would be a good candidate for the camp.

Please let me know if there is anything more I can do.

Sincerely,

A handwritten signature in black ink that reads "Mary Jo Wimatt". The signature is written in a cursive style with a large, decorative initial "M".

Mary Jo Wimatt, Ed.D.

Environmental Education Magnet Coordinator

Cane Run Elementary

502 485-8223

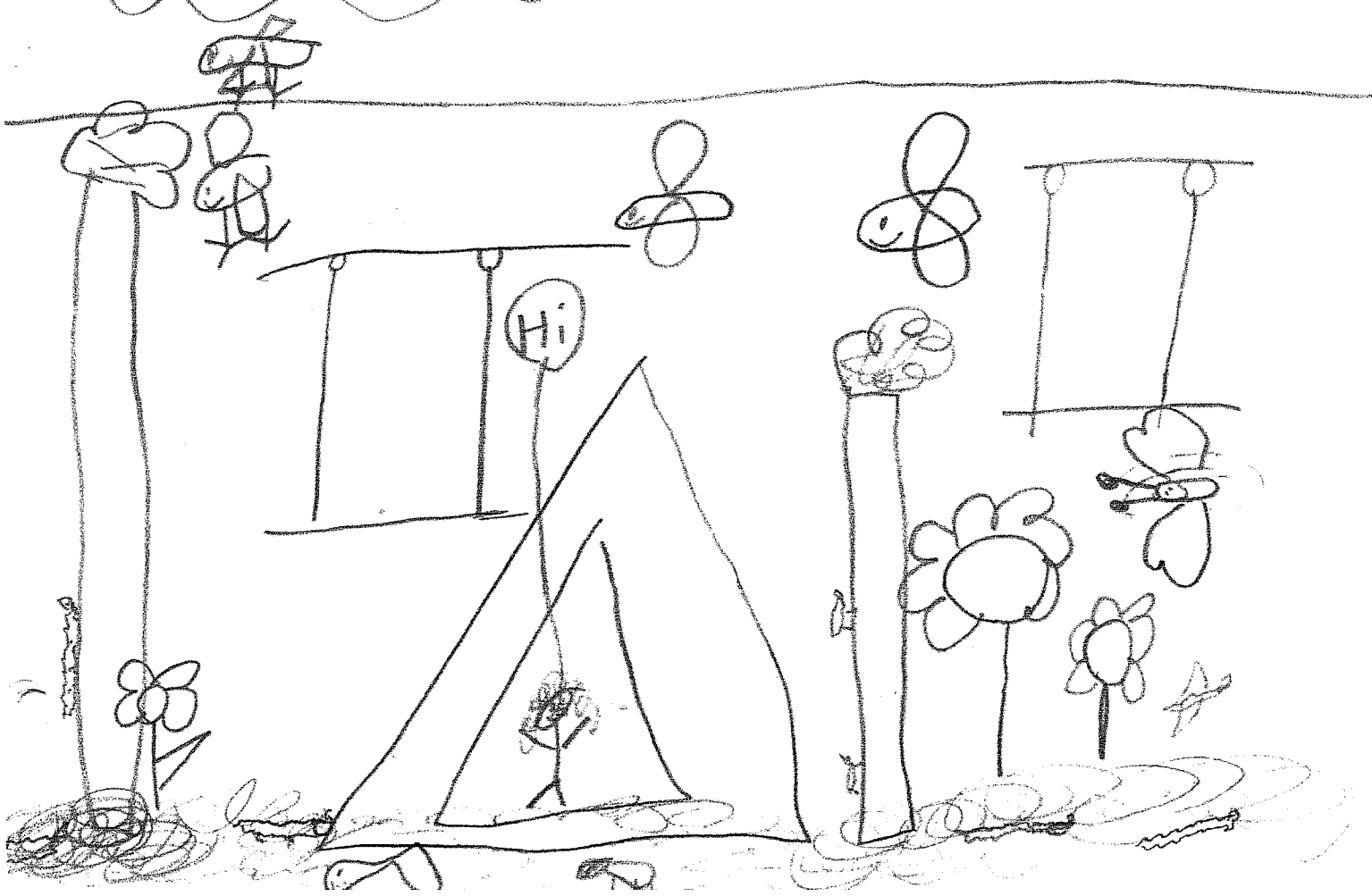
Dear Nature Lover!

