

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

JUN 30 2014 PM 4:07 *PH*

**Applicant/Program:** Center for Neighborhoods / Our Community Design Center

**Executive Summary of Request:**  
P.A.I.N.T. project in District 5 in Chickasaw neighborhood at Cecil and Greenwood Ave. (Producing Art in Neighborhoods Together)

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.

5 District #      Cheri B. Hamilton Primary Sponsor Signature      \$ 500<sup>00</sup> Amount      6-30-14 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.

Reviewed by: \_\_\_\_\_  
 Appropriations Committee Chairman      Date

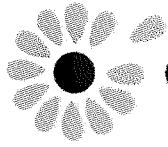
**Staff's Office Only:**  
 Request Amount: \_\_\_\_\_ Committee Amended Appropriation: \_\_\_\_\_  
 Original Appropriation: \_\_\_\_\_ Council Amended Appropriation: \_\_\_\_\_

OFFICE OF METRO COUNCIL CLERK  
 REVIEWED

DATE 7-1-14 TIME 11:58am

## NDF NON-PROFIT APPLICATION CHECKLIST

<b>Legal Name of Applicant Organization:</b> <i>Truist Community Design Center - \$500,000</i>		
Program Name:	Request Amount:	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?		
Yes		
<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?		
Yes		
<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?		
No		
<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)		
Yes		
<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?		
Yes		
<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)?		
Yes		
<b>Prepared by:</b> <i>[Signature]</i>		<b>Date:</b> <i>6-24-14</i>



Center For Neighborhoods



Contact: Lisa Dettlinger  
Telephone: 502.589.0343  
Cell Phone: 502.905.4342  
Email: [lisad@centerforneighborhoods.org](mailto:lisad@centerforneighborhoods.org)

FOR IMMEDIATE RELEASE  
June 25, 2014

### **Dedication Ceremony for the Chickasaw P.A.I.N.T. Project**

**Monday, June 30, 2014**  
**2:00 PM**  
**312 Cecil Avenue**

Center For Neighborhoods invites the community to the dedication ceremony celebrating the installation of the first P.A.I.N.T. project in the Chickasaw neighborhood, "*On the Road to Life – Challenge Your Self*" by local artist, Victor Sweatt. The Chickasaw PAINT project in Louisville Metro Council District 5 is being completed in conjunction with two other PAINT projects located in the Parkland neighborhood.

Located on a vacant property at the corner of Cecil Avenue and Greenwood Ave, the theme of the mural, "*On the Road to Life- Challenge Your Self*," focuses on history, education, and culture along with anti-drug and violence slogans. Utilizing perspective drawings, roads and streets will showcase the history of Isaac Murphy, Louis Brandeis, Muhammad Ali, Anne McCarty Braden and Lyman T. Johnson as local role models leading into an educational component depicting kindergarten to post-secondary students wearing graduation caps. Inspirational quotes such as "Dare to Dream, Explore Worlds of Adventure" and "Together We can Make a Difference" are scribed on the mural. Aspects of the neighborhood culture are showcased in scenes of family outings to nearby local parks, Shawnee and Chickasaw. Slogans such as "Friends don't let friends drive drunk" and "Say no to drugs - choose life" will be intertwined between scenes. Both sides of the building will reflect continuity in healthy living, perseverance, determination and pride.

"We hope that young people who visit this corner will have their curiosity sparked to want to find out just who these historical figures are that are depicted on the mural and their important contributions to our local history," said Councilwoman Cheri Bryant Hamilton (D-5). "We're glad that local youth were able to participate in this public art project and that they can point to it with a sense of pride that they helped beautify a vacant structure that was an eyesore in their neighborhood." A group of young folks, led by Bill Murphy (a volunteer with the Organization of Black Aerospace Professionals) and others from the Shawnee Arts and Cultural Center, assisted Mr. Sweatt in the installation of the mural.

**This project was commissioned by the P.A.I.N.T. Program, an initiative of Center For Neighborhoods.**

P.A.I.N.T. -*Producing Art in Neighborhoods Together* - brings neighborhoods, residents, and contemporary visual artists together to create new, site-specific, neighborhood-based public art projects in neighborhoods throughout the Louisville Metro Area. By Producing Art In Neighborhoods Together, the ideas and desires of residents in Louisville's diverse neighborhoods will be realized while strengthening the unique historical and cultural assets of our community.

To schedule an interview with the artist, Victor Sweatt, please contact Lisa Dettlinger, [lisad@centerforneighborhoods.org](mailto:lisad@centerforneighborhoods.org) or 502.589.0343.

**P.A.I.N.T. is made possible through funding by Louisville Metro Council Districts 1 and 5.**

Center For Neighborhoods | 610 South 4<sup>th</sup> Street, Ste. 701 | Louisville, KY 40202



## Louisville Metro Council

June 30, 2014

For Immediate Release:

### **District 5's new P.A.I.N.T. Project has an important message about the future for young people**

*New Mural at Cecil and Greenwood offers a challenge*

Louisville – A new mural in the Chickasaw Neighborhood has an important message for young people in the community. On Monday, Councilwoman Cheri Bryant Hamilton (D-5) joined officials with the Center for Neighborhoods for the dedication of “On the Road to Life – Challenge Your Self” by local artist, Victor Sweatt.

“This mural could be an inspirational message to the young people who see it here at the corner of Cecil and Greenwood,” says Hamilton. “We hope they will be curious to learn more about the people and the history depicted in this wonderful neighborhood art.”

The mural is located on a vacant lot at the corner and its theme “On the Road to Life, Challenge Yourself” has many messages. Those messages focus on history, education and culture along with words supporting anti-drug and anti-violence efforts.

The mural is one of three new P.A.I.N.T. projects funded by District 5 and District 1. Two of the projects were officially dedicated on Sunday at the Ashanti House on 28<sup>th</sup> Street and the Parkland Community Garden.

At Cecil and Greenwood, the mural was created with the help of local young people, and other volunteers like Bill Murphy of the Organization of Black Aero-space Professionals. Others from the Shawnee Arts and Culture Center also assisted.

“As a community, we have focused our attention on helping young people develop a sense of purpose,” said Hamilton. “Projects such as this not only help turn vacant structures into works of public art, they show our young people how easily creativity can influence communities.”

P.A.I.N.T. stands for Producing Art In Neighborhoods Together.

-30-

For Further Media Assistance Contact:  
Tony Hyatt 574-4137/ 526-3622  
[tony.hyatt@louisvilleky.gov](mailto:tony.hyatt@louisvilleky.gov)



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
<b>Legal Name of Applicant Organization:</b> Louisville Community Design Center dba/Center For Neighborhoods <i>(as listed on: <a href="http://www.sos.ky.gov/business/records">http://www.sos.ky.gov/business/records</a>)</i>			
<b>Main Office Street &amp; Mailing Address:</b> 610 S. 4th Street, Ste. 701			
<b>Website:</b> centerforneighborhoods.org			
<b>Applicant Contact:</b>	Lisa Dettlinger	<b>Title:</b>	Associate Director
<b>Phone:</b>	502.589.0343	<b>Email:</b>	lisad@centerforneighborhoods.org
<b>Financial Contact:</b>	Becky Blaire	<b>Title:</b>	Financial Manager
<b>Phone:</b>	502.589.0343	<b>Email:</b>	beckyb@centerforneighborhoods.org
<b>Organization's Representative who attended NDF Training:</b> Lisa Dettlinger			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
<b>Program Facility Location(s):</b>	Multiple sites		
<b>Council District(s):</b>	1 and 5	<b>Zip Code(s):</b>	40211, 40212, 40216
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
<b>PROGRAM/PROJECT NAME:</b> PAINT (Producing Art In Neighborhoods Together)			
<b>Total Request: (\$)</b>	\$500.00	<b>Total Metro Award (this program) in previous year: (\$)</b>	\$25,000
<b>Purpose of Request (check all that apply):</b>			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input type="checkbox"/> IRS Exempt Status Determination Letter <input type="checkbox"/> Current Year Projected Budget <input type="checkbox"/> List of Board of Directors (include term & term limits) <input type="checkbox"/> Current financial statement <input type="checkbox"/> Most recent IRS Form 990 or 1120-H <input type="checkbox"/> Articles of incorporation <input type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense		<input type="checkbox"/> Signed lease if rent costs are being requested <input type="checkbox"/> IRS Form W9 <input type="checkbox"/> Evaluation forms if used in the proposed program <input type="checkbox"/> Annual audit (if required by organization) <input type="checkbox"/> Faith Based Organization Certification Form, if required <input type="checkbox"/> Staff including the 3 highest paid staff	
<b>For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.</b>			
<b>Source:</b>	Metro Department of Community Services and Revitalization	<b>Amount: (\$)</b>	\$75,000.00
<b>Source:</b>	Metro Council Green Institute NDF	<b>Amount: (\$)</b>	\$10,200.00
<b>Source:</b>	District 12 Neighborhood Inventory Personal Service Contract	<b>Amount: (\$)</b>	\$5,00.00
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Has the applicant met the BBB Charity Review Standards? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 3 – AGENCY DETAILS

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

**Mission:** Center for Neighborhoods supports and empowers neighborhoods to create stronger and more vital neighborhoods.

**Vision:** We envision a greater Louisville community with caring and empowered people, making and renewing neighborhoods that are strong and vital.

Center for Neighborhoods (CFN) cultivates grassroots leadership, provides leadership education, partners with neighborhoods in community planning efforts, facilitates civic dialogue among stakeholders and actively participates in neighborhood-based development and improvement projects. CFN facilitates civic engagement that empowers citizens to improve the quality of life in their neighborhoods and sustains our community.

**Specific programs include:**

Neighborhood Institute

Green Institute

Neighborhood Assessment and Planning Program (NAPP)

Neighborhood Association Starter Kits (NASK)

Producing Art in Neighborhoods Together (PAINT)

Walkability Assessments

Grassroots Gala

Neighborhood Resource Center

CFN Ambassador Program (Technical Assistance to Neighborhoods)



## 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.):**

This NDF Application is in addition to an approved application for District 1. Councilwoman Cheri Bryant Hamilton is contributing funds towards the original NDF approved project to support the PAINT project in District 5 at 1033 Cecil Avenue.

This overall project effort has 4 component parts that will run from January 1, 2014 to June 30, 2014.

The individual projects included in this effort include:

1. Parkland Neighborhood Assessment
2. PAINT #1: Ashante House, 1150 S. 28th Street
3. PAINT #2: 1033 Greenwood Avenue
4. PAINT #3: Parkland Community Garden

The Center for Neighborhoods developed Neighborhood Assessments in concert with the Vital Neighborhoods Team of Metro United Way over a decade ago. In all, over 20 assessment projects have been completed throughout Metro Louisville. These projects provide neighborhoods with a tool to assess resident opinions about neighborhood conditions, collect and analyze important data about the neighborhood, and facilitate creation of a neighborhood action plan to guide the Neighborhood Association for subsequent months and years. These projects are of shorter duration than a full Neighborhood Plan and provide leaders with a consensus driven plan of action on issues of importance to the neighborhood. A general overview of the Neighborhood Assessment process is attached.

Neighborhood Assessments have three phases:

- 1) The Neighborhood Snapshot, compiled by staff at the Center for Neighborhoods, includes census data, available public safety, housing, education and labor statistics, a brief neighborhood history, and representative photographs of neighborhood landmarks and street scenes.
- 2) A Resident Survey measures the perception of the neighborhood regarding key issues of concern to the neighborhood – public safety, cleanliness, streets and traffic, housing affordability and conditions, and neighborhood pride. The survey is administered by the Neighborhood Association with support from Center for Neighborhoods staff.
- 3) Through a three-hour Resident Workshop, Center for Neighborhoods facilitates the creation of an Action Plan and Action Matrix, which generates a clear sense of direction for short and long term actions to improve and maintain the neighborhood.

