

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

**Applicant/Program:** Germantown Mission, Inc

**Executive Summary of Request:**

NDF request for operating expenses of the Germantown-Paristown Neighborhood Association. These expenses include utilities, maintenance and insurance of the Germantown-Paristown Neighborhood Association building, as well as Internet service for conducting association business. Germantown Mission Inc is the applicant and the sub-grantee is the Germantown-Paristown Neighborhood Association.

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 #

Jim King  
Council Member Signature

\$2,500  
Amount

9/30/14  
Date

**Primary Sponsor Disclosure**

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

**Approved by:**

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

\_\_\_\_\_  
Date

**Clerk's Office Only:**

Request Amount: \_\_\_\_\_

Committee Amended Appropriation: \_\_\_\_\_

Original Appropriation: \_\_\_\_\_

Council Amended Appropriation: \_\_\_\_\_

|                           |                        |
|---------------------------|------------------------|
| <b>Applicant/Program:</b> | Germantown Mission Inc |
|---------------------------|------------------------|

|                           |                        |
|---------------------------|------------------------|
| <b>Applicant/Program:</b> | Germantown Mission Inc |
|---------------------------|------------------------|

## Additional Disclosure and Signatures

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

**Additional Council Office Disclosure**

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

4 District # David Jendryk/KK Council Member Signature \$2500 Amount 10-10-2014 Date

| District # | Council Member Signature | Amount | Date |
|------------|--------------------------|--------|------|
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| District # | Council Member Signature | Amount | Date |
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| District # | Council Member Signature | Amount | Date |
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| District # | Council Member Signature | Amount | Date |
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| District # | Council Member Signature | Amount | Date |
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| District # | Council Member Signature | Amount | Date |
|------------|--------------------------|--------|------|
|------------|--------------------------|--------|------|



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

| SECTION 1 - APPLICANT INFORMATION  |   |
|--|---|
| Legal Name of Applicant Organization:  | GERMANTOWN MISSION FMC  |
| (as listed on: <a href="http://www.sos.ky.gov/business/records">http://www.sos.ky.gov/business/records</a> )   |   |
| Main Office Street & Mailing Address:  | 1094 E Kentucky St., LOU., KY 40204   |
| Website:   | GPMALOUISVILLE.COM  |
| Applicant Contact:   | STEVIE MARR   |
| Phone:   | 502-713-0876  |
| Financial Contact:   | SAM   |
| Phone:   |   |
| Organization's Representative who attended NDF Training:   | STEVIE MARR   |
| GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED   |   |
| Program Facility Location(s):  | 1094 E Kentucky St., LOU., KY 40204   |
| Council District(s):   | 4TH & 10TH Zip Code(s): 40204   |
| SECTION 2 - PROGRAM REQUEST & FINANCIAL INFORMATION  |   |
| PROGRAM/PROJECT NAME:  | 2014-15 OPERATING COST OF CENTER  |
| Total Request (\$):  | 5,000.00  |
| Total Metro Award (this program) in previous year: (\$)  |   |
| Purpose of Request (check all that apply):   |   |
| <input checked="" type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget)   |   |
| <input type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals  |   |
| <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)  |   |
| The Following are Required Attachments:  |   |
| <input checked="" type="checkbox"/> IRS Exempt Status Determination Letter   | <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 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:  | NDF-4TH/10TH Amount (\$): 2600.00/XX  |
| Source:  | Amount (\$):  |
| Source:  | Amount (\$):  |
| Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |
| Has the applicant met the BBB Charity Review Standards? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |

Sam



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

SEE ATTACHED, PAGES 2

*DM*

For PAGE 2

We are a neighborhood association within Louisville. The association is 40 years old this year. Our boundaries are included on the inside left page of the folder this application is submitted within. Our singular focus is to work in all ways possible to maintain the heritage of our neighborhood, to assure the properties are clean and updated and that residents are invited to participate in coming together to work to improve the quality of life in the ways neighborhood associations are expected to do this. We hold a close relationship with 4<sup>th</sup> District Police in supporting block watches and crime prevention techniques. In recent years we have taken advantage of a focus group study that was performed by Center for Neighborhoods and have given specific attention to beautification projects and encouraging environmental living in our urban setting. Our theme of coming together also occurs by meetings we host. Four times a year we host a pot luck dinner at our center and we invite topical speakers to educate those attending. We have a once a year election meeting where we often recognize our Citizen(s) of the Year. This is the one meeting that normally has the largest attendance. We have close to 300 members including 40 or so businesses. Our major fund raising opportunities are the weekly bingo held at the center and the annual music festival called The Shotgun Festival. The festival has become a street festival celebrating our urban nature of living close to one another. The 4<sup>th</sup> and 10<sup>th</sup> district council members have been the main funders supporting this happening. Finally we do encourage residents to call or email us. We willingly work issues that anyone chooses to bring to our attention. One example of this last year was the landmarks commission vote on the Cherokee Park Teepee structure. We provided the group our letter of support. We collaborate with many of the non profits of our area and often sponsor their activities that aide residents that are in need. Our website is [gpnalouisville.com](http://gpnalouisville.com).