In the space below please write

- 1) What you love about nature and
- 2) Tell why you want to come to the Park-it camp

You may add a picture if you would like
Please send this in with your application.

I Love trees and bug's
and the birds!
because I LOVE having
fun and I love
nature camps. I am 7 year old



U
5/20/15

To Whom It May Concern,

This is a letter of recommendation for Christian Gordon, who is applying for the Park-It Camp. I am Christian's third grade teacher. I recommend Christian to the Park-It Camp because of his love for nature and also because of his model behavior.

One part of the science curriculum for third grade involves the life cycles of plants and animals. We studied how plants grow and how insects grow. Most of the students in the class were not afraid to observe the plants closely, but many of the students were hesitant to get near the insects. Christian was not one of those students. He demonstrated his enthusiasm for insects during these lessons by observing the insects up close and not getting squeamish.

In third grade, students must complete an opinion piece where they state their opinion on a certain topic and list facts that support their opinion. Christian wrote his opinion piece about why he likes insects. He stated in his opinion piece that insects are awesome because they are able protect themselves from predators. He gave an example of how stink bugs let off a bad scent to stay safe. Christian also wrote that insects are awesome because they protect plants and crops, like the ladybug which eats aphids. This knowledge and excitement for insects shows that he wants to share his love of nature with others.

I have a behavior management plan in my classroom that involves gaining and losing points. Most days Christian would end the day with positive points. If Christian did lose a point, most of the time he was able to correct his mistake and move forward. He is a very honest young man, who is able to admit a mistake, which I believe is a very admirable quality.

In my opinion, I believe Christian would make a great contribution to the Park-It Camp. He shows excitement for nature and a desire to learn as much as he can about nature. He not only loves nature, but he is a responsible and honest young man. If you have any questions about Christian or this letter, please feel free to contact me by phone (502-608-8368) or email (nicole.haworth@jefferson.kyschools.us).

Sincerely,
Nicole Haworth

F
Nicole Haworth
Third Grade Teacher
Byck Elementary
2328 Cedar St.
Louisville, KY 40212

LOUISVILLE NATURE CENTER, INC.**General Information**

Organization Number 0119233
Name LOUISVILLE NATURE CENTER, INC.
Profit or Non-Profit N - Non-profit
Company Type KCO - Kentucky Corporation
Status A - Active
Standing G - Good
State KY
File Date 8/11/1961
Organization Date 8/11/1961
Last Annual Report 2/25/2015
Principal Office 3745 ILLINOIS AVE.
 LOUISVILLE, KY 40213
Registered Agent ROB HOLTZMAN, PRES.
 3745 ILLINOIS AVENUE
 LOUISVILLE, KY 40213

Current Officers

President WALT CHRISTIANSON
Vice President ROB HOLTZMANN
Secretary PHYLLIS FITZGERALD
Treasurer RON JOLLY
Director Ken Machtolff
Director Phyllis Fitzgerald
Director KEVIN BOWLING
Director MARK ELY
Director Kathy Morris

Individuals / Entities listed at time of formation

Director S SPAFFORD ACKERLY MD
Director W G DUNCAN
Director RUTH G BROWNE
Incorporator S SPAFFORD ACKERLY MD
Incorporator W G DUNCAN
Incorporator RUTH G BROWNE

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>	2/25/2015	1 page	<u>PDF</u>	
<u>Annual Report</u>	3/20/2014	1 page	<u>tiff</u>	<u>PDF</u>