Producing Art in Neighborhoods Together (PAINT) brings neighborhoods and artists together to create public art projects in neighborhoods throughout the Louisville Metro Area and to increase civic engagement in neighborhoods that have expressed the desire to aesthetically and artistically improve their neighborhoods. Art installations provide temporary uses of vacant properties that reactivate distressed urban blocks and creating lively corridors. They offer low-risk, low-cost opportunities for fresh spaces for artistic expression and interesting, safe public spaces. Well designed temporary installations can create the social and economic energy to address blight by attracting tenants, growing retail demand and creating micro opportunities.

PAINT projects are:

1. Neighborhood Focused. A neighborhood includes geographic, social, cultural, civic, economic, and historical components and can include a district or locality, a political ward or precinct.
2. Participatory. Marked by requiring, or involving participation, especially affording the opportunity for individual participation.
3. Public. Open to the view of all; existing or conducted in public.

The PAINT program emphasizes:

- Production of high-quality and meaningful cultural assets for the neighborhood
- Community engagement
- Collaborative partnerships
- Strengthening neighborhood identity and sense of place by producing projects of relevance to unique locations
- Improvement of residents quality of life in Louisville Metro

By Producing Art in Neighborhoods Together, the ideas and desires of residents in Louisville's diverse neighborhoods will be realized while strengthening the unique historical and cultural assets of our community.

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

Expenses that will be supported by funding include:

- Partial salary for Associate Director, Lisa Dettlinger
- Hourly expenses as appropriate for contract staff including Interim Director Rosanne Kruzich, Program Coordinator John Hawkins, Resource Analyst Christi Stevens and Bookkeeper Becky Blair
- Payment to artists and contractors for design and implementation of PAINT projects
- Program and supply costs associated with conducting community meetings, mailings, production of reports
- Stipends may be paid for artists proposals





## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

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

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

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

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



## 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:**

**Benefits**

Both the Neighborhood Assessment project and the PAINT projects are designed to engage residents in activities and processes that increase awareness of their neighborhood's assets. Neighborhood Associations are strengthened with a renewed sense of community pride and participation both in their neighborhood and the larger Metro Louisville community.

Neighborhood residents learn more about the history of their neighborhood. They meet their neighbors. Youth gain an appreciation of art and expression by participating alongside adults in creating and improving public spaces. The Action Matrix helps residents prioritize issues and solutions to improve their neighborhood.

**Measurable Outcomes from the Neighborhood Assessment**

- Stronger Neighborhood Association
- Increased understanding of neighborhood assets and challenges
- Consensus about Action Priorities for neighborhood improvement
- More residents involved in neighborhood improvement projects

**Data Collection for the Neighborhood Assessment**

- Number of residents completing the Resident Survey
- Number of residents participating in the Resident Workshop
- Number of residents who continue to participate and/or become members of the Neighborhood Association
- Recommendations from Action Matrix implemented 6 months and 1 year after project completion

**Measurable Outcomes from the PAINT Projects**

- Design concepts generated for 4 participating neighborhood projects
- Public neighborhood art project installed on site
- Residents, artists, and interested public engaged in the design process
- Residents, artists, and interested public participating in the installation of the art projects
- Increase in public activity on and around the installation sites
- Clean up/Beautify property and enhance the area
- Increased interest/awareness to property and/or area to develop adjacent properties

**Data Collection for the PAINT Projects**

- Number of design concepts submitted for each installation site
- Number of residents, artists, and general public participating in project planning, community design workshop, and neighborhood project implementation. [SOURCES: Attendance sheets, head counts, and inventory of submitted concepts]
- Number of community events held at installation sites
- Increase in property values and/or development interest to adjacent properties after installation is complete

**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.**

Chickasaw Federation  
Shawnee Arts and Cultural Center  
Parkland Neighborhood Improvement Association (PNIA)  
Ashante House  
Lake Dreamland Fire Department  
Greenwood Cemetery  
Parkland Community Garden participants  
Booker Design Collaborative  
Commission on Public Art (COPA)



**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

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

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

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
<b>A: Personnel Costs Including Benefits</b>	\$2,500.00		\$2,500.00
<b>B: Rent/Utilities</b>	\$1,000.00		\$1,000.00
<b>C: Office Supplies</b>	\$500.00		\$500.00
<b>D: Telephone</b>			
<b>E: In-town Travel</b>			
<b>F: Client Assistance (Attach Detailed List)</b>			
<b>G: Professional Service Contracts</b>	\$7,400.00		\$7,400.00
<b>H: Program Materials</b>	\$14,100.00		\$14,100.00
<b>I: Community Events &amp; Festivals (Attach Detail List)</b>			
<b>J: Small Equipment</b>			
<b>K: Capital Equipment</b>			
<b>L: Other Expenses (Attach Detail List)</b>		\$250.00	\$250.00
<b>*TOTAL PROGRAM/PROJECT FUNDS</b>	\$25,500.00	\$250.00	\$25,750.00
<b>% of Program Budget</b>	99 %	1 %	100%

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

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

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

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



**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

**Detail 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
Space for workshops and committ <sub>+</sub>	\$900.00	6 meetings/workshops @ \$150.00 per 4 hour use
Donated program materials for ins <sub>+</sub>	\$750.00	\$250.00 donated for each PAINT project
Volunteer Time	\$3,800.00	220 hours @ \$17.50 per hour (40 hours for NAP/180 hours for PAINT)
<i>Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution &amp; Other In Kind)</i>	\$5,500.00	

**\* 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 1st

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

If YES, please explain:



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 6 – CERTIFICATIONS & ASSURANCES

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

#### Standard Assurances

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

#### Standard Certifications

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

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

### SECTION 7 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:		Date:	6/27/2014
Legal Signatory: (please print):	Lisa M Dettlinger	Title:	Associate Director
Phone:	502.589.0343	Extension:	306
Email:	lisad@centerforneighborhoods.org		

**Louisville Metro Council**

**Neighborhood Development Fund Application**

**PAINT (Producing Art In Neighborhoods Together)**

Additional Information:

*Page 1:*

*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.*

**Metro Council District 1 PAINT Projects/Parkland Neighborhood Assessment NDF - \$25,000**

**Metro Council District 6 California Leadership Development Project - \$4,935**

**VAP Mapping Personal Service Contract - \$15,000**

*Page 6:*

*Program/Project Expenses*

*L: Other Expenses (Attach Detail List)*

**Private Contributions \$250.00**

DISTRICT DIRECTOR  
INTERNAL REVENUE SERVICE  
CINCINNATI, OHIO

JUL - 8 1975

RECEIVED

EP/EO DIVISION 1975

E:EO:T:R:1:3

This ruling is applicable only  
to the taxpayer named herein.  
It must not be copied, used,  
or cited as a precedent by  
Internal Revenue Service  
personnel at the discretion  
of their offices.

The Louisville Community Design  
Center, Inc.  
517 West Ormsby  
Louisville, Kentucky 40203

Key District: Cincinnati, Ohio  
Accounting Period Ending: December 31  
Form 990 Required:  Yes  No

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code as of January 30, 1974.

We have further determined you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in section 170(b)(1)(A)(vi) and 509(a)(1).

You are not liable for social security (FICA) taxes unless you file a waiver of exemption certificate as provided in the Federal Insurance Contributions Act. You are not liable for the taxes imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes.

Donors may deduct contributions to you as provided in section 170 of the Code as of January 30, 1974. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible as of January 30, 1974 for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

RECEIVED  
CIB

The Louisville Community Design Center, Inc. 7 9 53 AM '75

If your purposes, character, or method of operation is changed, you must let your key District Director know so he can consider the effect of the change on your exempt status. Also, you must inform him of all changes in your name or address.

The block checked at the beginning of this letter shows whether you must file Form 990, Return of Organization Exempt From Income Tax. If the Yes box is checked, you are required to file Form 990 only if your gross receipts each year are normally more than \$5,000. 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, for failure to file the return on time.

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. 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.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

We are informing your key District Director of this action. Because this letter could help resolve any questions about your exempt status and your foundation status, please keep it in your permanent records.

Thank you for your cooperation.

Sincerely yours,

(Signed) Jeanne S. Gessay

cc: DD, Cincinnati, with  
Form 3936  
Attn: EO Group

Jeanne S. Gessay  
Chief, Rulings Section 1  
Exempt Organizations  
Technical Branch

SParrish:bn. 6-24-75



**Center for Neighborhoods**  
**FY14 Annual Budget (July, 2013 - June, 2014)**

<b>CFN Annual Revenue</b>	<b>Approved Budget</b>
Metro Department of Community Services and Revitalization	\$75,000
Green Institute (multiple sponsors)	\$45,000
Walkability Assessments (3 @ \$2750 ea)	\$8,250
Neighborhood Association Starter Kits (NASKs) (4 @ \$3000 ea)	\$12,000
Neighborhood Assessment and Planning Program (NAPP)	\$44,000
Other CFN Fundraising	\$51,955
<b>Total CFN Annual Revenue</b>	<b>\$236,205</b>

<b>CFN Annual Expense</b>	<i>Net Salary</i>	<i>Payroll Tax</i>	<i>Simple IRA</i>	<i>Health Insurance</i>	<b>Total Cost</b>
<b>Personnel</b>					
Executive Director	\$52,000	\$4,190	\$1,560	\$3,600	\$61,350
Interim Executive Director (Rosanne -- contract pending)					
Program Director (Lisa)	\$41,250	\$3,370	\$1,240	\$3,600	\$49,460
NI Program Assistant					\$10,000
NRC Program Assistant					\$15,000
Green Institute Project Mgr & Assistant (Ben & Alex)					\$16,500
Bookkeeping (Becky)					\$15,000
Other Professional Services (Doug McGee, Jack Trawick, etc)					\$23,000
<b>Total CFN Personnel Expense</b>					<b>\$190,310</b>

<b>Operating Expenses</b>	
Office Lease (Less Subleases)	\$11,400
Telephone & Internet	\$3,750
General Liability & DO Insurance	\$1,655
KY Unemployment	\$585
Worker's Compensation	\$830
CPA Audit/Financial Review (2011, 2012, 2013)	\$8,500
Dues & Subscriptions (CNPE)	\$75
Miscellaneous	\$100
Equipment (computers, software, networking)	\$1,000
Website Maintenance	\$2,000
Office Supplies	\$2,000
GI/NI Meals	\$7,000
GI/NI Program Expense	\$7,000
<b>Total Operating Expenses</b>	<b>\$45,895</b>

<b>Total CFN Personnel and Operating Expenses</b>	<b>\$236,205</b>
<i>Balance</i>	<i>\$0</i>

## Center For Neighborhoods – Board of Directors

Gordon Garner, Chairman  
7300 Happy Hollow Road  
Prospect, KY 40059  
(502) 228-0520  
gordon@thegarner.net  
2004

Michael O'Leary  
1963 Payne St.  
Louisville, KY 40206  
(502) 899-1364  
mike.oleary@twc.com  
2003

Edna McDonald  
3405 Fountain Drive #4  
Louisville, KY 40218  
(502) 454-3517  
edna40218@yahoo.com  
1982

Bruce Duncan  
1899 Ivanhoe Ct.  
Louisville, KY 40205  
(502) 585-5434  
blduncan@insightbb.com  
1985

Barbara Sinai  
60 Eastover Court  
Louisville, KY 40206  
(502) 895-8914  
jjsina01@hotmail.com  
1998

Leo Klarer  
968 Swan St.  
Louisville, KY 40204  
(502) 589-5592  
gckarch@bellsouth.net  
2005

George Vest  
205 Daleview Lane  
Louisville, KY 40207  
(502) 893-5990  
geovestky@bellsouth.net  
2005

Camille Bathurst  
3604 Constantine Drive  
Prospect, KY 40059  
(502) 228-5084  
camillebathurst@aol.com  
2005

Roberto Bajandas  
1412 S. Sixth Street  
Louisville, KY 40208  
(502) 637-1160  
rbajandas@insightbb.com  
1978

