m. 20

2014 [illegible] PM 12:47

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

Applicant/Program: Riverside, the Farnsley-Moremen Landing, Inc. - "200 Years on the Ohio" Event

Executive Summary of Request: Neighborhood Development Funding will be directed to Riverside, the Farnsley-Moremen Landing, Inc. for costs associated with the "200 Years on the Ohio" event to celebrate life and culture on the Ohio River. The event will be held on September 20 & 21, and will feature activities, tours, and historic reenactments that include a circa 1800's baseball game.

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.

14	Cindi Fowler	$1350.00	8/28/14
District #	Primary Sponsor Signature	Amount	Date

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

Approved by:

____
Appropriations Committee Chairman   Date

Clerk's Office Only:

Request Amount: ____________ Committee Amended Appropriation: ____________

Original Appropriation: ____________ Council Amended Appropriation: ____________

OFFICE OF METRO COUNCIL CLERK
REVIEWED
DATE 9-10-14 TIME 12:13pm

Applicant/Program: **Riverside, the Farnsley-Moremen Landing, Inc. - "200 Years on the Ohio" Event**

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

District #	Council Member Signature	Amount	Date
13	Vicki Aubrey Welch	#925.00	8/28/14
12	[signature]	925	8-28-14
25	[signature]	500.00	8/28/14

NDF NON-PROFIT APPLICATION CHECKLIST

Legal Name of Applicant Organization: Riverside, the Farnsley-Moremen Landing, Inc.

Program Name: "200 Year on the Ohio" Request Amount: $3,700	**Yes/No/NA**
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?	YES
Request form: Is the funding proposed less than or equal to the request amount?	YES
Request form: Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?	YES
Application Page 1: Has prior Metro funds committed/granted been disclosed?	YES
Application Page 1: Is the application properly signed and dated by authorized signatory?	YES
Application Page 3: Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?	N/A
Application Pages 3 – 5: Is the proposed public purpose of the program well-documented?	YES
Application 4: Is there adequate documentation of how the proceeds of the fundraiser will be spent?	N/A
Application Budget Page 6: Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for "Metro, Non Metro and Total" expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?	YES
Faith Based Organizations: Is the signed Faith Based Form signed and included?	N/A
Jefferson County Only: Will all funding be spent in Louisville/Jefferson County?	YES
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?	N/A
Good Standing: Is the entity in good standing with: • Kentucky Secretary of State – include Secretary of State website information on organization • Louisville Metro Government – check OMB monthly report filed in Council Financial Reports • Internal Revenue Service – most recent Form 990 included	 YES YES YES
Separate Taxing Districts: If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?	N/A
Small Cities: Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)	N/A
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?	N/A
IRS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	YES
Operating Budget: Is the organization's current fiscal year operating budget included?	YES
Ordinance Required: Is the amount committed by Council members greater than $5,000 **to any one project/program within an organization** in this fiscal year.	NO
Board Members: Is the entity's board member list (with term length/term limits) included?	YES
Staff: Is a list of the highest paid staff included with their expected annual personnel costs?	N/A
Annual Audit: Is the most recent annual audit (if required by organization) included?	YES
Rent Requests: Is a copy of signed lease included?	N/A
Articles of Incorporation: Are the Articles of Incorporation of the organization included?	YES
IRS Form W-9: Is the IRS Form W-9 included?	YES
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?	N/A
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?	N/A

Prepared by: [signature] Date: 8/25/14

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization: *(as listed on: http://www.sos.ky.gov/business/records)*	Riverside, the Farnsley-Moremen Landing, Inc.		
Main Office Street & Mailing Address:	7410 Moorman Road, Louisville, KY 40272		
Website:	www.riverside-landing.org		
Applicant Contact:	Reba Doutrick	**Title:**	Board Chair
Phone:	502/937-4934	**Email:**	RebaD@twc.com
Financial Contact:	Patti Linn or Nicole Jacobsen-Nally	**Title:**	Site Manager / Treasurer
Phone:	502/935-6809	**Email:**	patti.linn@louisvilleky.gov
Organization's Representative who attended NDF Training:	Carmen Miller, Vice-Chair		
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	Riverside, the Farnsley-Moremen Landing		
Council District(s):	District 14	**Zip Code(s):**	40272

SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME:	"200 Years on the Ohio"		
Total Request: ($)	$3,700	**Total Metro Award (this program) in previous year: ($)**	$3,700

Purpose of Request (check all that apply):

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

The Following are Required Attachments:

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

Organization has no paid staff

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

Source:		Amount: ($)	
Source:		Amount: ($)	
Source:		Amount: ($)	

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

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

Applicant's Initials RD

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

Mission Statement: Riverside, the Farnsley-Moremen Landing exists to promote, preserve, restore and interpret historic farm life on the Ohio River.

Riverside, the Farnsley-Moremen Landing, Inc. raises funds to support its mission centered around this historic home and site located in southwest Louisville. Activities include: public education programs for children and adults, special events for the general public, long-range planning, maintenance of historic gardening program, and capital projects.