Annual Report	6/13/2013	2 pages	tiff	PDF
Annual Report	4/27/2012	1 page	tiff	PDF
Annual Report	3/23/2011	1 page	tiff	PDF
Annual Report	4/7/2010	1 page	tiff	PDF
Registered Agent name/address change	10/13/2009	1 page	tiff	PDF
Annual Report	6/25/2009	2 pages	tiff	PDF
Annual Report	4/4/2008	1 page	tiff	PDF
Annual Report	7/3/2007	1 page	PDF	
Statement of Change	6/14/2006	1 page	tiff	PDF
Annual Report	6/13/2006	1 page	tiff	PDF
Annual Report	3/28/2005	1 page	tiff	PDF
Statement of Change	11/16/2004	1 page	tiff	PDF
Annual Report	9/23/2003	1 page	tiff	PDF
Annual Report	8/23/2002	1 page	tiff	PDF
Annual Report	6/29/2001	1 page	tiff	PDF
Annual Report	4/17/2000	1 page	tiff	PDF
Reinstatement	11/24/1999	2 pages	tiff	PDF
Administrative Dissolution	11/7/1996	1 page	tiff	PDF
Annual Report	7/1/1996	1 page	tiff	PDF
Annual Report	7/1/1995	2 pages	tiff	PDF
Annual Report	7/1/1994	3 pages	tiff	PDF
Annual Report	7/1/1993	3 pages	tiff	PDF
Annual Report	7/1/1992	3 pages	tiff	PDF
Amendment	3/6/1992	12 pages	tiff	PDF
Statement of Change	3/6/1992	1 page	tiff	PDF
Annual Report	7/1/1991	1 page	tiff	PDF
Sixty Day Notice	9/1/1989	1 page	tiff	PDF
Annual Report	7/1/1989	2 pages	tiff	PDF
Annual Report	7/1/1987	1 page	tiff	PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	2/25/2015 8:01:49 AM	2/25/2015 8:01:49 AM	
Annual report	3/20/2014 8:16:08 AM	3/20/2014	
Annual report	6/13/2013 5:05:02 PM	6/13/2013	
Annual report	4/27/2012 3:14:53 PM	4/27/2012	
Annual report	3/23/2011 3:45:33 PM	3/23/2011	
Annual report	4/7/2010 12:08:55 PM	4/7/2010	
Registered agent address change	10/13/2009 1:54:56 PM	10/13/2009	

Annual report	6/25/2009 10:45:30 AM	6/25/2009	
Annual report	4/4/2008 10:56:56 AM	4/4/2008	
Annual report	7/3/2007 10:47:51 AM	7/3/2007 10:47:51 AM	
Registered agent address change	6/14/2006 11:13:41 AM	6/14/2006	
Annual report	6/13/2006 10:28:51 AM	6/13/2006	
Registered agent address change	11/16/2004 3:26:56 PM	11/16/2004	
Principal office change	5/18/2001 11:15:55 AM	5/18/2001	
Reinstatement	11/24/1999	11/24/1999	
Principal office change	11/24/1999	11/24/1999	
Admin Dis. A. report not in	11/7/1996	11/7/1996	
Amendment previous name	3/6/1992	3/6/1992	<u>NATURE AND CONSERVATION CENTER, INC.</u>

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	3/14/2005	1 page
Statement of Change	11/16/2004	1 page
Annual Report	5/28/2004	1 page
Annual Report	9/23/2003	1 page
Annual Report	8/23/2002	1 page
Annual Report	6/29/2001	1 page
Annual Report	4/17/2000	1 page
Reinstatement	11/24/1999	2 pages
Administrative Dissolution	11/7/1996	1 page
Annual Report	7/1/1996	1 page
Annual Report	7/1/1995	2 pages
Annual Report	7/1/1994	3 pages
Annual Report	7/1/1993	3 pages
Annual Report	7/1/1992	3 pages
Statement of Change	3/6/1992	1 page
Amendment	3/6/1992	10 pages
Annual Report	7/1/1991	1 page
Annual Report	7/1/1990	3 pages
Statement of Change	10/17/1989	1 page
Sixty Day Notice	9/1/1989	1 page
Annual Report	7/1/1989	2 pages
Annual Report	7/1/1987	1 page
Annual Report	7/1/1987	1 page
Statement of Change	3/18/1985	2 pages

Statement of Change	9/8/1980	2 pages
Amendment	7/10/1979	4 pages
Amendment	11/12/1964	3 pages
Annual Report	7/1/1962	19 pages
Articles of Incorporation	8/11/1961	3 pages

AMENDED AND RESTATED
ARTICLES OF INCORPORATION
OF
LOUISVILLE NATURE CENTER, INC.