Melissa Mershon  
112 Crestwood Ave  
Louisville, KY 40206  
(502) 895-5337  
melissa.mershon@gmail.com  
2012

William huff  
7103 Green Spring Drive  
Louisville, KY 40241  
(502) 228-3951  
wimih@aol.com  
2003

Donald Keller  
4103 Tuxford Way  
Louisville, KY 40241  
(502) 327-9576  
drkeller2001@yahoo.com  
2012

Commonwealth of Kentucky  
Alison Lundergan Grimes, Secretary of State

NARP  
0032078  
Alison Lundergan Grimes  
KY Secretary of State  
Received and Filed  
6/28/2013 4:11:21 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:** THE LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
**Company ID:** 0032078  
**State of origin:** Kentucky  
**Formation date:** 11/10/1972 12:00:00 AM  
**Date filed:** 6/28/2013 4:11:21 PM  
**Fee:** \$15.00

**Principal Office**

610 SO FOURTH ST SUITE 701  
LOUISVILLE, KY 40202

**Registered Agent Name/Address**

ROSANNE KRUZICH  
610 SO. FOURTH ST.  
SUITE 701  
LOUISVILLE, KY 40202

**Current Officers**

President	Gordon Garner	7300 Happy Hollow Rd., Prospect KY 40059
Secretary	Edna McDonald	3405 Fountain Drive #4, Louisville KY 40218
Treasurer	George Vest	205 Daleview Lane, Louisville KY 40207
Vice President	Leo Klarer	968 Swan St., Louisville KY 40204

**Directors**

Director	Camille Bathurst	P.O. Box 278, Prospect KY 40059
Director	Don Keller	4103 Tuxford Way, Louisville KY 40241
Director	Barbara Sinai	60 Eastover Ct., Louisville KY 40206
Director	Michael O'Leary	1963 Payne St., Louisville KY 40206

**Signatures**

<b>Signature</b>	Rosanne Kruzich
<b>Title</b>	Registered Agent

**Center for Neighborhoods  
Staff Directory  
12/31/2013**

**Full Time Employees**

Lisa Dettlinger, Associate Director

Salary: \$42,000

**Contract Staff**

Rosanne Kruzich, Interim Director

Becky Blair, Financial Manager

John Hawkins, Program Coordinator

Christi Stevens, Technical Analyst

Ben Evans, Green Institute Curriculum Coordinator

**FINANCIAL STATEMENTS AND  
INDEPENDENT ACCOUNTANT'S REVIEW REPORT**

**LOUISVILLE COMMUNITY  
DESIGN CENTER, INC.  
DBA CENTER FOR NEIGHBORHOODS**

**DECEMBER 31, 2012 AND 2011**

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NOTES TO FINANCIAL STATEMENTS	8

Anderson  
Bryant  
Lasky & Winslow  
P.S.C.  
Certified Public Accountants

Partners & Principals  
John D. Winslow, CPA  
Barbara A. Lasky, CPA  
Virginia H. Anderson, CPA  
Ellie Bryant, CPA

241 South First Street  
Louisville, KY 40202-2221

Phone: 502.581.7791  
Fax: 502.581.7735  
Web: [www.ablw.com](http://www.ablw.com)  
Email: [info@ablw.com](mailto:info@ablw.com)

*Providing timely, accurate, useful information to decision makers*

## INDEPENDENT ACCOUNTANT'S REVIEW REPORT

To the Board of Directors  
Louisville Community Design Center, Inc.  
dba Center for Neighborhoods

We have reviewed the accompanying statements of financial position of the Louisville Community Design Center, Inc. dba Center for Neighborhoods (a not-for-profit organization) as of December 31, 2012 and 2011, and the related statements of activities, functional expenses and cash flows for the years then ended. A review includes primarily applying analytical procedures to management's financial data and making inquiries of Organization management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as a whole. Accordingly, we do not express such an opinion.

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America and for designing, implementing, and maintaining internal control relevant to the preparation and fair presentation of the financial statements.

Our responsibility is to conduct the review in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. Those standards require us to perform procedures to obtain limited assurance that there are no material modifications that should be made to the financial statements. We believe that the results of our procedures provide a reasonable basis for our report.

Based on our reviews, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in conformity with accounting principles generally accepted in the United States of America.

*Anderson, Bryant, Lasky + Winslow, P.S.C.*

Louisville, Kentucky  
August 26, 2013

**STATEMENTS OF FINANCIAL POSITION  
LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
DBA CENTER FOR NEIGHBORHOODS  
DECEMBER 31, 2012 AND 2011**

	<u>2012</u>	<u>2011</u>
<b>ASSETS</b>		
Cash	\$ 40,180	\$ 100,039
Grants receivable	44,353	41,205
Prepaid expenses	<u>2,013</u>	<u>273</u>
Total assets	<u>\$ 86,546</u>	<u>\$ 141,517</u>
 <b>LIABILITIES AND NET ASSETS</b>		
<b>LIABILITIES:</b>		
Accounts payable	\$ 1,442	\$ 3,181
Accrued payroll and related taxes	<u>7,843</u>	<u>18,174</u>
Total liabilities	<u>9,285</u>	<u>21,355</u>
 <b>NET ASSETS:</b>		
Unrestricted	71,073	81,957
Temporarily restricted	<u>6,188</u>	<u>38,205</u>
Total net assets	<u>77,261</u>	<u>120,162</u>
Total liabilities and net assets	<u>\$ 86,546</u>	<u>\$ 141,517</u>

See accompanying notes and independent accountant's review report.



**STATEMENTS OF ACTIVITIES**  
**LOUISVILLE COMMUNITY DESIGN CENTER, INC.**  
**DBA CENTER FOR NEIGHBORHOODS**  
**FOR THE YEARS ENDED DECEMBER 31, 2012 AND 2011**

	2012			2011		
	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
Revenue and support:						
Contributions and grants	\$ 3,198	\$ -	\$ 3,198	\$ 33,103	\$ -	\$ 33,103
Program income	185,687	60,431	246,118	120,945	79,196	200,141
Special event	8,676	-	8,676	-	-	-
Special event direct expense	(6,842)	-	(6,842)	-	-	-
Interest income	-	-	-	650	-	650
Total revenue and support	190,719	60,431	251,150	154,698	79,196	233,894
Net assets released from restrictions:						
Restrictions satisfied by payments	92,448	(92,448)	-	99,836	(99,836)	-
Total revenue, support and reclassifications	283,167	(32,017)	251,150	254,534	(20,640)	233,894
Expenses:						
Program services	220,005	-	220,005	228,624	-	228,624
Management and general	69,088	-	69,088	76,039	-	76,039
Fund raising	4,958	-	4,958	4,706	-	4,706
Total expenses	294,051	-	294,051	309,369	-	309,369
Increase (decrease) in net assets	(10,884)	(32,017)	(42,901)	(54,835)	(20,640)	(75,475)
Net assets at beginning of year	81,957	38,205	120,162	136,792	58,845	195,637
Net assets at end of year	\$ 71,073	\$ 6,188	\$ 77,261	\$ 81,957	\$ 38,205	\$ 120,162

See accompanying notes and independent accountant's review report.

**STATEMENTS OF FUNCTIONAL EXPENSES  
LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
DBA CENTER FOR NEIGHBORHOODS  
FOR THE YEARS ENDED DECEMBER 31, 2012 AND 2011**

	2012				2011			
	<u>Total</u>	<u>Program Services</u>	<u>Management and General</u>	<u>Fund Raising</u>	<u>Total</u>	<u>Program Services</u>	<u>Management and General</u>	<u>Fund Raising</u>
Salaries and wages	\$ 138,694	\$ 100,117	\$ 35,992	\$ 2,585	\$ 159,030	\$ 113,389	\$ 43,056	\$ 2,585
Employee benefits and payroll taxes	20,240	16,369	3,612	259	24,835	19,889	4,666	280
Contract services	66,178	44,339	20,376	1,463	57,978	38,845	18,050	1,083
Professional fees	13,093	10,998	1,955	140	8,048	6,760	1,215	73
Supplies	7,004	5,446	1,454	104	12,427	9,731	2,408	288
Telephone	2,741	2,002	689	50	2,770	1,991	735	44
Postage and shipping	473	341	123	9	396	282	108	6
Occupancy	11,400	8,515	2,692	193	11,704	8,647	2,884	173
Printing and publications	1,184	1,177	7	-	977	971	6	-
Travel	10,257	10,228	27	2	10,020	9,991	27	2
Meeting expenses	17,324	17,035	270	19	14,339	14,092	233	14
Professional development	1,230	-	1,148	82	1,960	-	1,849	111
Dues and subscriptions	1,258	968	271	19	468	357	105	6
Miscellaneous	375	369	6	-	1,014	996	17	1
Insurance	2,600	2,101	466	33	2,883	2,312	539	32
Depreciation	-	-	-	-	520	371	141	8
<b>Total expenses</b>	<b>\$ 294,051</b>	<b>\$ 220,005</b>	<b>\$ 69,088</b>	<b>\$ 4,958</b>	<b>\$ 309,369</b>	<b>\$ 228,624</b>	<b>\$ 76,039</b>	<b>\$ 4,706</b>

See accompanying notes and independent accountant's review report.

**STATEMENTS OF CASH FLOWS**  
**LOUISVILLE COMMUNITY DESIGN CENTER, INC.**  
**DBA CENTER FOR NEIGHBORHOODS**  
**FOR THE YEARS ENDED DECEMBER 31, 2012 AND 2011**

	<u>2012</u>	<u>2011</u>
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>		
Change in net assets	\$ (42,901)	\$ (75,475)
Adjustments to reconcile change in net cash from operating activities:		
Depreciation	-	520
(Increase) decrease in operating assets:		
Grants receivable	(3,148)	(3,295)
Prepaid expenses	(1,740)	(97)
Increase (decrease) in operating liabilities:		
Accounts payable	(1,739)	(1,085)
Accrued payroll and related taxes	<u>(10,331)</u>	<u>3,295</u>
Net cash provided (used) by operating activities	<u>(59,859)</u>	<u>(76,137)</u>
Net increase (decrease) in cash	(59,859)	(76,137)
Cash at beginning of year	<u>100,039</u>	<u>176,176</u>
Cash at end of year	<u>\$ 40,180</u>	<u>\$ 100,039</u>

See accompanying notes and independent accountant's review report.

**NOTES TO FINANCIAL STATEMENTS  
LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
DBA CENTER FOR NEIGHBORHOODS  
DECEMBER 31, 2012 AND 2011**

**NOTE 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

The Louisville Community Design Center, Inc. dba Center for Neighborhoods (LCDC) is a not-for-profit organization that provides various services to Louisville neighborhoods. These services include, but are not limited to:

Education - A leadership training course is offered called the Neighborhood Institute that works with resident leaders and community organizations to develop its focus on what it takes to build strong neighborhoods.

Organizing - LCDC provides technical assistance in organizing neighborhood associations, identifying visions, promotes neighborhoods through website development and technological assistance, updates contact information for neighborhood associations, develops residential initiatives for projects in neighborhoods, and coordinates with neighborhood leaders.

Community and Youth Programs - PAINT (Producing Art in Neighborhoods Together) - murals and sculptures are created by chosen neighborhoods to improve physical design. Community collaboration, youth involvement, pro-social activities, physical design, environmental strategies and the reduction of substance abuse are addressed with a Drug Free Community Grant.

A significant portion of the organization's funding is fees received from Metro United Way, Louisville Metro and federal funding.

**Basis of Accounting**

The financial statements of the organization have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables and other liabilities.

## NOTES TO FINANCIAL STATEMENTS - CONTINUED

### Basis of Presentation

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board (FASB) Accounting Standard Codification (ASC) with regards to financial statements of Not-for-Profit Organizations. Under this guidance, the organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. A description of the three net assets categories follows:

Unrestricted Net Assets: include the portion of expendable funds that are not subject to donor-imposed stipulations.