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.):

SEE ATTACHED 3A

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

SEE ATTACHED 3B

3 A //

This application process centers on funding specific programs. Our request is for operating cost only. Since 1986 we have had an arrangement with the city to provide association services at a building located at 1094 E Kentucky Street. The city provided the funding and worked with the association to totally remodel the facility and bring the building up to code and to assure it complied with all standards. The association has taken on the charge of maintenance since that time with a pattern of city support being made available to assist at an amount of \$5,000 per year. These funds have historically helped pay utilities, insurance, repairs and phone service in the old days. In recent time internet service has subbed in for phone service. The agreement with the city was for 15 years and in 2001, by our keeping our commitment to maintain the building and by our staying an active and our becoming a leadership style neighborhood association, we became the outright owner of our facility. This ownership has appropriate caveats that protect the city. For example if we do not fully maintain the building or we cease as a neighborhood association then the building goes back to the city. So the program description for this request is to ask for funding support that aids us in being able to balance our books and keep the building maintained fully. In terms of happening at the facility they are manifold. We host a weekly bingo that serves as our main fund raiser. We advertise and make available the use of our building to all residents for function they host where a larger facility is needed. We do make certain that what will be hosted does not go against the requirements of our 501C3 and 501C4 IRS status. This service is not tied to the person requesting being an association member and it does not cost anything for the person who uses the building. During the year we host open meetings, pot luck suppers and have events that allow speakers to bring information and updates about their organizations. All meetings we host as GPNA are open to the public at large. We also hold many work meetings where we plan out our priorities and work assignments. A part of this effort is identifying how we can continue to collaborate with other non profits serving our area. We also run all the administrative aspects of the association out of this facility. This includes updates to our website and production of hard copies of our ongoing newsletters. Finally, we have developed the outside yard areas of our property in a most unique manner. We tend to two raised gardens. By their being raised we allow for older folks to more easily aid since they do not have to so drastically bend over while tending. We have also placed two unique art pieces in the front of our building that serves to greet all walking or driving by, and certainly welcomes all who come through our doors. The title of this wonderful work is "Your are Here."

3 B.

The subgrantee for this application is GermanParistown Neighborhood Association (GPNA). I am attaching the IRS letter of good standing that GPNA holds. GPNA is a 501C4 organization and we often take stands on what could be considered controversial issues. An example of such a stance in 2012 was our support for Landmarks designation for the Cherokee Park Tepee structure. Another example of the need for having this IRS status is our history of taking stances on zoning matters that directly affect the neighborhood. In the early 1990's our attorney advised us that given the ongoing support the city was providing each year for the building we should establish a 501C3 that is to a limited extent a mirrored organization. Germantown Mission Inc. was formed and filed with the IRS. GMI is making the application here. The activities that require this grant money to be spent will all take place via the umbrella of what is in actuality a joint association, that being GPNA. During the year we will transfer from GMI to cover for all the expenses paid that are outlined in the grant application.





LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

No

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.

*M*



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:

SEE ATTACHED 5F

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.