ARTICLE I

Name

The name of the corporation is Louisville Nature Center, Inc. (the "Corporation").

ARTICLE II

Capital Stock

Any provision of these Articles of Incorporation to the contrary notwithstanding, the Corporation shall not have capital stock or shareholders and shall not have any purpose or object, nor have or exercise any power, nor engage in any activity, which in any way contravenes, or is in conflict with, the other provisions of Article III of these Articles of Incorporation.

ARTICLE III

Purposes and Powers

The objects and purposes of the Corporation, and the powers it shall have and may exercise are as follows:

(a) As general and controlling purposes, to conduct and carry on its work, not for profit, but exclusively for charitable, scientific, literary, or educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, or corresponding provisions of any subsequent Federal tax laws (the "Code"), in such manner (i) that no part of its income or property shall inure to the private benefit of any donor, director or individual having a personal or private interest in the activities of the Corporation, except as reasonable compensation for services actually rendered, (ii) that it shall not directly or indirectly participate in or intervene in any political campaign on behalf of any candidate for public office, and (iii) that no substantial part of its activities shall be carrying on propaganda or otherwise attempting to influence legislation.

(b) As particular purposes in furtherance of, consistent with, and subject to, the general purposes set forth in Section (1)(a) of this Article III:

(i) to establish and maintain a nature preserve and nature center for environmental education and to engage in activities incidental thereto with the objective of stimulating interest and knowledge concerning the preservation of our environment and natural areas; and

(ii) to organize, promote, foster, assist (whether financially or otherwise), and conduct charitable, scientific, literary and educational enterprises, activities and institutions.

(c) In furtherance of, and at all times subject to, the aforesaid purposes, enterprises, activities, and projects the Corporation shall have the authority and power to engage in any lawful act or activity for which corporations may be organized under the Kentucky Non-Profit Corporation Act, and to exercise any and all powers that corporations may now or hereafter exercise under the Kentucky Non-Profit Corporation Act.

ARTICLE IV

Voluntary Dissolution

If, at any time, the Corporation voluntarily dissolves, the assets of the Corporation shall be applied and distributed as follows:

(a) All liabilities and obligations of the Corporation shall be paid and discharged, or adequate provisions shall be made therefor;

(b) Assets held by the Corporation upon condition requiring return, transfer, or conveyance, which condition occurs by reason of the dissolution, shall be returned, transferred, or conveyed in accordance with such requirements;

(c) Assets that have been received and are held by the Corporation subject to limitations permitting their use only for charitable, scientific, literary, educational, and/or similar purposes, and that are not held upon a condition requiring return, transfer, or conveyance by reason of dissolution, shall be transferred or conveyed to one or more corporations, societies, or organizations, organized under the laws of any state, that are exempt under section 501(c)-(3) of the Code, or to the Federal government, or to a state or local government, for a public purpose, pursuant to a plan of distribution adopted as provided by law;

(d) Other assets, if any, shall be transferred or conveyed to one or more corporations, societies, or organizations, organized under the laws of any State, that are exempt under section 501(c)(3) of the Code, or to the Federal government, or to a State or local government, for a public purpose, pursuant to a plan of distribution adopted as provided by law; and

(e) Any assets not disposed of pursuant to the provisions of this Article IV shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the Corporation is then located to such organizations as the court shall determine, which are organized and operated exclusively for charitable purposes and are exempt under section 501(c)(3) of the Code.