Temporarily Restricted Net Assets: include gifts for which donor-imposed restrictions have not been met.

Permanently Restricted Net Assets: include amounts which the donor has stipulated that the corpus be invested in perpetuity and only the income be made available for program operations in accordance with donor restrictions.

### Estimates

Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenues and expenses. Actual results could differ from those estimates.

### Cash

Cash consists of bank deposits.

### Grants Receivable

Grants receivable consists primarily of receivables for program fees earned by the organization. An allowance for uncollectibles has not been recorded because management believes all receivables are fully collectible.

## NOTES TO FINANCIAL STATEMENTS - CONTINUED

### **Furniture and Equipment**

Furniture and equipment is recorded at cost and depreciated based on the straight-line method over the estimated useful life of the respective assets (5-40 years). The cost of equipment in excess of \$250 is capitalized.

### **Contributions**

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence and/or nature of any donor restrictions.

Donor-restricted support is reported as an increase in temporarily or permanently restricted net assets, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statements of activities as net assets released from restrictions.

### **Expense Allocation**

Expenses are allocated to programs and supporting services on the basis of direct salaries.

### **Income Tax Status**

LCDC is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. The organization qualified for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization that is not a private foundation under Section 509(a)(2).

Management has concluded that any tax positions that would not meet the more-likely-than-not criterion of FASB ASC 740-10 would be immaterial to the financial statements taken as a whole. Accordingly, the accompanying financial statements do not include any provision for uncertain tax positions, and no related interest or penalties have been recorded in the operating statement or accrued in the balance sheet. Federal and state tax returns of the entity are generally open to examination by the relevant taxing authorities for a period of three years from the date the returns are filed.

## NOTES TO FINANCIAL STATEMENTS - CONTINUED

### Subsequent Events

Management has evaluated subsequent events for recognition or disclosure in the financial statements through August 26, 2013, which was the date at which the financial statements were available to be issued.

### NOTE 2. CONCENTRATION OF CREDIT RISK

Cash - LCDC maintains its cash balances and marketable securities in financial institutions in Louisville, Kentucky. The cash balances are insured by the Federal Deposit Insurance Corporation. At various times during the year, the cash balances may exceed amounts federally insured. The risk is managed by maintaining all deposits in high quality financial institutions.

Concentration of Revenue - LCDC receives a substantial amount of its support from government entities. A significant reduction in the level of this support, if it were to occur, may have an effect on LCDC's programs and activities.

### NOTE 3. FURNITURE AND EQUIPMENT

Furniture and equipment consists of the following:

	<u>2012</u>	<u>2011</u>
Furniture and equipment	\$ 17,205	\$ 17,205
Less accumulated depreciation	<u>(17,205)</u>	<u>(17,205)</u>
Equipment, net	<u>\$ -</u>	<u>\$ -</u>
Depreciation expense	<u>\$ -</u>	<u>\$ 520</u>

### NOTE 4. RESTRICTIONS ON ASSETS

Temporarily restricted net assets are available for the following purposes:

	<u>2012</u>	<u>2011</u>
Subsequent year's activities	<u>\$ 6,188</u>	<u>\$ 38,205</u>

**NOTES TO FINANCIAL STATEMENTS - CONTINUED**

**NOTE 5. LEASE COMMITMENTS**

LCDC leases office space under an operating lease expiring October 31, 2013. Future minimum lease payments under noncancelable operating leases at December 31, 2012 are as follows:

2013	<u>\$ 20,000</u>
------	------------------

A portion of the lease space is subleased month-to-month to two unaffiliated not-for-profit organizations. The above lease expense is expected to be offset by payments from the subleases. Lease expense for the years ended December 31, 2012 and 2011 was \$24,000 and \$24,000, and sublease income was \$12,600 and \$10,660, respectively.

**NOTE 6. RETIREMENT PLAN**

LCDC has a simplified employee pension plan covering all employees who have attained 21 years of age and earn in excess of \$500 during the Plan year. Under the Plan, LCDC contributes a match of 3% of each eligible employee's salary. Employer contributions for the years ended December 31, 2012 and 2011 were \$1,177 and \$3,492, respectively.



**Louisville Community Design Center, Inc.  
DBA Center for Neighborhoods**

**Income Tax Return**

**December 31, 2012**

Form **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

**2012**

Open to Public Inspection

**A** For the 2012 calendar year, or tax year beginning and ending

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization LOUISVILLE COMMUNITY DESIGN CENTER, INC. DBA CENTER FOR NEIGHBORHOODS		<b>D</b> Employer identification number 61-0889003
	Doing Business As CENTER FOR NEIGHBORHOODS		<b>E</b> Telephone number 502-589-0343
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 610 S. FOURTH STREET, SUITE 701		
	City, town, or post office, state, and ZIP code LOUISVILLE, KY 40202		<b>G</b> Gross receipts \$ 266,293.
	<b>F</b> Name and address of principal officer: ROSANNE KRUZICH SAME AS C ABOVE		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)

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

**J** Website: ▶ WWW.CENTERFORNEIGHBORHOODS.ORG **H(c)** Group exemption number ▶

**K** Form of organization:  Corporation  Trust  Association  Other ▶ **L** Year of formation: 1975 **M** State of legal domicile: KY

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SERVE AND ASSIST NEIGHBORHOODS TO EMPOWER AND EQUIP RESIDENTS TO ACHIEVE POSITIVE CHANGE IN THEIR		
	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	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	10
	6 Total number of volunteers (estimate if necessary)	6	12
	7a 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)	24,364.	3,198.
	9 Program service revenue (Part VIII, line 2g)	194,265.	254,419.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	650.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,349.	1,834.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	220,628.	259,451.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	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)		180,429.	158,934.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,958.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		123,975.	135,117.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	304,404.	294,051.	
19 Revenue less expenses. Subtract line 18 from line 12	-83,776.	-34,600.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 133,216.	End of Year 86,547.
	21 Total liabilities (Part X, line 26)	21,355.	9,286.
	22 Net assets or fund balances. Subtract line 21 from line 20	111,861.	77,261.

**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.

<b>Sign Here</b>	Signature of officer <i>Rosanne Kruzich</i>	Date 9/20/13
	ROSANNE KRUZICH, EXECUTIVE DIRECTOR Type or print name and title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name BARBARA A. LASKY	Preparer's signature <i>Barbara Lasky</i>	Date 9-20-13	Check if self-employed <input type="checkbox"/>	PTIN P00015280
	Firm's name ANDERSON, BRYANT, LASKY & WINSLOW, PSC	Firm's EIN 61-1227965	Firm's address 943 SOUTH FIRST STREET LOUISVILLE, KY 40203	Phone no. (502) 584-9793	

## Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- 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](http://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.

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>LOUISVILLE COMMUNITY DESIGN CENTER, INC. DBA CENTER FOR NEIGHBORHOODS</b>	Employer identification number (EIN) or <b>61-0889003</b>
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. <b>610 S. FOURTH STREET, SUITE 701</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>LOUISVILLE, KY 40202</b>	

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

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	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 ▶ **610 S. FOURTH ST., SUITE 701 - LOUISVILLE, KY 40202**  
 Telephone No. ▶ **502-589-0343** 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, 2013**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year **2012** 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 Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.
b If this application is for Form 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.	<b>3b</b>	\$	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.	<b>3c</b>	\$	0.

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
DBA CENTER FOR NEIGHBORHOODS

Form 990 (2012)

**Part III** Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:  
**CENTER FOR NEIGHBORHOODS SUPPORTS AND EMPOWERS NEIGHBORHOODS TO CREATE STRONGER AND MORE VITAL COMMUNITIES.**

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  No  
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No  
If "Yes," describe these changes on Schedule O.

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 \$ 127,327. including grants of \$ ) (Revenue \$ 133,989.)  
**7TH STREET PAL COALITION: FEDERAL GRANT FOR DRUG FREE COMMUNITIES WORKING WITH YOUTH AND, OVER TIME, ADULTS TO REDUCE SUBSTANCE ABUSE IN THE ZIP CODES OF 40208, 40210, 40215.**

**OBJECTIVE: TO REDUCE SUBSTANCE ABUSE IN YOUTH AND, OVER TIME, ADULTS.**

**PROGRAM SERVICE ACCOMPLISHMENTS:**

**IMPLEMENTED A RECRUITMENT AND RETENTION STRATEGY TO CONTINUOUSLY ATTRACT DIVERSE NEW COMMUNITY MEMBERS TO EXPAND AND ENHANCE THE REQUIRED 12 SECTOR COALITION MEMBERSHIP (THE STEWARDSHIP PROCESS).**

4b (Code: ) (Expenses \$ 25,552. including grants of \$ ) (Revenue \$ 12,112.)  
**NEIGHBORHOOD INSTITUTE**  
**PROGRAM SERVICE ACCOMPLISHMENTS:**

**THE NEIGHBORHOOD INSTITUTE IS A NEIGHBORHOOD LEADERSHIP-EDUCATION PROGRAM ESTABLISHED IN 1987 BY THE CENTER FOR NEIGHBORHOODS, A NON-PROFIT CIVIC ORGANIZATION. THE NEIGHBORHOOD INSTITUTE EQUIPS NEIGHBORHOOD LEADERS WITH THE RESOURCES NECESSARY TO EFFECT POSITIVE CHANGE BY ACTING THROUGH AND WITH THEIR NEIGHBORHOOD GROUPS.**

**TWELVE-WEEK SEMINAR  
NEIGHBORHOOD INFORMATION EXCHANGE  
NETWORKING**

4c (Code: ) (Expenses \$ 38,490. including grants of \$ ) (Revenue \$ 36,952.)  
**EAF PAINT**

**PROGRAM SERVICE ACCOMPLISHMENTS:**

**PAINT - PRODUCING ART IN NEIGHBORHOODS TOGETHER  
PRODUCING ART IN NEIGHBORHOODS TOGETHER BRINGS NEIGHBORHOODS, RESIDENTS, AND CONTEMPORARY VISUAL ARTISTS TOGETHER TO CREATE NEW, SITE-SPECIFIC, NEIGHBORHOOD-BASED PUBLIC ART PROJECTS IN NEIGHBORHOODS THROUGHOUT THE LOUISVILLE METRO AREA. ALL PAINT PROJECTS DIRECTLY UPHOLD AND SUPPORT THE MISSION, VISION, AND VALUES OF CENTER FOR NEIGHBORHOODS.**

4d Other program services (Describe in Schedule O.)  
(Expenses \$ 28,636. including grants of \$ ) (Revenue \$ 71,366.)

4e Total program service expenses **220,005.**

LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
DBA CENTER FOR NEIGHBORHOODS

Form 990 (2012)

61-0889003 Page 3

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> 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	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....		X
<b>3</b> 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
<b>4</b> <b>Section 501(c)(3) organizations.</b> 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
<b>5</b> 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
<b>6</b> 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
<b>7</b> 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
<b>8</b> 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
<b>9</b> 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
<b>10</b> 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
<b>11</b> 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.		
<b>a</b> 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>b</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
<b>c</b> 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
<b>d</b> 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
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....		X
<b>f</b> 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	
<b>12a</b> 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>b</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
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		X
<b>b</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
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
<b>17</b> 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
<b>18</b> 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
<b>19</b> 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
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> <i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i> .....		