SEE ATTACHED 5F

*DM*

5E. //

This funding support will help match money raised by GPNA to offset our cost of operating the center at 1094 E. Kentucky Street. The center is owned by GPNA. Numerous ongoing activities and events are held at the center. The focus of what we do there is to meet our annual goals and filed with the IRS in accordance with our 501C3/C4 status. For this year we are reacting to a wide range of issues as to insure our input and presence. The issues have ranged from the city implementing new bike lanes that go in and through our neighborhood, to our monitoring the new Underhill Development taking place on Goss Avenue and to the start up of an informal partnership with SACC to steer a beautification of Goss Avenue from Eastern Parkway going north to the CSX dual RR crossing. We have been coordinating with 4<sup>th</sup> District to combat crime and graffiti issues. We remain involved with the city's Railway Corridor Improvements group and most recently have become an agent to MSD to help keep our neighbors updated on the massive changes taking place in Beargrass Creek to finally put an end to their inept dual drainage system. The board meets monthly at the center, and quarterly we host an open meeting. These meetings are highlighted by a presentation by a guest speaker and a pot luck dinner that encourages socializing. GPNA provides the main dish and drinks. We allow the building to be available for broad public use. Many non profits continue to call upon us. We also allow residents (members or not) to use the facility for large groups they need to host. The use is offered to all at no cost. We remain honed in on encouraging residents to adopt a healthy life style. As example, we encourage and via the Green Institute help anyone interested on how to grow a home garden and on ways to reduce use of LG&E. We plant veggies in our own raised garden plots each growing season and for the 3<sup>rd</sup> year now provide maintenance at the large neighborhood Rain Garden,. We host our annual Shotgun Music Festival in September. In the past year we partnered with Louisville Grows to see planted 100 new trees on the lawns of private property owners living in our area. We also planted a small orchard on our property that includes 4 fruit trees.

5 F. /

We collaborate with numerous area non profits. We work with the Schnitzelburg Wellness Center board to promote their funding and their programs. We have supported VOA's Give a Day program and their Holiday Season programs. We work closely with area churches including Sojourn, St. Therese and Vine Street Baptist. We assist them to aid in helping those residents we know are in need. We have fostered a strong relationship with Center for Neighborhoods (CFN) and have a number of board members who have gone through their Neighborhood Institute program. Recently we had 2 members go through CFN's newly formed Green Institute program. Our facility is used at no cost by a number of non profits for their pot lucks or for general meetings they wish to hold. We are also a sponsor to the SACC # 1 dinner and to 2 teams each season with Germantown Baseball Inc. A last point is that most recently we have worked to forge a closer relationship with Shelby Park Neighborhood Association with the goal of involving them in joint efforts supporting a healthy diet and lifestyle. This is tied to our recent success in seeing a new farm market open last year at the Hope Worsted Mills located at Swan and E Kentucky Streets.



# 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                 |
|--|----------------------|-----------------|------------------------|
|  | Proposed Metro Funds | Non-Metro Funds | (1+2)=3<br>Total Funds |
| A: Personnel Costs Including Benefits                |                      |                 |                        |
| B: Rent/Utilities                                    | 2300                 | 1400            | 3700                   |
| C: Office Supplies                                   |                      | 800             | 800                    |
| D: Telephone   |                      |                 |                        |
| E: In-Town Travel                                    |                      |                 |                        |
| F: Client Assistance (Attach Detailed List)          |                      |                 |                        |
| G: Professional Service Contracts                    |                      |                 |                        |
| H: Program Materials                                 |                      |                 |                        |
| I: Community Events & Festivals (Attach Detail List) |                      |                 |                        |
| J: Small Equipment                                   |                      |                 |                        |
| K: Capital Equipment                                 |                      |                 |                        |
| L: Other Expenses (Attach Detail List)               | 2700                 | 57950           | 54650                  |
| *TOTAL PROGRAM/PROJECT FUNDS                         | 5000                 | 54150           | 59150                  |
| % of Program Budget                                  | %                    | %               | 100%                   |

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

|   |       |
|---|-------|
| Other State, Federal or Local Government                      |       |
| United Way  |       |
| Private Contributions (do not include individual donor names) |       |
| Fees Collected from Program Participants                      |       |
| Other (please specify) ***                                    | 61400 |
| Total Requested for Column 2 Expenses                         | 61400 |