ARTICLE V

Members

The Corporation shall have such members and classes of membership as shall be provided in the By-Laws. The members shall have no right to vote on any matter concerning the Corporation, the Trustees possessing the sole voting power. Members, as such, shall have no claim on the assets, income or property of the Corporation, currently or upon dissolution.

ARTICLE VI

Board of Trustees

(1) (a) The affairs of the Corporation shall be conducted by a Board of Trustees and by such committees and officers as shall be provided in the By-Laws.

(b) The Board of Trustees shall consist of not less than three persons, the precise number of whom shall be designated by the By-Laws. The nomination and election of Trustees shall be as provided in the By-Laws and shall take place at the annual meeting of the Board of Trustees, or as otherwise provided in the By-Laws.

(c) The term of office of each trustee shall be as provided by the Corporation's By-Laws. Each Trustee so elected shall hold office for said term and until his or her respective successor shall have been duly elected and shall have accepted office.

(d) Trustees may be removed from office during their term of office as provided in the By-Laws.

(2) The annual meetings of the Corporation's Board of Trustees shall be held at such time and place as may be fixed by the Corporation's By-Laws.

(3) The duties and powers of the Board of Trustees, committees and officers of the Corporation shall, except as otherwise specifically provided herein or in the By-Laws, be such as are usually incident to similar Boards of Directors or Trustees, similar committees and similar officers, and in addition, shall be such as may be conferred upon said Board of Trustees, upon such committees, or upon such officers by law, or by amendment to the Articles of Incorporation or By-Laws, or by appropriate corporate resolution.

ARTICLE VII

Registered Office; Registered Agent

Until otherwise changed, the registered office of the Corporation shall be at 4834 Brownsboro Center, Louisville, Kentucky 40207, and the name and address of its registered agent at such address shall be Bruce Hutcherson.

ARTICLE VIII

Principal Office

The address of the principal office of the Corporation is Louisville Nature Center, Inc., P.O. Box 7414, Louisville, Kentucky 40257-0414.

ARTICLE IX

Amendment of Articles and By-Laws

(1) The Corporation's Articles of Incorporation may be amended in the manner provided by law.

(2) The Board of Trustees shall adopt By-Laws for the Corporation and may change or revise such By-Laws at any time and from time to time.

ARTICLE X

Private Property

The private property of the members, offices and Trustees shall not be subject to any of the Corporation's debts and liabilities.

ARTICLE XI

Indemnification and Insurance

To the fullest extent permitted by, and in accordance with the provisions of the Kentucky Revised Statutes Chapter 273, the Corporation shall indemnify each Trustee or officer of the Corporation against reasonable expenses (including reasonable attorneys' fees), judgments, taxes, penalties, fines (including an excise tax assessed with respect to an employee benefit plan) and amounts paid in settlement (collectively "Liability"), incurred by such person in connection with defending any threatened, pending or completed action, suit or proceeding (whether civil, criminal, administrative or investigative, and whether formal or informal) to which such person is, or is threatened to be made, a party because such person is or was a Trustee or officer of the Corporation, or is or was serving at the request of the Corporation as a Trustee, officer, partner, employee or agent of another domestic or foreign corporation, partnership, joint venture, trust or other enterprise, including service with respect to employee benefit plans. A Trustee or officer shall be considered to be serving an employee benefit plan at the Corporation's request if such person's duties to the Corporation also impose duties on or otherwise involve services by such person to the plan or to participants in or beneficiaries of the plan. To the fullest extent authorized or permitted by, and in accordance with the provisions of, the Act, the Corporation shall pay or reimburse reasonable expenses (including reasonable attorneys' fees) incurred by a Trustee or officer who is a party to a proceeding in advance of final disposition of such proceeding.

The indemnification against Liability and advancement of expenses provided by, or granted pursuant to, this Article XI shall not be deemed exclusive of any other rights to which those seeking indemnification or advancement may be entitled under any bylaw, agreement, action of disinterested Trustees, or otherwise, both as to action in their official capacity and as to action in another capacity while holding such office of the Corporation, shall continue as to a person who has ceased to be a Trustee or officer of the Corporation, and shall inure to the benefit of the heirs, executors and administrators of such a person.