Form 990 (2012)

LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
DBA CENTER FOR NEIGHBORHOODS

Form 990 (2012)

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		X
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> 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
<b>24a</b> 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 25</i> .....		X
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> 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
<b>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
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> 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
<b>28</b> 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):		
<b>28a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>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
<b>28c</b> 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
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> 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
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> 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
<b>33</b> 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
<b>34</b> 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
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>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> .....		
<b>36</b> <b>Section 501(c)(3) organizations.</b> 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
<b>37</b> 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
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O .....	X	

Form 990 (2012)

LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
DBA CENTER FOR NEIGHBORHOODS

Form 990 (2012)

61-0889003 Page 5

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	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		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
<b>4a</b>	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
<b>4b</b>	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	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
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7a</b>	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
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>7e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the organization make any taxable distributions under section 4966?		
<b>9b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>11a</b>	Gross income from members or shareholders		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>13a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
<b>13b</b>	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		
<b>13c</b>	Enter the amount of reserves on hand		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>14b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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**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 to any question in this Part VI

**Section A. Governing Body and Management**

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	12													
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.														
b Enter the number of voting members included in line 1a, above, who are independent		12												
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?														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?														X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?														X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?														X
6 Did the organization have members or stockholders?														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?														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?														X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?										X				
b Each committee with authority to act on behalf of the governing body?										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														X

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

	10a	10b	11a	11b	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?															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?															
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			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					X										
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?															X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done															X
13 Did the organization have a written whistleblower policy?								X							
14 Did the organization have a written document retention and destruction policy?															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										X					
b Other officers or key employees of the organization															X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).															
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?															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?															

**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, physical address, and telephone number of the person who possesses the books and records of the organization: **COMPANY - 502-589-0343**  
**610 S. FOURTH ST., SUITE 701, LOUISVILLE, KY 40202**



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

Check if Schedule O contains a response to any question 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) GORDON GARNER BOARD MEMBER	1.00	X						0.	0.	0.
(2) EDNA MCDONALD BOARD MEMBER	1.00	X						0.	0.	0.
(3) BARBARA SINAI BOARD MEMBER	1.00	X						0.	0.	0.
(4) GEORGE VEST BOARD MEMBER	1.00	X						0.	0.	0.
(5) BOB BAJANDAS BOARD MEMBER	1.00	X						0.	0.	0.
(6) WILLIAM HUFF BOARD MEMBER	1.00	X						0.	0.	0.
(7) MICHAEL O'LEARY BOARD MEMBER	1.00	X						0.	0.	0.
(8) BRUCE DUNCAN BOARD MEMBER	1.00	X						0.	0.	0.
(9) LEO KLARER BOARD MEMBER	1.00	X						0.	0.	0.
(10) KEITH LOOK BOARD MEMBER	1.00	X						0.	0.	0.
(11) CAMILLE BATHURST BOARD MEMBER	1.00	X						0.	0.	0.
(12) STEVEN BOURASSA BOARD MEMBER	1.00	X						0.	0.	0.
(13) MELISSA MERSHON BOARD MEMBER	1.00	X						0.	0.	0.
(14) DON KELLER BOARD MEMBER	1.00	X						0.	0.	0.
(15) BILL SCHRECK BOARD MEMBER	1.00	X						0.	0.	0.
(16) JACK TRAWICK EXECUTIVE DIRECTOR	20.00			X				0.	14,316.	775.

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**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			
<b>1b Sub-total</b> .....							0.	14,316.	775.	
<b>c Total from continuation sheets to Part VII, Section A</b> .....							0.	0.	0.	
<b>d Total (add lines 1b and 1c)</b> .....							0.	14,316.	775.	

**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
<b>3</b> Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual .....		X
<b>4</b> 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? If "Yes," complete Schedule J for such individual .....		X
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person .....		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**

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**Part VIII Statement of Revenue**

Check if Schedule O contains a response to any question 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, 513, or 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>				
	<b>b</b> Membership dues	<b>1b</b>				
	<b>c</b> Fundraising events	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	3,198.			
	<b>g</b> Noncash contributions included in lines 1a-1f: \$					
	<b>h Total.</b> Add lines 1a-1f		3,198.			
	<b>Program Service Revenue</b>	<b>2 a</b> <u>VARIOUS PROGRAMS</u>	<b>Business Code</b> 900099	254,419.	254,419.	
<b>b</b>						
<b>c</b>						
<b>d</b>						
<b>e</b>						
<b>f</b> All other program service revenue						
<b>g Total.</b> Add lines 2a-2f			254,419.			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)					
	<b>4</b> Income from investment of tax-exempt bond proceeds					
	<b>5</b> Royalties					
	<b>6 a</b> Gross rents	(i) Real				
		(ii) Personal				
		<b>b</b> Less: rental expenses				
		<b>c</b> Rental income or (loss)				
	<b>d</b> Net rental income or (loss)					
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		<b>b</b> Less: cost or other basis and sales expenses				
		<b>c</b> Gain or (loss)				
	<b>d</b> Net gain or (loss)					
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>	8,676.			
		<b>b</b> Less: direct expenses	<b>b</b>	6,842.		
<b>c</b> Net income or (loss) from fundraising events			1,834.		1,834.	
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>					
	<b>b</b> Less: direct expenses	<b>b</b>				
	<b>c</b> Net income or (loss) from gaming activities					
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
	<b>b</b> Less: cost of goods sold	<b>b</b>				
	<b>c</b> Net income or (loss) from sales of inventory					
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
<b>11 a</b>	<b>a</b>					
	<b>b</b>					
	<b>c</b>					
	<b>d</b> All other revenue					
	<b>e Total.</b> Add lines 11a-11d					
<b>12 Total revenue.</b> See instructions			259,451.	254,419.	0.	1,834.

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**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 to any question 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 governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	15,092.		12,507.	2,585.
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	123,602.	100,117.	23,485.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	9,726.	8,779.	884.	63.
10 Payroll taxes	10,514.	7,590.	2,728.	196.
11 Fees for services (non-employees):				
a Management	66,178.	44,339.	20,376.	1,463.
b Legal				
c Accounting				
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.)	13,093.	10,998.	1,955.	140.
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	11,400.	8,515.	2,692.	193.
17 Travel	10,257.	10,228.	27.	2.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	17,324.	17,035.	270.	19.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	2,600.	2,101.	466.	33.
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 SUPPLIES	6,691.	5,352.	1,235.	104.
b TELEPHONE	2,741.	2,002.	689.	50.
c PRINTING, PUBLICATIONS,	1,657.	1,518.	130.	9.
d DUES AND SUBSCRIPTIONS	1,258.	968.	271.	19.
e All other expenses	1,918.	463.	1,373.	82.
25 Total functional expenses. Add lines 1 through 24e	294,051.	220,005.	69,088.	4,958.
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)

LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
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**Part X Balance Sheet**

Check if Schedule O contains a response to any question in this Part X

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	100,039.	<b>1</b>	40,181.
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....	32,904.	<b>4</b>	44,353.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> 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 .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	273.	<b>9</b>	2,013.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 17,205.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 17,205.	<b>10c</b> 0.	0.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	133,216.	<b>16</b>	86,547.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	21,355.	<b>17</b>	9,286.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....		<b>25</b>	
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	21,355.	<b>26</b>	9,286.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	77,250.	<b>27</b>	71,073.
	<b>28</b> Temporarily restricted net assets .....	34,611.	<b>28</b>	6,188.
	<b>29</b> Permanently restricted net assets .....		<b>29</b>	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
	<b>33</b> <b>Total net assets or fund balances</b> .....	111,861.	<b>33</b>	77,261.
<b>34</b> <b>Total liabilities and net assets/fund balances</b> .....	133,216.	<b>34</b>	86,547.	

Form 990 (2012)

**LOUISVILLE COMMUNITY DESIGN CENTER, INC.**  
**DBA CENTER FOR NEIGHBORHOODS**

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**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

1 Total revenue (must equal Part VIII, column (A), line 12) .....	1	259,451.
2 Total expenses (must equal Part IX, column (A), line 25) .....	2	294,051.
3 Revenue less expenses. Subtract line 2 from line 1 .....	3	-34,600.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) .....	4	111,861.
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	77,261.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question 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? .....	2a	X	
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			
b Were the organization's financial statements audited by an independent accountant? .....	2b		X
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			
c 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? .....	2c	X	
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? .....	3a		X
b 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 .....	3b		

Form 990 (2012)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2012

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. See separate instructions.

Name of the organization LOUISVILLE COMMUNITY DESIGN CENTER, INC.
DBA CENTER FOR NEIGHBORHOODS
Employer identification number 61-0889003

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 [X] 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 that describes the type of supporting organization and complete lines 11e through 11h.
a [ ] Type I b [ ] Type II c [ ] Type III - Functionally integrated d [ ] Type III - Non-functionally integrated
e [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
(ii) A family member of a person described in (i) above?
(iii) A 35% controlled entity of a person described in (i) or (ii) above?
h Provide the following information about the supported organization(s).

Table with columns Yes and No for rows 11g(i), 11g(ii), 11g(iii)

Table with 7 main columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization in col. (i) listed in your governing document?, (v) Did you notify the organization in col. (i) of your support?, (vi) Is the organization in col. (i) organized in the U.S., (vii) Amount of monetary support. Includes a Total row at the bottom.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2012



LOUISVILLE COMMUNITY DESIGN CENTER, INC.

Schedule A (Form 990 or 990-EZ) 2012 DBA CENTER FOR NEIGHBORHOODS

61-0889003 Page 2

**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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	600.	7,291.	11,172.	24,364.	3,198.	46,625.
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 .....	600.	7,291.	11,172.	24,364.	3,198.	46,625.
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.						46,625.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4 .....	600.	7,291.	11,172.	24,364.	3,198.	46,625.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	5,622.	1,957.	1,505.	650.		9,734.
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 IV.) .....	1,229.			1,349.	1,834.	4,412.
11 Total support. Add lines 7 through 10						60,771.
12 Gross receipts from related activities, etc. (see instructions) .....					12	1,204,246.
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 2012 (line 6, column (f) divided by line 11, column (f)) .....	14	76.72 %
15 Public support percentage from 2011 Schedule A, Part II, line 14 .....	15	64.47 %
16a 33 1/3% support test - 2012. 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 checked="" type="checkbox"/>	
b 33 1/3% support test - 2011. 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 - 2012. 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 IV 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 - 2011. 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 IV 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"/>	

Schedule A (Form 990 or 990-EZ) 2012



**Part II 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**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**

<b>15</b> Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2011 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2011 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2012.** 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 - 2011.** 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

**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. ▶ See separate instructions.

OMB No. 1545-0047

**2012**

Open to Public Inspection

Name of the organization **LOUISVILLE COMMUNITY DESIGN CENTER, INC.**  
**DBA CENTER FOR NEIGHBORHOODS**

Employer identification number  
**61-0889003**

**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 contributions to (during year) .....		
3 Aggregate 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 an 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) Revenues 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 Revenues 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?  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		

b 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.** 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				
c Leasehold improvements				
d Equipment		17,205.	17,205.	0.
e Other				0.

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

LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
 DBA CENTER FOR NEIGHBORHOODS

Schedule D (Form 990) 2012

61-0889003 Page:

**Part VII Investments - Other Securities.** 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) .....		
(I) .....		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) .....		
(2) .....		
(3) .....		
(4) .....		
(5) .....		
(6) .....		
(7) .....		
(8) .....		
(9) .....		
(10) .....		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) .....	
(2) .....	
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
(10) .....	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.** 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) .....	
(10) .....	
(11) .....	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. FIN 48 (ASC 740) Footnote. 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

LOUISVILLE COMMUNITY DESIGN CENTER, INC.

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

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5

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

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5

**Part XIII Supplemental Information**

Complete this part to 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.

**PART X, LINE 2: MANAGEMENT HAS CONCLUDED THAT ANY TAX POSITIONS THAT**

**WOULD NOT MEET THE MORE-LIKELY-THAN-NOT CRITERION OF FASB ASC 740-10 WOULD BE IMMATERIAL TO THE FINANCIAL STATEMENTS TAKEN AS A WHOLE. ACCORDINGLY, THE ACCOMPANYING FINANCIAL STATEMENTS DO NOT INCLUDE ANY PROVISION FOR UNCERTAIN TAX POSITIONS, AND NO RELATED INTEREST OR PENALTIES HAVE BEEN RECORDED IN THE OPERATING STATEMENT OR ACCRUED IN THE BALANCE SHEET. FEDERAL AND STATE TAX RETURNS OF THE ENTITY ARE GENERALLY OPEN TO EXAMINATION BY THE RELEVANT TAXING AUTHORITIES FOR A PERIOD OF THREE YEARS**

LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
DBA CENTER FOR NEIGHBORHOODS

61-0889003 Page 5

Schedule D (Form 990) 2012

**Part XIII** Supplemental Information *(continued)*

FROM THE DATE THE RETURNS ARE FILED.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

**2012**

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

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.