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

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

gm

# Expenses

For FY 2014-15

For Page 6 Line 1  
of Grant Application

Ending June 30, 2015

|                            |                       |       |           |
|----------------------------|-----------------------|-------|-----------|
| Income                     |                       |       |           |
| Reserve Used               |                       |       |           |
| SGF Event Sponsor          |                       |       |           |
| Membership                 | 1100                  |       |           |
| Concessions                | 900                   |       |           |
| Bingo Income               | 53800                 |       |           |
| City Oper. Grant           | 5000                  |       |           |
| Product Sales              | 600                   |       |           |
| Total for Income           | 61400                 |       |           |
| Expenses                   |                       |       |           |
| Reserve to Expenses        |                       |       |           |
| Building-Maintenance       | 2900                  |       |           |
| Building- Insurance        | 2000                  |       |           |
| Building- Utilities        | 0                     |       |           |
| Sponsor G Baseball         | 450                   |       |           |
| Community Relations        | 1800                  |       |           |
| Sponsorships               | 1300                  |       |           |
| Bingo Expenses             | 43600                 |       |           |
| Outside Work               | 1000                  |       |           |
| SGF Event                  | 0                     |       |           |
| General Repairs            | 1600                  |       |           |
| Total for Expenses         | 54650                 |       |           |
| Page 6 Attach Explanations |                       |       |           |
|                            |                       | Metro | Non Metro |
|                            |                       | 1200  | 1700      |
|                            |                       | 1500  | 500       |
|                            |                       | 0     | 450       |
|                            |                       | 0     | 1800      |
|                            |                       | 0     | 1300      |
|                            |                       | 0     | 43600     |
|                            |                       | 0     | 1000      |
|                            |                       | 0     | 1600      |
|                            |                       | 2700  | 51950     |
|                            | Grant Request (other) |       |           |





**For Page 6 Bottom for Other (please specify)  
of Grant Application**

1

Inc  
Reserve Used  
SGF Event Sp  
Membership  
Concessions

SGF Event Sponsor

## Concessions

53800

5000

600

61400

Page 6 Attach Explanations

Non Metro

2900

1200

1500

0

0



1300

43600

1000

0

1600

54650

Grant Request (other)

2700

51950



# 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's Type of Contribution   | Value of Contribution | Method of Valuation |
|--|-----------------------|---------------------|
| SEE ATTACHED PAGE 7  |                       |                     |
|  |                       |                     |
|  |                       |                     |
|  |                       |                     |
| Total Value of In-Kind<br>(to match Program Budget Line Item.<br>Volunteer Contribution & Other In Kind) |                       |                     |

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

Agency Fiscal Year Start Date: July 1

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:

*M*



PROGRAM BUDGET SUMMARY (CONTINUED)

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

| Donor*/Type of Contribution   | Value of Contribution | Method of Valuation                |
|---|-----------------------|------------------------------------|
| Bingo volunteers = 50 weeks for 5 persons   |                       | \$19 per hour per IRS allowance    |
| at 3 hours a session  | 750 hours dedicated   | as shared by MUW's recommendation. |
| Administrator reporting is a 50 weeks at 4 hours a week   | 200 hours dedicated   |                                    |
| for raised and rain garden 3 persons at 30 weeks at 2 hour per  | 180 hours dedicated   |                                    |
| <b>Total Value of In-Kind</b><br>(to match Program Budget Line Item.<br>Volunteer Contribution & Other In Kind) | <b>\$21,470</b>       | <b>1,130 hours at \$19 per</b>     |

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

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

If YES, please explain:



## 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). 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.
5. 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.
6. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end.
7. 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.
8. Applicant 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.
9. 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.
10. 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 initiated each page of the application.

Signature of Legal Signatory:

*Steve McLean*

Date:

*9-18-14*

Legal Signatory: (please print):

*Steve McLean*

Title:

*Treasurer*

Phone:

*502-713-0576*

Extension:

*—*

Email:

*Steve.McLean@louisville.gov*

*SM*

GPNA/GMI

Budget Amounts

For FY 2014-15

Ending June 30, 2015

|                     |        |
|---------------------|--------|
| Income              |        |
| Reserve Used        |        |
| SGF Event Sponsor   | 1200   |
| Donatons/Membersh.  | 1100   |
| Concessions         | 900    |
| Bingo Income        | 53800  |
| City Grants         | 7600   |
| Product Sales       | 600    |
| Total for Income    | 65,200 |
| Expnses             |        |
| Reserve to Expenses | 2450   |
| Building-Maintenace | 2900   |
| Building- Insurance | 2000   |
| Building- Utilities | 3700   |
| Sponsor G Baseball  | 450    |
| Community Relations | 2600   |
| Sponsorships        | 1300   |
| Bingo Expenses      | 43600  |
| Outside Work        | 1000   |
| SGF Event           | 3600   |
| General Repairs     | 1600   |
| Total for Expenses  | 65200  |

Germantown Mission Inc,  
Balance Sheet  
@ September 15, 2014

Assets-

|                             |          |          |
|-----------------------------|----------|----------|
| Checking Account with Chase | \$501.60 |          |
| Total Assets                |          | \$501.60 |