The Corporation may purchase and maintain insurance on behalf of any person who is or was a Trustee or officer of the Corporation, or is or was serving at the request of the Corporation as a Trustee, officer, member, partner, employee or agent of another domestic or foreign corporation, part-

nership, joint venture, trust or other enterprise, against any liability asserted against such person and incurred by such person in such capacity or arising out of such person's status as such, whether or not the Corporation would have the power or be obligated to indemnify such person against such liability under the provisions of this Article XI or of the Kentucky Revised Statutes Chapter 273 (or corresponding provisions of any subsequent state laws).

Any repeal or modification of this Article XI by the Board of Trustees shall not adversely affect any right or protection of a Trustee or officer of the Corporation under this Article XI with respect to any act or omission occurring prior to the time of such repeal or modification.

ARTICLE XII

Limitation of Trustee Liability

Except as otherwise provided by applicable law, no trustee of the Corporation shall be personally liable to the corporation for monetary damages for breach of his duties as a trustee, provided that this provision shall not eliminate or limit the liability of a trustee for the following: (i) for any transaction in which the trustee's personal financial interest is in conflict with the financial interests of the Corporation; (ii) for acts or omissions not in good faith or which involve intentional misconduct or are known to the trustee to be a violation of law; or (iii) for any transaction from which the trustee derived an improper personal benefit. This Article XIII shall continue to be applicable with respect to any such breach of duty by a trustee, as a trustee, notwithstanding that such trustee thereafter ceases to be trustee, and shall inure to the personal benefit of his heirs, executors and administrators.

Dated: March 3, 1992

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6.6 Advisory Committee.

a. Generally. The Board may organize or recognize an Advisory Committee whose members will assist the Association in developing programs, exhibits, and research. The Advisory Committee may hold special events on behalf of the Association to promote public relations, further environmental education or aid in fund-raising. The Advisory Committee will assist the Association in publishing a newsletter, recruiting, volunteering and pricing the benefits and programs it may provide to the public.

b. Composition and Procedure. The Advisory Committee shall elect its own members and appoint its own officers. Nominations for membership on the Advisory Committee may be suggested by the Board, the President or the Director of the Association. The Advisory Committee shall adopt its own By-Laws and keep its own records, but the failure to do such shall not affect the validity of any action taken by the Advisory Committee on behalf or in relation to the Association, except as otherwise provided in these By-Laws.

c. Representative to the Board. The Advisory Committee shall be accountable to the Board of Trustees through the Trustee elected as its representative to the Board pursuant to Section 4.3.b. The Advisory Committee will report regularly to the Association through this representative or through the Director of the Association.

d. Finance and Revenue. The Advisory Committee shall remit revenues from its programs to the Association Treasurer without legal restrictions. However the Advisory Committee reasonably expects that the Association will make such funds available for such purposes as it might reasonably request with approval of the Board. The Association may keep such funds in a separate account and delegate to the Advisory Committee discretion in their disbursement, so long as dual controls are maintained, and such disbursements are consistent with the Association's purpose, including the maintenance of its federal tax exempt status.

ARTICLE 7

OFFICERS

7.1 Officers; Qualifications. The officers of the Association shall be elected by the Board, and shall be a President, a Vice President, a Treasurer, a Secretary, a Director and such additional officers as the Board may from time to time elect. Any two or more offices may be held by one person.

7.2 Terms. Each officer shall hold office for one year and until his successor shall have been elected and shall have assumed office, or until his death, resignation or removal, whichever is sooner.

7.3 Resignations. Any officer may resign at any time by delivering written notice to the Association. The resignation shall take effect at the time specified in the notice. Unless required by the terms of the notice, acceptance shall not be necessary to make the resignation effective.