Name of the organization

LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
DBA CENTER FOR NEIGHBORHOODS

Employer identification number  
61-0889003

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COMMUNITY THROUGH PLANNING, REVITALIZATION AND IMPROVEMENT, LEADERSHIP  
DEVELOPMENT AND EDUCATION.

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

PROVIDED OPPORTUNITIES FOR COALITION MEMBERS TO COORDINATE AND  
COLLABORATE ON COMMUNITY AND YOUTH OPPORTUNITIES FOR PRO-SOCIAL  
DEVELOPMENT (RESOURCE CAPACITY ASSESSMENT).

CONVENED ANNUAL NEIGHBORHOOD FORUM (FORUM PROTOCOL).

CONDUCTED ANNUAL COMMUNITY NEEDS ASSESSMENT AND A COMMUNITY RESOURCE  
ASSESSMENT (THE RETREAT).

CREATED THE FOUNDATION FOR INCLUSIVE INFORMATION FLOW, A DIVERSE AND  
EFFECTIVE DISCERNMENT PROCESS THAT LEADS TO ACTION ORIENTED DECISIONS  
WHICH DEMONSTRATES LEADERSHIP AND VALUE TO THE COMMUNITY LEADING TO  
REDUCING SUBSTANCE ABUSE AMONG YOUTH AND, OVER TIME, AMONG ADULTS  
(CULTURAL COMPETENCY).

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

EXPERIENTIAL LEARNING

IMPLEMENT YOUR PROJECT IDEAS

MENTOR AND BE MENTORED TO ATTAIN YOUR GOALS

GROUP PROBLEM SOLVING

Name of the organization	LOUISVILLE COMMUNITY DESIGN CENTER, INC. DBA CENTER FOR NEIGHBORHOODS	Employer identification number	61-0889003
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## FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

4D

## GREEN INSTITUTE

ESTABLISHED IN 2012, THE GREEN INSTITUTE EQUIPS NEIGHBORHOODS, BUSINESSES AND INDIVIDUALS WITH THE SKILLS AND RESOURCES NEEDED TO INCREASE THEIR ENVIRONMENTAL, SOCIAL AND ECONOMIC RESILIENCE. THIS ENVIRONMENTAL LEADERSHIP EDUCATION PROGRAM ENABLES PARTICIPANTS TO GAIN AN INFORMED UNDERSTANDING ABOUT THE INTERDEPENDENCE OF SOCIAL RESPONSIBILITY, THE ECONOMY AND THE ENVIRONMENT BY CREATIVELY EXPLORING A WIDE RANGE OF ISSUES ON GLOBAL, REGIONAL, COMMUNITY AND PERSONAL SCALES. THE 12 WEEK COURSE CULMINATES WITH THE PRESENTATION OF SELF-DIRECTED NEIGHBORHOOD SUSTAINABILITY PROJECTS BY EACH PARTICIPANT BASED ON ACTIONABLE COMMUNITY GOALS.

4E

## NEIGHBORHOOD TECHNICAL ASSISTANCE

CENTER STAFF PROVIDES CONSULTATION SERVICES WITH RESIDENTS AND NEIGHBORHOOD ORGANIZATIONS TO FIND EFFECTIVE SOLUTIONS TO A COMPLEX ARRAY OF ISSUES. THE CENTER MAKES PRESENTATIONS ON RELEVANT PROGRAMS, PROVIDES CONFLICT MEDIATION, MEETING FACILITATION, GRANT WRITING ASSISTANCE, AND FISCAL SPONSORSHIP WHEN NEEDED. IN ADDITION, THE CENTER IS FORMALIZING ITS KNOWLEDGE BASE OF REFERRAL AND ISSUE-BASED INFORMATION INTO AN ONLINE SEARCHABLE DATABASE TO PROVIDE THE PUBLIC WITH DETAIL ON EVIDENCE-BASED PRACTICES THAT IMPACT CRITICAL ISSUES NEIGHBORHOODS FACE. THE CENTER COMBINES THIS WITH AVAILABLE CENSUS, DEMOGRAPHIC, AND OTHER STATISTICAL DATA ON EACH NEIGHBORHOOD, COUNCIL DISTRICT OR ZIP CODE.

4F

## OTHER

232212  
01-04-13



Name of the organization LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
DBA CENTER FOR NEIGHBORHOODS

Employer identification number  
61-0889003

CENTER STAFF ENGAGED NEIGHBORHOOD RESIDENTS IN HEALTH, SAFETY AND  
COMMUNITY DEVELOPMENT ACTIVITIES IN ADDITION TO THOSE MENTIONED ABOVE,  
INCLUDING PROMOTING HEALTHY NEIGHBORHOODS AND LIFESTYLE PRACTICES;  
INCREASING COMMUNITY ENGAGEMENT AND INTERACTION; PARTNERING WITH OTHER  
AGENCIES TO IMPROVE EXISTING PROGRAM IMPACTS AND INCREASE  
RESPONSIVENESS TO NEIGHBORHOOD NEEDS; AND EFFECTING POLICY CHANGE ON A  
STATE AND LOCAL LEVEL. INITIATIVES INCLUDE NEIGHBORHOOD WALKABILITY  
ASSESSMENTS AND ENVIRONMENTAL SCANS; GREENSPACE AND TREE CANOPY  
EVALUATIONS; COMMUNITY CONVERSATIONS; MEDIA, ART AND PERFORMANCE EVENTS  
THAT RECEIVED LOCAL AWARDS AND RECOGNITION; A GRASSROOTS GALA  
CELEBRATING THE HISTORY AND DIVERSITY OF LOUISVILLE'S NEIGHBORHOODS AND  
POPULATION; AND SPONSORSHIP OF DRUG AND MENTAL HEALTH AWARENESS  
CAMPAIGNS.

EXPENSES \$ 28,636. INCLUDING GRANTS OF \$ 0. REVENUE \$ 71,366.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS FIRST REVIEWED BY  
THE EXECUTIVE DIRECTOR AND THEN THE AUDIT COMMITTEE PRIOR TO ITS FILING.  
IT IS THEN GIVEN TO THE FULL BOARD OF DIRECTORS.

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

FORM 990, PART VI, SECTION C, LINE 19: THEY ARE NOT MADE AVAILABLE TO THE  
PUBLIC.



• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box  **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print  File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions <b>LOUISVILLE COMMUNITY DESIGN CENTER, INC. DBA CENTER FOR NEIGHBORHOODS</b>	Employer identification number (EIN) of  <b>61-0889003</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>610 S. FOURTH STREET, SUITE 701</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>LOUISVILLE, KY 40202</b>	

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-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	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

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**COMPANY**

• The books are in the care of **610 S. FOURTH ST., SUITE 701 - LOUISVILLE, KY 40202**  
Telephone No. **502-589-0343** 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.

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2013.**

5 For calendar year **2012**, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

6 If the tax year entered in line 5 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

7 State in detail why you need the extension  
**BOOKS ARE NOT COMPLETE.**

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>8a</b>	\$	<b>0.</b>
<b>b</b> If this application is for Form 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 and any amount paid previously with Form 8868.	<b>8b</b>	\$	<b>0.</b>
<b>c</b> <b>Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>8c</b>	\$	<b>0.</b>

**Signature and Verification must be completed for Part II only.**

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

Signature \_\_\_\_\_ Title **EXECUTIVE DIRECTOR** Date \_\_\_\_\_

**IRS e-file Signature Authorization  
for an Exempt Organization**

For calendar year 2012, or fiscal year beginning \_\_\_\_\_, 2012, and ending \_\_\_\_\_, 20\_\_

**2012**

Department of the Treasury  
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**

Name of exempt organization

Employer identification number

**LOUISVILLE COMMUNITY DESIGN CENTER, INC.  
DBA CENTER FOR NEIGHBORHOODS**

**61-0889003**

Name and title of officer

**ROSANNE KRUZICH  
EXECUTIVE DIRECTOR**

**Part I Type of Return and Return Information (Whole Dollars Only)**

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a	Form 990 check here	▶ <input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12) .....	1b	<u>259451</u>
2a	Form 990-EZ check here	▶ <input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9) .....	2b	_____
3a	Form 1120-POL check here	▶ <input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22) .....	3b	_____
4a	Form 990-PF check here	▶ <input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5) .....	4b	_____
5a	Form 8868 check here	▶ <input type="checkbox"/>	b	Balance Due (Form 8868, Part I, line 3c or Part II, line 8c) .....	5b	_____

**Part II Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2012 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize ANDERSON, BRYANT, LASKY & WINSLOW, PSC to enter my PIN 03443  
ERO firm name Enter five numbers, b  
do not enter all zeros

as my signature on the organization's tax year 2012 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2012 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**61540845801**  
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2012 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**ERO Must Retain This Form - See Instructions  
Do Not Submit This Form To the IRS Unless Requested To Do So**



**AMENDED AND RESTATED  
ARTICLES OF INCORPORATION  
OF  
THE LOUISVILLE COMMUNITY DESIGN CENTER, INC.**

The following Amended and Restated Articles of Incorporation of the Louisville Community Design Center, Inc. (the "Corporation") are filed pursuant to KRS 273.273.

**ARTICLE I**

The Corporation's name is **THE LOUISVILLE COMMUNITY DESIGN CENTER, INC.**

**ARTICLE II**

The Corporation is organized to perform any and all other lawful acts which any other non-profit organization can perform.

**ARTICLE III**

The Corporation is organized exclusively for charitable purposes, including for such purposes, the making of distributions to organizations that qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code of 1986 (or a corresponding provision of any future United States Internal Revenue law). No part of the Corporation's net earnings shall inure to the benefit of a member or director. The balance, if any, of any money received by the Corporation from its operations, after the payment in full of all the Corporation's debts and obligations, of whatsoever kind and nature, shall be used and distributed exclusively for charitable, scientific, and education, or such other purposes that are consistent with the above corporate purposes.

**ARTICLE IV**

The Corporation shall have no capital stock and no members.

**ARTICLE V**

The Corporation's term shall be perpetual.

**ARTICLE VII**

The Corporation's affairs and business shall be conducted by a Board of Directors, the number of which shall be established from time to time as provided in the Bylaws of the Corporation, one of whom shall be elected Chairman of the Board.

**ARTICLE VIII**

The Corporation may incur an unlimited amount of liabilities or indebtedness.

## ARTICLE IX

The address of the Corporation's principal office is:

610 So. Fourth St.  
Louisville, Kentucky 40202

## ARTICLE X

The name and address of the Corporation's registered agent is:

John I. Trawick  
610 So. Fourth St.  
Louisville, Kentucky 40202

## ARTICLE XI

The Corporation's Bylaws may be adopted or amended by the Corporation's Board of Directors as set forth in the Bylaws.

## ARTICLE XII

The Corporation's Articles of Incorporation may be amended and/or restated by vote of a majority of the members of the Board then in office at a meeting duly called upon notice for the specific purpose of changing the Articles of Incorporation.

## ARTICLE XIII

In the event of the Corporation's dissolution, said dissolution shall be performed in accordance with KRS 273.303, as amended. After paying or making provision for the payment of all of the Corporation's liabilities, the net assets, if any, shall be distributed exclusively for charitable, scientific, and educational purposes as shall at the time qualify as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code of 1986 (or a corresponding provision of any future United States Internal Revenue law) that are consistent with the above corporate purposes.