Liabilities and Capital-

|                               |          |          |
|-------------------------------|----------|----------|
| Liabilities- Amount Owed      | 0        |          |
| Capital-                      | \$501.60 |          |
| Total Liabilities and Capital |          | \$501.60 |

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Projected Income Statement  
Fiscal Year 2014-15

|  |            |            |
|--|------------|------------|
| Income                                     |            |            |
| Grant 1 for Shotgun Music Festival         | \$2,600.00 |            |
| Grant 2 for Center Operation Costs         | 5,000.00   |            |
| Total Projected Income                     |            | \$7,600.00 |
| Expenditures                               |            |            |
| Transfers to GPNA to implement grants      | \$7,600.00 |            |
| Total Projected Expenditures               |            | \$7,600.00 |
| Net Gain or Loss Projected for Fiscal Year | -0-        |            |

**Information copy. Do not send to IRS.**

Form **990-N**  
Department of the Treasury  
Internal Revenue Service

**Electronic Notice (e-Postcard)**  
for Tax-Exempt Organizations not Required To File Form 990 or  
990-EZ

OMB No.  
1545-2085

**2013**

Open to Public  
Inspection

**A** For the 2013 calendar year, or tax year beginning 1/1/2013, and ending 12/31/2013.

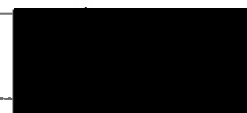
**B** Check if applicable

- ☐ Terminated, Out of Business
- ☒ Gross receipts are normally  
\$50,000 or less

**C** Name of organization: GERMANTOWN MISSION INC  
d/b/a: \_\_\_\_\_

1094 E Kentucky Street  
Louisville, KY, US, 40204-1936

**D** Employer  
Identification



**E** Website:

**F** Name of Principal Officer: Steve Magre

1094 E Kentucky Street  
Louisville, KY, US, 40204-1936

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in Code section 6104.

The time needed to complete and file this form and related schedules will vary depending on individual circumstances. The estimated average times is 15 minutes.

**Note:** This image is provided for your records only. Do NOT mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.

Commonwealth of Kentucky  
Alison Lundergan Grimes, Secretary of State

0311353

Alison Lundergan Grimes  
KY Secretary of State

Received and Filed

1/14/2014 6:20:52 PM

Fee receipt: \$15.00

NARP

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

Annual Report  
Online Filing

ARP

Company: GERMANTOWN MISSION, INC.  
Company ID: 0311353  
State of origin: Kentucky  
Formation date: 2/16/1993 12:00:00 AM  
Date filed: 1/14/2014 6:20:52 PM  
Fee: \$15.00

Principal Office

1094 E. KENTUCKY ST.  
LOUISVILLE, KY 40204

Registered Agent Name/Address

JUDY M MAGRE  
1094 E. KENTUCKY ST.  
LOUISVILLE, KY 40204

Current Officers

|                |             |
|----------------|-------------|
| President      | Tomy Molloy |
| Treasurer      | Steve Magre |
| Vice President | Judy Magre  |

Directors

|          |             |
|----------|-------------|
| Director | Steve Magre |
| Director | Tomy Molloy |
| Director | Judy Magre  |

Signatures

|           |             |
|-----------|-------------|
| Signature | Steve Magre |
| Title     | Treasurer   |

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

DEPARTMENT OF THE TREASURY

Date: MAY 12 1988

GERMANTOWN MISSION INC  
1094 E KENTUCKY ST  
LOUISVILLE, KY 40204-1936

Dear Applicant:

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

Your exempt status under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3) is still in effect. Based on the information you submitted, we have determined that you are not a private foundation within the meaning of section 509(a) of the Code because you are an organization of the type described in section 509(a)(1) and 170(b)(1)(A)(vi).

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(1) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(1) organization.

If we have indicated in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

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

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

Sincerely yours,

*L. Ashley Boulden*

District Director

*Call Jeff Sygal  
at Sygal and  
Co request their  
review.*

Letter 1050 (DO/CS)

ARTICLES OF INCORPORATION

OF

GERMANTOWN MISSION, Inc.

RECEIVED & FILED

\$ 8.00

FEB 16 11 00 AM '93

DOE DABLADE  
SECRETARY OF STATE  
COMMONWEALTH OF KENTUCKY  
BY PC-LB

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

ARTICLE I

The name of the Corporation shall be:

GERMANTOWN MISSION, Inc.

ARTICLE II

The duration of the Corporation shall be perpetual.