7.4 Removals. Any officer may be removed with or without cause at any time by the Board.

7.5 Vacancies. Any vacancy in any office, however arising, shall be filled by the Board for the unexpired term.

7.6 President. The President shall be principal officer of the Association and shall, in general, perform all duties incident to the office of President, as well as such other duties as may be prescribed by the Board from time to time. The President shall serve as chairman of the Board and shall preside at all meetings of the Board. The President may appoint board committee chairmen and members and create committees in accordance with Section 6.1. The President shall have authority to co-sign all checks, notes, contracts and other instruments.

7.7. Vice President. The Vice President shall assume such duties as may be assigned by the President or the Board. The Vice President shall serve as vice-chairman of the Board and in the absence of the President, preside at all Board meetings. The Vice President shall have the authority to co-sign all checks, note, contracts and other instruments.

7.8 Treasurer. The Treasurer shall receive and disburse all funds of the Association under the direction of the Board and shall deposit all funds in the name of the Association and all securities in such depository or depositories as the Board may from time to time designate or approve. The Treasurer shall maintain custody of and preserve all records and documents relating to the property of the Association and keep proper books of accounts which shall be open at all times to inspection by the Board. At any meeting, the Treasurer shall render to the Board upon request a financial report, and at intervals specified by the Board, he or she shall submit to the Board a statement of the financial condition of the Association, certified by independent accountants, consisting of a balance sheet and related statements of income and expenses and of changes in all funds for the fiscal year then ended. The Board may

require the Treasurer to obtain such insurance and in such amount as it shall determine. The Treasurer shall have authority to co-sign all checks, notes, contracts and other instruments. The Treasurer may delegate such of his duties as may be appropriate to any officer, including, but not limited to, the Director. The Treasurer need not be a Trustee.

7.9 Secretary. The Secretary shall cause notices to be issued of all meetings of the Trustees and a record to be made of the proceedings of the same. The Secretary shall also attend to all official correspondence, shall have custody of and preserve the corporate seal and the archives, and shall affix the seal under the direction of the President or the Board. The Secretary shall have authority to co-sign all checks, notes, contracts and other instruments. The Secretary need not be a Trustee.

7.10 Director. The Director shall manage the day-to-day business affairs and operations of the Association, unless otherwise determined by the Board, and shall have such other duties as may be assigned by the President or the Board. The Director shall have the authority to enter into contracts and to sign checks in accordance with written procedures as set forth by the Association's accountants.

7.11 Additional Officers. Additional officers shall have such responsibilities, powers, and duties as the Board may from time to time prescribe.

ARTICLE 8

FINANCE

8.1 Contracts and Debts; Transfers of Securities. Any two of the President, the Vice President, the Treasurer, or any two individuals designated by the Board shall have authority to execute any contract or debt in the name of the Association or execute any form of transfer and assignment customary or necessary to constitute a transfer of stocks, bonds, or other securities standing in the name of or belonging to the Association. Any individual transferring any stocks, bonds, or other securities pursuant to a form of transfer or assignment so executed shall be fully protected and shall be under no duty to inquire whether the Board has taken action in respect thereof.

8.2 Signing of Checks. Pursuant to the provisions of these By-Laws or other written policies and procedures adopted by the Board, the President, the Vice President, and certain officers of the Association may sign, make, and evidence in the name of the Association checks, vouchers,

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drafts, warrants, orders for the payment of money or receipts.

8.3 Fiscal Year. The Board of Directors shall have the power to fix, and from time to time change, the fiscal year of the Association by resolution. Unless and until otherwise so provided by the Board, the fiscal year of the Association shall be on a calendar year basis beginning on January 1.

ARTICLE 9

GENERAL PROVISIONS

9.1 Seal. The Board of Trustees may adopt by resolution a corporate seal which shall be circular in form and shall have inscribed thereon the designation "SEAL" and such other information as the Board of Directors may deem advisable.