## ARTICLE XIV

These Amended and Restated Articles of Incorporation correctly set forth the provisions of the Corporation's Articles of Incorporation as theretofore amended, have been duly adopted as required by law, and supersede and take the place of the Corporation's existing Articles of Incorporation as amended.

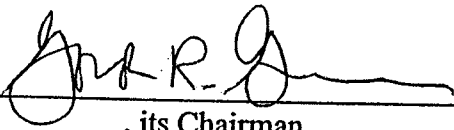
## ARTICLE V

To the full extent permitted by Kentucky law, the Corporation shall indemnify any person made, or threatened to be made, a party to any proceeding (whether brought by or in the right of



the Corporation or otherwise) by reason of the fact that such person is or was a Director or officer of the Corporation against judgments, penalties, fines, settlements and reasonable expenses (including attorneys' fees) actually incurred in connection with such proceeding; and the Board may, at any time, approve indemnification of any other person which the Corporation has the power to indemnify under law.

IN WITNESS WHEREOF, the undersigned subscribes his name as of this 19 day of Nov, 2008.

By: , its Chairman

990163.880163/503411.2



**THE AMENDED AND RESTATED BYLAWS OF**

**THE LOUISVILLE COMMUNITY DESIGN CENTER, INC.**

**D/B/A CENTER FOR NEIGHBORHOODS**

**EFFECTIVE AS OF NOVEMBER 19, 2008**

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**ARTICLE I  
NAME**

The name of this corporation is THE LOUISVILLE COMMUNITY DESIGN CENTER, INC. D/B/A CENTER FOR NEIGHBORHOODS ("CFN").

**ARTICLE II  
PURPOSE**

CFN shall hold, and may exercise, all such powers as may be conferred upon a nonprofit corporation by the laws of the Commonwealth of Kentucky and as may be necessary or expedient for the administration of the affairs and attainment of the purposes of CFN. In no event, however, shall CFN engage in activities which are not permitted to be carried on by a corporation exempt under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended.

**ARTICLE III  
PRINCIPAL OFFICE**

The principal office of CFN shall be located at 610 SO. FOURTH ST., SUITE 701, LOUISVILLE, KY 40202. The Board of Directors (the "Board") may at any time, or from time to time, change the location of the principal office from one location to another within Jefferson County, Kentucky. The Board may at any time establish branch offices at any place where CFN is qualified to do business.

**ARTICLE IV  
NONPARTISAN ACTIVITIES**

CFN has been formed pursuant to the Kentucky Nonprofit Corporation Act, KRS 273.161 *et seq.* (the "Act"), for charitable purposes, and it shall be nonprofit and nonpartisan. No substantial part of CFN's activities shall consist of the carrying on of propaganda or otherwise attempting to influence legislation. CFN shall not participate or intervene in any political campaign on behalf of or in opposition to any candidate for public office.

**ARTICLE V  
DEDICATION OF ASSETS**

The properties and assets of CFN are irrevocably dedicated to charitable purposes. No part of CFN's net earnings, properties, or assets, on dissolution or otherwise, shall inure to the benefit of any private person or individual, or any director or officer of CFN. On liquidation or dissolution, all of CFN's remaining properties and assets shall be distributed and paid over to an organization dedicated to charitable purposes which has established its tax-exempt status under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended.

## **ARTICLE VI MEMBERSHIP**

**6.1 No Members.** CFN has no members. CFN may refer to persons associated with it as "members," but no such reference shall constitute anyone a member within the meaning of KRS 273.187.

## **ARTICLE VII BOARD OF DIRECTORS**

**7.1. Powers.** Subject to the provisions and limitations of Kentucky law and any other applicable laws, CFN's business and affairs shall be managed, and all corporate powers shall be exercised, by or under the direction of the Board. The Board may delegate the management of the day-to-day operation of the business of CFN to a management company, committee (however composed), or other person, provided that the activities and affairs of CFN shall be managed and all corporate powers shall be exercised under the ultimate direction of the Board.

**7.2. Number of Directors.** The number of directors of CFN shall be as established from time to time by the Board by vote in accordance with these Bylaws. Until such number is changed by the Board, a thirteen-member Board shall govern CFN.

**7.3. Election, Designation, and Term of Office of Directors.** Each director shall serve for a term of three years, or until such director dies, resigns, or is removed from the Board by a vote of the Board of Directors. Any Board member who has not resigned or been removed at the end of any three year term of such director term shall serve for a successive three year term. The Board of Directors shall elect directors at any regular meeting of the Board or at any special Board meeting held for that purpose or by written ballot.

**7.4 Vacancies.** A vacancy on the Board shall exist on the occurrence of the following:

- (a) the death or resignation of any director;
- (b) the declaration by resolution of the Board of a vacancy in the office of a director who has been declared of unsound mind by a final order of court, convicted of a felony, or found by final order or judgment of any court to have breached a duty dealing with standards of conduct for a director;
- (c) has missed four consecutive meetings of the Board or a total of five meetings of the Board during any one calendar year (a majority of the disinterested members of the Board may affirmatively vote to suspend this requirement with regard to any individual Board Member);
- (d) the vote of the Board to remove a director;
- (e) an increase in the authorized number of directors; or

(f) the failure of the Board, at any meeting at which directors are to be elected, to elect the number of directors required to be elected at such meeting.

Except as provided in this paragraph, any director may resign effective upon giving written notice to the chairperson of the Board, the president, the secretary, or the Board, unless the notice specifies a later time for the effectiveness of the resignation. If the resignation is effective at a future time, a successor may be designated to take office when the resignation becomes effective. Unless the Kentucky Secretary of State is first notified, no director may resign when CFN would then be left without a duly elected director in charge of its affairs.

Vacancies on the Board may be filled by vote of a majority of the directors then in office, whether or not the number of directors then in office is less than a quorum, or by vote of a sole remaining director. Before the removal of any director, the director to be removed shall have been notified in writing in the manner set forth in Section 7.4 that such action would be considered at the meeting at which removal is voted.

**7.4. Meetings.** Regular meetings of the Board shall be held at such times as are fixed by the Board. Such regular meetings may be held without notice. Meetings shall be held at any place designated in any notice of the meeting, by resolution of the Board, or, if not designated, at CFN's principal office. A meeting may be held at any place consented to in writing by all the directors, either before or after the meeting. Consents shall be filed with the minutes of the meeting. Any meeting may be held by conference telephone or other communications equipment, as long as all directors participating in the meeting can communicate with one another. All such directors shall be deemed to be present in person at such meeting.

Meetings of the Board for any purpose may be called at any time by the chairperson of the Board, the president, the secretary, or any two directors. Notice of the date, time, and place of meetings shall be delivered personally to each director or communicated to each director by telephone (including a voice messaging system which records and communicates messages), facsimile, or electronic mail at least three days before the date of the meeting, or communicated by telegraph, express mail service, first-class or by other means of written communication, charges prepaid, addressed to the director at the director's address as it is shown upon CFN's records, deposited in the mails or given to the telegraph company or express mail company or other carrier at least three days before the date of the meeting. The notice need not specify the purpose of the meeting. Notice of a meeting need not be given to any director who signs a waiver of notice or a consent to holding the meeting or an approval of the minutes of the meeting, whether before or after the meeting, or who attends the meeting without protesting, before the meeting or at its commencement, the lack of notice to such director. The waiver of notice or consent need not specify the purpose of the meeting. All such waivers, consents, and approvals shall be filed with the corporate records or made a part of the minutes of the meeting.

**7.5. Action at a Meeting.** Presence of a majority of the directors then in office or fifty percent of the authorized number of directors, whichever is greater, at a meeting of the Board constitutes a quorum for the transaction of business, except as otherwise provided in these Bylaws. Every act done or decision made by a majority of the directors present at a meeting duly held at which a quorum is present shall be regarded as the act of the Board, unless a greater number, or the same number after disqualifying one or more directors from voting, is required by

the Articles of Incorporation or these bylaws. Directors may vote by proxy. A meeting at which a quorum is initially present, including an adjourned meeting, may continue to transact business notwithstanding the withdrawal of directors, if any action taken is approved by at least a disinterested majority of the required quorum for such meeting, or such greater number as required by the Articles of Incorporation or these bylaws.

**7.6. Adjourned Meeting and Notice.** A majority of the directors present, whether or not a quorum is present, may adjourn any meeting to another time and place. If the meeting is adjourned for more than twenty-four hours, notice of any adjournment to another time or place shall be given before the time of the adjourned meeting to the directors who were not present at the time of the adjournment. Such notice may be waived in the manner provided for in Section 7.4.

**7.7. Action Without a Meeting.** The Board may take any required or permitted action without a meeting, if all members of the Board shall individually or collectively consent in writing or by electronic message to such action. Such written consent or consents shall be filed with the minutes of the proceedings of the Board. Such action by written consent shall have the same force and effect as the unanimous vote of such directors. For purposes of this section only, "all members of the Board" does not include any interested directors, their direct family members, or any businesses for which the director owns a full or partial ownership interest if such directors or other parties stand to benefit financially from the action under consideration.

**7.8. Fees and Compensation.** Directors and members of committees may not receive any compensation for their services as such, but may receive reasonable reimbursement of expenses incurred in the performance of their duties as may be fixed or determined by resolution of the Board. Directors may not be compensated for rendering services to this corporation in any capacity other than director, unless such compensation is just and reasonable and is approved as such by all of the disinterested directors.

**7.9. Committees.** The Board of Directors may take action to designate one or more committees, each of which shall consist of two (2) or more directors, which committees shall have the duties assigned to them from time to time by the Board; provided, however, that no committee shall have power to bind CFN or to take action on any matter on behalf of the full Board. There shall be an audit committee at all times, composed of at least two Directors, including the Treasurer. Committees shall meet from time to time as deemed appropriate by the members of the committee or as directed by the Board. Meetings of committees may be held without notice, or with such notice, formal or informal, as deemed appropriate by the chair of the committee. Each committee shall report to the Board on its activities at each regular meeting of the Board.

## **ARTICLE VIII STANDARD OF CARE**

**8.1. General.** A director shall perform the duties of a director in good faith, in a manner such director believes to be in the best interest of CFN and with such care, including reasonable inquiry, as an ordinarily prudent person in a like situation would use under similar circumstances.

In performing the duties of a director, a director shall be entitled to rely on information, opinions, reports or statements, including financial statements and other financial data, in each case prepared or presented by:

(a) One or more CFN officers or employees whom the director believes to be reliable and competent in the matters presented; or

(b) Counsel, independent accountants, or other persons as to matters which the director believes to be within such person's professional or expert competence.

A person who performs the duties of a director in accordance with the above shall have no liability based upon any failure or alleged failure to discharge that person's obligations as a director, including, without limiting the generality of the foregoing, any actions or omissions which exceed or defeat a public or charitable purpose to which CFN, or assets held by it, are dedicated.

**8.2. Indemnification.** To the full extent permitted by Kentucky law, CFN shall indemnify any person made, or threatened to be made, a party to any proceeding (whether brought by or in the right of CFN or otherwise) by reason of the fact that such person is or was a Director or officer of CFN against judgments, penalties, fines, settlements and reasonable expenses (including attorneys' fees) actually incurred in connection with such proceeding; and the Board may, at any time, approve indemnification of any other person which CFN has the power to indemnify under law. This indemnification shall not be deemed exclusive of any other rights to which a person may be entitled as a matter of law or by contract or by vote of the Board. CFN may purchase and maintain indemnification insurance for any person to the extent allowed by applicable law. Any proposed indemnification of a director, including any payment or reimbursement of expenses, shall be immediately reported to the Board in a written report containing a brief description of the proceedings involving the director being indemnified and the nature and probable extent of such indemnification, and all available information regarding such indemnification shall be reported to the Board at each meeting of the Board, or as may be requested from time to time by any member of the Board.