ARTICLE III

The address of the registered office of the corporation is:

1094 E. Kentucky St.  
Louisville, Ky. 4-2-4

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

Jack Oliver

The principal office of the Corporation is located at:

1094 E. Kentucky St.  
Louisville, Ky. 40204

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

ARTICLE IV

The Corporation is organized and shall be operated exclusively for charitable and educational purposes as described within Section 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), including for such purposes the making of distributions to organizations and individuals for the



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

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

- 1) provide a wide range of charitable, educational, and social services to senior citizens and the disabled, including but not limited to, free or low cost meals, free or low cost shut-in meal service, and health and nutritional services;
- 2) provide educational and recreational services to youth and low income families;
- 3) engage in other activities consistent with the above purposes.

#### ARTICLE V

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

#### ARTICLE VI

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

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

b) Notwithstanding any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on:

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

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

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

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

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

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

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

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

#### ARTICLE VII

The name and address of the incorporator is:

##### INCORPORATOR

Jack Oliver

##### ADDRESS

1094 E. Kentucky St.  
Louisville, Ky. 40204

#### ARTICLE VIII

The initial Board of Directors shall consist of four (4) Directors. The names and addresses of the members of the initial Board of Directors are:

DIRECTOR

Jack Oliver

John J. Olliges, Jr.

Carol S. Olliges

Carmel Eckenfels

ARTICLE IX

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

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

ARTICLE X

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

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

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

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

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

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

This paragraph b) applies only to acts or omissions or breaches of duty occurring after July 15, 1988.

ARTICLE XI

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

ARTICLE XII

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

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

ARTICLE XIII

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

IN TESTIMONY WHEREOF, witness the signature of the Incorporator of this Corporation, this 13th day of January, 1993.

  
JACK OLIVER, INCORPORATOR

STATE OF KENTUCKY )  
 )  
COUNTY OF JEFFERSON )

The foregoing Articles of Incorporation were acknowledged before me this 13th day of January, 1993, by JACK OLIVER. Witness my signature and seal of office.

My Commission Expires: \_\_\_\_\_

Notary Public, State at Large, KY.  
My commission expires July 27, 1993

*F. Linda Durrence*  
\_\_\_\_\_  
NOTARY PUBLIC  
STATE AT LARGE, KENTUCKY

This Document Prepared By:

*Jeffrey B. Segal*  
\_\_\_\_\_  
JEFFREY B. SEGAL  
Attorney at Law  
LEGAL AID SOCIETY, INC.  
425 West Muhammad Ali Blvd.  
Louisville, Kentucky 40202  
(502) 584-1254

A21072

Document No: 1993021072  
Lodged By: GERMAN PARISTOWN INC  
Recorded On: Feb 23, 1993 01:35:06 P.M.  
Total Fees: \$10.00  
County Clerk: Rebecca Jackson  
Deputy Clerk: SHERRI

**Request for Taxpayer  
Identification Number and Certification**

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

|  |  |   |
|--|--|---|
| Print or type<br>See Specific Instructions on page 2.                              | Name (as shown on your income tax return)<br><b>GRANMONTOWN MISSION INC.</b>   |   |
|  | Business name/disregarded entity name, if different from above   |   |
|  | Check appropriate box for federal tax classification:<br><input checked="" type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate<br><br><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ |   |
|  | <input checked="" type="checkbox"/> Other (see instructions) ▶ <b>501(c)(13)</b>   |   |
|  | <input checked="" type="checkbox"/> Exempt payee   |   |
| Address (number, street, and apt. or suite no.)<br><b>1094 W. MONTECKEY STREET</b> |  | Requester's name and address (optional) |
| City, state, and ZIP code<br><b>LOUISVILLE, KY. 40204</b>                          |  |   |
| List account number(s) here (optional)   |  |   |

**Part I Taxpayer Identification Number (TIN)**

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

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

**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.

|                  |   |                         |
|------------------|---|-------------------------|
| <b>Sign Here</b> | Signature of U.S. person ▶ <b>[Signature]</b> | Date ▶ <b>11-3-2013</b> |
|------------------|---|-------------------------|