9.2 Compensation; Interested Trustees and Officers. No Trustee or officer of the Association, other than the Director, shall receive compensation for his services in that capacity. A transaction shall not be voidable by the Association solely because Trustee or an officer is interested, directly or indirectly, in a contract or transaction affecting the Association or he or a member of his family is proposed to be compensated for services actually rendered to the Association if (a) the material facts as to the Trustee's or officer's interest are disclosed in good faith to the Board, and the contract or the transaction is approved or ratified by a majority vote of the Board, the interested Trustee not being counted for the purpose of establishing a quorum and not voting; or (b) the contract or transaction is fair to the Association.

9.3 Construction. Unless the context specifically requires otherwise, any reference in these By-Laws to any gender shall include all other genders, any reference to the singular shall include the plural, and any reference to the plural shall include the singular.

9.4 Severability of Provisions. If any provision of these By-Laws or its application to any person or circumstance is held invalid by a court of competent jurisdiction, the invalidity does not affect other provisions or applications of these By-Laws that can be given effect without the invalid provision or application, and to this end the provisions of these By-Laws are severable.

AMENDED AND RESTATED
BY-LAWS
OF
LOUISVILLE NATURE CENTER, INC.

ARTICLE 1

MEMBERS

1.1 Non-Voting. There shall be one class of members of the Louisville Nature Center, Inc. (the "Association") with the designations set forth below, which may be changed by the Board of Trustees (as hereinafter defined) from time to time. Members shall have no voting rights or privileges as such, but may be entitled to such other rights, benefits or privileges as the Board or the Association may from time to time provide. Members shall be those persons who are current in their membership dues or contributions or who are life members, as evidenced by a list kept by the Association. Trustees, officers and employees shall be members of the Association during their period of service without regard to dues.

1.2 Designations. There shall be such designations and categories of membership, including, but not limited to yearly and life memberships, as the Trustees shall by resolution establish. The Trustees may, in their discretion, delegate by resolution to any officer the authority to establish membership designations.

ARTICLE 2

PRINCIPAL OFFICE

2.1 The principal office of the Association shall be Louisville Nature Center, Inc., P.O. Box 7414, Louisville, Kentucky, 40257-0414, but the location of such office may be, from time to time, otherwise designated and changed by the Board of Trustees.

ARTICLE 3

NO CAPITAL STOCK

3.1 The Association shall have no capital stock or stockholders, and its business and affairs shall not be conducted for private pecuniary gain or profit, nor shall any of its gain, profit or property inure to any officer, a member or trustee thereof.

ARTICLE 4

BOARD OF TRUSTEES

4.1 Powers. The property and affairs of the Association shall be managed by a Board of Trustees (the "Board"). The members of the Board shall be selected as set forth in Section 4.3, and shall be referred to herein and in all documents and business of the Association as the "Trustees."

4.2 Generally.

a. Composition of Board. The number of Trustees shall be not less than 12 nor more than 21 and shall be fixed in Section 4.2.b, subject to change by amendment of these By-Laws.

b. Number of Trustees There shall be 15 Trustees.

4.3 Designation and Selection of Trustees. The Trustees shall be selected as follows:

a. In General. All but one of the seats on the Board shall be divided into 3 classes as nearly equal in number as possible, designating such classes as the first class, the second class and the third class. Trustees of these classes shall be elected as prescribed in Section 4.4.

b. Trustee Representing the Advisory Committee. In addition to the designation of Trustees as described above, and their election as prescribed in Section 4.3.a, the Board shall elect one person as Trustee who shall be nominated in writing by the Advisory Committee (as hereinafter defined). The Board may, in its sole discretion, waive the requirement of a designation in writing. Further, should the Board in its discretion and in good faith be unable to determine to its satisfaction the nominee properly designated by the Advisory Committee, the Board may either fill the vacancy with its own nominee or leave the seat vacant until such time as it can satisfactorily determine the nominee of the Advisory Committee.

The Trustees of each class and the Trustee representing the Advisory Committee shall all have the same powers, rights and obligations as Trustees of the Association, and shall differ only in their manner of appointment or election, and in their respective terms of office as provided in Sections 4.2.b and 4.3.