CFN shall have power to purchase and maintain insurance to the fullest extent permitted by law on behalf of any agent of CFN, against any liability asserted against or incurred by the agent in such capacity or arising out of the agent's status as such, or to give other indemnification to the extent permitted by law.

## **ARTICLE IX OFFICERS**

**9.1. Number.** There shall be a minimum of three officers - president, secretary and treasurer, and such other officers as the Board may designate by resolution. The secretary need not be a member of the Board. The same person may hold any number of offices, except that neither the secretary nor the treasurer may serve concurrently as the president and the executive director shall not simultaneously hold any other office. The president, unless otherwise designated by the Board, shall be the chairman of the Board.



**9.2. Duties.** The officers shall perform the duties specified in this Article IX and all other duties customary to their office or required by law. The officers shall be subject to the Board's control at all times and shall perform any additional duties the Board shall from time to time specify. In addition, the following duties shall specifically apply:

(a) **President.** The president shall generally supervise and control all of the day-to-day business and affairs of CFN, except as the president and Board may see fit to delegate or assign those responsibilities to the executive director. The president shall perform all duties incident to the office of president and such other duties as may be prescribed by the Board from time to time.

(b) **Vice President.** In the absence of the president or in the event of the president's inability or refusal to act, a vice president, if appointed, shall perform the duties of the president and, when so acting, shall have all of the powers and be subject to all of the restrictions upon the president. Any vice president shall perform such other duties as from time to time may be assigned by the president or by the Board.

(c) **Secretary.** The secretary, or his or her designee, shall be custodian of all of CFN's records and documents which are to be kept at CFN's principal office, shall act as secretary of all the Board meetings, and shall keep the minutes of all such meetings in books proposed for that purpose. He or she shall attend to the giving and serving of all notices of CFN, and shall see that CFN's seal is affixed to all documents, the execution of which on behalf of CFN under its seal is duly authorized in accordance with the provisions of these bylaws.

(d) **Treasurer.** The treasurer shall keep and maintain, or cause to be kept and maintained, adequate and correct accounts of CFN's properties and business transactions, including accounts of its assets, liabilities, receipts, disbursements, gains, losses, capital, retained earnings, and other matters customarily included in financial statements. The treasurer shall have oversight over the deposit of all moneys and other valuables in CFN's name and credit with such depositories as the Board may designate. The treasurer shall have oversight over the disbursement of CFN's funds in accordance with the directions of the Board and the Audit Committee, and shall render to the president and directors, whenever they request it, an account of all of the treasurer's transactions as treasurer and of CFN's financial condition.

**9.3. Appointment.** The officers shall be chosen by the Board at its first meeting. Officer vacancies shall be filled by vote of a majority of the directors then in office, whether or not the number of directors then in office is less than a quorum, or by vote of a sole remaining director. If an officer to be removed also serves as a director, he or she shall abstain from any vote by the Board regarding his or her removal and shall not be counted for purposes of determining whether a majority of the directors voted in favor of removal.

**9.4. Term.** The term of office of each officer shall be one year, or until such officer's replacement is duly appointed by the Board. Each officer, including an officer elected to fill a vacancy, shall hold office until expiration of the term for which elected and until a successor has been elected and qualified.

**9.5 Vacancies.** A vacancy of an officer's position shall exist on the occurrence of the following:

- (a) the death or resignation of any officer;
- (b) the declaration by resolution of the Board of a vacancy in the office of a officer who has been declared of unsound mind by a final order of court, convicted of a felony, or found by final order or judgment of any court to have breached a duty dealing with standards of conduct;
- (c) the vote of the Board to remove an officer; or
- (d) an increase in the authorized number of officers.

Except as provided in this paragraph, any officer may resign effective upon giving written notice to the Board, unless the notice specifies a later time for the effectiveness of the resignation. If the resignation is effective at a future time, a successor may be designated to take office when the resignation becomes effective. The Board may remove any officer with or without cause.

**9.5. Compensation.** No officer shall receive any salary or any other compensation for such officer's services, but all officers may be reimbursed for out-of-pocket expenses necessarily incurred in the discharge of such officer's duties. Provided, however, that this Section 9.5 shall not be deemed to prohibit payment of any officer who is also an employee or independent contractor pursuant to the terms of such employee's employment or contract as established by the Board, in the case of the executive director, or by the executive director, in the case of other employees or independent contractors.

## ARTICLE X EXECUTION OF CORPORATE INSTRUMENTS

**10.1. Execution of Corporate Instruments.** The Board may, in its discretion, determine the method and designate the signatory officer or officers or other person or persons, to execute any corporate instrument or document, or to sign the corporate name without limitation, except when otherwise provided by law, and such execution or signature shall be binding upon CFN.

Unless otherwise specifically determined by the Board of Directors or otherwise required by law, formal contracts of CFN, promissory notes, deeds of trust, mortgages, and other evidences of indebtedness of CFN, and other corporate instruments or documents, memberships in other corporations, and certificates of shares of stock owned by CFN, shall be executed, signed, or endorsed by the Executive Director with oversight by and approval of the Board.

All checks and drafts drawn on banks or other depositories on funds to the credit of CFN, or in special accounts of CFN, shall be signed by such person or persons as the Board shall authorize to do so.

**10.2. Loans and Contracts.** No loans or advances shall be contracted on behalf of CFN, and no note or other evidence of indebtedness shall be issued in its name, unless and except as the specific transaction is authorized by the Board. All grant agreements and contracts for the rendering of services to be entered into by CFN shall be subject to the advice and consent of the Board. Except as otherwise provided in these bylaws, without the express and specific authorization of the Board, no officer or other agent of CFN may enter into any contract or execute and deliver any instrument in the name of or on CFN's behalf if the contract or instrument creates or may create an indebtedness or aggregate obligation of more than \$500 payable in excess of 30 days.

**10.3. Employment and Independent Contractor Contracts.** The Board shall approve the employment contract of the Executive Director. The Executive Director shall approve the employment contracts of all other employees and all contracts for services with independent contractors, with the advice and consent of the Board.

## **ARTICLE XI RECORDS AND REPORTS**

**11.1. Maintenance and Inspection of Articles and Bylaws.** CFN shall keep at its principal office the original or a copy of its Articles of Incorporation and bylaws as amended to date, which shall be open to inspection by the directors at all reasonable times during office hours.

**11.2. Maintenance and Inspection of Federal Tax Exemption Application and Annual Information Returns.** CFN shall keep at its principal office a copy of its federal tax exemption application and its annual information returns for three years from their date of filing, which shall be open to public inspection and copying to the extent required by law.

**11.3. Maintenance and Inspection of Other Corporate Records.** CFN shall keep adequate and correct books and records of accounts; written minutes of the proceedings of its Board; and a record of each director's name and address. All such records shall be kept at such place or places designated by the Board, or, in the absence of such designation, at CFN's principal office. The minutes shall be kept in written or typed form, and other books and records shall be kept either in written or typed form or in any other form capable of being converted into written, typed, or printed form. Upon leaving office, each officer, employee, or agent of CFN shall turn over to his or her successor or the president, in good order, such corporate monies, books, records, minutes, lists, documents, contracts or other property of CFN as have been in the custody of such officer, employee, or agent during his or her term of office.

Every director shall have the absolute right at any reasonable time to inspect all books, records, and documents of every kind and the physical properties CFN. The inspection may be made in person or by an agent or attorney, and shall include the right to copy and make extracts of documents.

## **ARTICLE XII FISCAL YEAR**

The fiscal year for CFN shall be the calendar year.

**ARTICLE XIII  
AMENDMENTS AND REVISIONS**

The Board may adopt, amend, or repeal bylaws by affirmative vote of a majority of the directors then in office.

Proposed amendments to these bylaws must be in writing and sent to the directors at least seven days in advance of the Board meeting at which they will be considered for adoption unless such notice is waived by all members of the Board at such meeting.

If any provision of these bylaws requires the vote of a larger proportion of the Board than is otherwise required by law, that provision may not be altered, amended, or repealed except by that greater vote.

New bylaws may be adopted, or these bylaws may be amended or repealed, by approval of the Board. No amendment may extend the term of a director beyond that for which the director was elected.

**ARTICLE XIV  
CORPORATE SEAL**

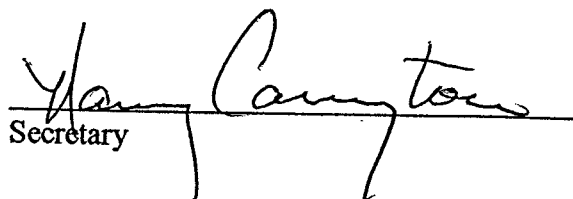
The Board may adopt, use, and alter a corporate seal. The seal shall be kept at the principal office of CFN. Failure to affix the seal to any corporate instrument, however, shall not affect the validity of that instrument.

**ARTICLE XV  
CONSTRUCTION AND DEFINITIONS**

Unless the context otherwise requires, the general provisions, rules of construction, and definitions contained in the Act, as amended from time to time, shall govern the construction of these bylaws. Without limiting the generality of the foregoing, the masculine gender includes the feminine and neuter, the singular number includes the plural and the plural number includes the singular, and the term "person" includes a corporation as well as a natural person. If any competent court of law shall deem any portion of these bylaws invalid or inoperative, then so far as is reasonable and possible (i) the remainder of these bylaws shall be considered valid and operative, and (ii) effect shall be given to the intent manifested by the portion deemed invalid or inoperative.

## CERTIFICATE OF SECRETARY

I, the undersigned, certify that I am the presently elected and acting secretary of The Louisville Center for Community Development, Inc., d/b/a/ Center for Neighborhoods, a Kentucky nonprofit corporation, and the above bylaws, consisting of 10 pages, are the bylaws of this corporation as adopted by the Board of Directors on 11-19-2008, and that they have not been amended or modified since that date.

  
Secretary

# FBM

PROPERTIES

— Fox Baser Managed —

June 11, 2013

Mr. Jack Trawick  
Louisville Community Design Center  
Chestnut Centre  
610 S. Fourth Avenue, Suite 701  
Louisville, KY 40202

Pursuant to your space Suite 701 in the Chestnut Centre, FBM is willing to extend your existing Lease for a period of One (1) year effective November 1, 2013 to October 31, 2014.

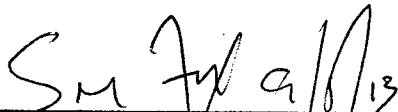
The renewal rate will remain the same as will all other terms and conditions of your present Lease.

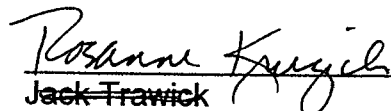
After reviewing, if you are in compliance, please sign both copies of this letter, return both to FBM Properties and Mr. Fox will execute and return a copy to you for your records.

We look forward to a continued relationship and we thank you very much for allowing us to satisfy your space needs. Please do not hesitate to call if there are any questions.

In Agreement:  
FBM Properties

In Agreement:  
Louisville Community Design Center

  
\_\_\_\_\_  
Stephen M. Fox                      Date

 9/3/2013  
\_\_\_\_\_  
~~Jack Trawick~~                      Date

ROSANNE KRUZICH  
INTERIM DIRECTOR

## 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 COMMUNITY DESIGN CENTER**

Business name/disregarded entity name, if different from above  
**CENTER FOR NEIGHBORHOODS**

Check appropriate box for federal tax classification (required):  
 Individual/sole proprietor     C Corporation     S Corporation     Partnership     Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶

Other (see instructions) ▶

**NON-PROFIT CORPORATION**

Address (number, street, and apt. or suite no.)  
**610 SOUTH 4TH STREET, SUITE 701**

City, state, and ZIP code  
**LOUISVILLE, KY 40202**

List account number(s) here (optional)

Requester's name and address (optional)

Exempt payee

### 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.

Social security number

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

Employer identification number

6	1	-	0	8	8	9	0	0	3
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### 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 ▶ *Bucky Blair*

Date ▶ *3-5-2013*

### 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.