**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.

**GERMANTOWN MISSION, INC.****General Information**

|                             |  |
|-----------------------------|--|
| <b>Organization Number</b>  | 0311353  |
| <b>Name</b>                 | GERMANTOWN MISSION, INC.                                     |
| <b>Profit or Non-Profit</b> | N - Non-profit   |
| <b>Company Type</b>         | KCO - Kentucky Corporation                                   |
| <b>Status</b>               | A - Active   |
| <b>Standing</b>             | G - Good   |
| <b>State</b>                | KY   |
| <b>File Date</b>            | 2/16/1993  |
| <b>Organization Date</b>    | 2/16/1993  |
| <b>Last Annual Report</b>   | 1/14/2014  |
| <b>Principal Office</b>     | 1094 E. KENTUCKY ST.<br>LOUISVILLE, KY 40204                 |
| <b>Registered Agent</b>     | JUDY M MAGRE<br>1094 E. KENTUCKY ST.<br>LOUISVILLE, KY 40204 |

**Current Officers**

|                       |                                    |
|-----------------------|------------------------------------|
| <b>President</b>      | <a href="#"><u>Tomy Molloy</u></a> |
| <b>Vice President</b> | <a href="#"><u>Judy Magre</u></a>  |
| <b>Treasurer</b>      | <a href="#"><u>Steve Magre</u></a> |
| <b>Director</b>       | <a href="#"><u>Steve Magre</u></a> |
| <b>Director</b>       | <a href="#"><u>Tomy Molloy</u></a> |
| <b>Director</b>       | <a href="#"><u>Judy Magre</u></a>  |

**Individuals / Entities listed at time of formation**

|                     |   |
|---------------------|---|
| <b>Director</b>     | <a href="#"><u>JACK OLIVER</u></a>          |
| <b>Director</b>     | <a href="#"><u>JOHN J. OLLIGES, JR.</u></a> |
| <b>Director</b>     | <a href="#"><u>CAROL S. OLLIGES</u></a>     |
| <b>Director</b>     | <a href="#"><u>CARMEL ECKENFELS</u></a>     |
| <b>Incorporator</b> | <a href="#"><u>JACK OLIVER</u></a>          |

**Images available online**

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

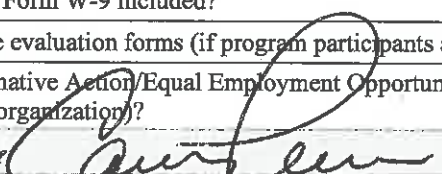
|                                      |           |        |                             |                            |
|--------------------------------------|-----------|--------|-----------------------------|----------------------------|
| <a href="#"><u>Annual Report</u></a> | 1/14/2014 | 1 page | <a href="#"><u>PDF</u></a>  |                            |
| <a href="#"><u>Annual Report</u></a> | 1/20/2013 | 1 page | <a href="#"><u>PDF</u></a>  |                            |
| <a href="#"><u>Annual Report</u></a> | 1/10/2012 | 1 page | <a href="#"><u>PDF</u></a>  |                            |
| <a href="#"><u>Annual Report</u></a> | 3/15/2011 | 1 page | <a href="#"><u>tiff</u></a> | <a href="#"><u>PDF</u></a> |
| <a href="#"><u>Annual Report</u></a> | 3/26/2010 | 1 page | <a href="#"><u>tiff</u></a> | <a href="#"><u>PDF</u></a> |
| <a href="#"><u>Annual Report</u></a> | 2/12/2009 | 1 page | <a href="#"><u>tiff</u></a> | <a href="#"><u>PDF</u></a> |
| <a href="#"><u>Annual Report</u></a> | 3/5/2008  | 1 page | <a href="#"><u>tiff</u></a> | <a href="#"><u>PDF</u></a> |

|                           |           |         |
|---------------------------|-----------|---------|
| Annual Report             | 7/27/1998 | 1 page  |
| Annual Report             | 7/1/1997  | 1 page  |
| Annual Report             | 7/1/1996  | 1 page  |
| Annual Report             | 7/1/1995  | 1 page  |
| Annual Report             | 7/1/1994  | 1 page  |
| Articles of Incorporation | 2/16/1993 | 6 pages |



DCI 62014 PH12:50 m.w.

## NDF NON-PROFIT APPLICATION CHECKLIST

|   |                            |           |
|---|----------------------------|-----------|
| <b>Legal Name of Applicant Organization:</b> Germantown Mission, Inc  |                            |           |
| Program Name: \$5,000.00  | Request Amount: \$5,000.00 | Yes/No/NA |
| <b>Request form:</b> Is the NDF request form signed by all Council Member(s) appropriating funding?   |                            | Yes       |
| <b>Request form:</b> Is the funding proposed less than or equal to the request amount?  |                            | Yes       |
| <b>Request form:</b> Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?  |                            | Yes       |
| <b>Application Page 1:</b> Has prior Metro funds committed/granted been disclosed?  |                            | Yes       |
| <b>Application Page 1:</b> Is the application properly signed and dated by authorized signatory?  |                            | Yes       |
| <b>Application Page 3:</b> Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?   |                            | Yes       |
| <b>Application Pages 3 – 5:</b> Is the proposed public purpose of the program well-documented?  |                            | Yes       |
| <b>Application 4:</b> Is there adequate documentation of how the proceeds of the fundraiser will be spent?  |                            | n/a       |
| <b>Application Budget Page 6:</b> Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for "Metro, Non Metro and Total" expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses? |                            | Yes       |
| <b>Faith Based Organizations:</b> Is the signed Faith Based Form signed and included?   |                            | n/a       |
| <b>Jefferson County Only:</b> Will all funding be spent in Louisville/Jefferson County?   |                            | Yes       |
| <b>Capital Project(s) request:</b> Is the cost estimate(s) from proposed vendor(s) included?  |                            | n/a       |
| <b>Good Standing:</b> Is the entity in good standing with: <ul style="list-style-type: none"> <li>Kentucky Secretary of State – include Secretary of State website information on organization</li> <li>Louisville Metro Government – check OMB monthly report filed in Council Financial Reports</li> <li>Internal Revenue Service – most recent Form 990 included</li> </ul>                              |                            | Yes       |
| <b>Separate Taxing Districts:</b> If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?   |                            | n/a       |
| <b>Small Cities:</b> Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)   |                            | n/a       |
| <b>Operating Requests:</b> Is recommended operating funding less than or equal to 33% of total operating budget?  |                            | Yes       |
| <b>IRS Exempt Proof:</b> Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?  |                            | Yes       |
| <b>Operating Budget:</b> Is the organization's current fiscal year operating budget included?   |                            | Yes       |
| <b>Ordinance Required:</b> Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.   |                            | No        |
| <b>Board Members:</b> Is the entity's board member list (with term length/term limits) included?  |                            | Yes       |
| <b>Staff:</b> Is a list of the highest paid staff included with their expected annual personnel costs?  |                            | n/a       |
| <b>Annual Audit:</b> Is the most recent annual audit (if required by organization) included?  |                            | n/a       |
| <b>Rent Requests:</b> Is a copy of signed lease included?   |                            | n/a       |
| <b>Articles of Incorporation:</b> Are the Articles of Incorporation of the organization included?   |                            | Yes       |
| <b>IRS Form W-9:</b> Is the IRS Form W-9 included?  |                            | Yes       |
| <b>Evaluation Forms:</b> Are the evaluation forms (if program participants are given evaluation forms) included?  |                            | n/a       |
| <b>Affirmative Action:</b> Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?   |                            | n/a       |
| <b>Prepared by:</b>  <b>Date:</b> 02 Oct 14  |                            |           |

Commonwealth of Kentucky  
Alison Lundergan Grimes, Secretary of State

NARP  
0311353  
Alison Lundergan Grimes  
KY Secretary of State  
Received and Filed  
1/14/2014 6:20:52 PM  
Fee receipt: \$15.00

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

Annual Report  
Online Filing

ARP

Company: GERMANTOWN MISSION, INC.  
Company ID: 0311353  
State of origin: Kentucky  
Formation date: 2/16/1993 12:00:00 AM  
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Principal Office

1094 E. KENTUCKY ST.  
LOUISVILLE, KY 40204

Registered Agent Name/Address

JUDY M MAGRE  
1094 E. KENTUCKY ST.  
LOUISVILLE, KY 40204

Current Officers

|                |             |   |
|----------------|-------------|---|
| President      | Tomy Molloy | 1021 Charles St., Louisville, Ky. 40204 |
| Treasurer      | Steve Magre | 1122 Rammers Ave., Louisville, KY 40204 |
| Vice President | Judy Magre  | 1122 Rammers Ave., Louisville, KY 40204 |

1 year  
JULY TO JULY  
FOR ALL

Directors

|          |             |   |
|----------|-------------|---|
| Director | Steve Magre | 1094 East Kentucky St., Louisville, Ky. 40204 |
| Director | Tomy Molloy | 1094 East Kentucky St., Louisville, Ky. 40204 |
| Director | Judy Magre  | 1094 East Kentucky St., Louisville, Ky. 40204 |

Signatures

|           |             |
|-----------|-------------|
| Signature | Steve Magre |
| Title     | Treasurer   |