Applicant's Initials

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.): "200 Years On the Ohio: A Living Timeline Event" -- Saturday & Sunday, September 20 & 21, 2014. Historical timeline event designed to bring the community together to experience, enjoy and learn about the historic site and its mission; and to provide visitors with information that places local history in a larger historical context. Featured activities include: tours of the Farnsley-Moremen House (built 1837), historical re-enactors camped on site demonstrating information, clothing, pastimes, and crafts from each period, special presentations by historical re-enactors, a temporary exhibit on Louisville's role in WWI, and an 1860s base ball game between the Cincinnati Red Stockings and the Cincinnati Buckeyes on Sunday, September 21.
B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s): Funds will be used to cover costs of some presenters and re-enactors (examples: base ball teams, Abraham Lincoln re-enactor) and supplies/services (tents, port-o-lets).

Applicant's Initials

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

N/A

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

☐ Effective October 24, 2013, reimbursements should not be made unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):

- ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
- ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.

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

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

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

Applicant's Initials

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

The event is designed to increase awareness of and appreciation for this educational/historical community resource. Attendance will be a measure of how many people were served through the event. Volunteers at our information booth will collect comments on the event through an informal survey process. We will also monitor feedback on our website and social media sites.

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.

Riverside, the Farnsley-Moremen Landing collaborates with a number of community partners. A few of our partners will be represented at the "200 Years" Event. For example, the Falls Landing Foundaiton, Inc., another nonprofit, helps to identify and coordinate volunteer re-enactors for the weekend. The Kentucky Archaeological Survey (KAS) will open up the dig site during the event to interact with the public to education them about the current archaeology project. We are also working with the Camp Taylor Historical Society on the temporary exhibit on Louisville in WWI.

Other community partners will help promote the event through email and social media. Those partners include: Southwest Dream Team, Dixie Area Business Association, the Kentuckiana Heritage Consortium, and the Arts and Cultural Attractions Council.

Applicant's Initials

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 Proposed Metro Funds	Column 2 Non-Metro Funds	Column (1+2)=3 Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (Attach Detailed List)			
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (Attach Detail List)	$3,700	$4,200	$7,900
J: Small Equipment			
K: Capital Equipment			
L: Other Expenses (Attach Detail List)			
***TOTAL PROGRAM/PROJECT FUNDS**			
% of Program Budget	46 %	54 %	100%

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

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	1,000
Fees Collected from Program Participants	3,200
Other (please specify)	
Total Revenue for Columns 2 Expenses **	4,200

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

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

Applicant's Initials

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
	$2,000	10/hour for 200 hours
Total Value of In-Kind ***(to match Program Budget Line Item.*** Volunteer Contribution &Other In Kind)	$2,000	

*** 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: June 30

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:

Applicant's Initials

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:	Reba Doutrick	**Date:**	8/8/14
Legal Signatory: (please print):	Reba Doutrick	**Title:**	Board Chair

Phone:	502/937-4934	**Extension:**		**Email:**	RebaD@twc.com

Applicant's Initials RD

***List of Estimated Expenses "200 Years on the Ohio" Event at Riverside, the Farnsley-Moremen Landing**
September 20 & 21, 2014
NDF Funds

Entertainment/Performers/Activities:
Dennis Boggs/Lincoln Re-enactor -- $1,950
Period Baseball Game -- $1,200
Blacksmith/Demonstrator -- $275

Other:
Port-o-lets -- $275

Total: $3,700

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

DEPARTMENT OF THE TREASURY

Date: SEP 15 1995

[redacted]

RIVERSIDE, THE FARNSLEY-MOREMAN
LANDING, INC.
7410 MOORMAN RD.
LOUISVILLE, KY 40272

Contact Person:
KIM NGUYEN
Contact Telephone Number:
(513) 684-3578
Accounting Period Ending:
June 30
Foundation Status Classification:
509(a)(1)
Advance Ruling Period Begins:
July 1, 1993
Advance Ruling Period Ends:
June 30, 1998
Addendum Applies:
No

Dear Applicant:

Based on information you 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(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably expect to be a publicly supported organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, during an advance ruling period you will be treated as a publicly supported organization, and not as a private foundation. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must send us the information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, we will classify you as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, we will classify you as a private foundation for future periods. Also, if we classify you as a private foundation, we will treat you as a private foundation from your beginning date for purposes of section 507(d) and 4940.

Grantors and contributors may rely on our determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you send us the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until we make a final determination of your foundation status.

If we publish a notice in the Internal Revenue Bulletin stating that we

RIVERSIDE, THE FARNSLEY-MOREMAN

will no longer treat you as a publicly supported organization, grantors and contributors may not rely on this determination after the date we publish the notice. In addition, if you lose your status as a publicly supported organization, and a grantor or contributor was responsible for, or was aware of, the act or failure to act, that resulted in your loss of such status, that person may not rely on this determination from the date of the act or failure to act. Also, if a grantor or contributor learned that we had given notice that you would be removed from classification as a publicly supported organization, then that person may not rely on this determination as of the date he or she acquired such knowledge.

If you change your sources of support, your purposes, character, or method of operation, please let us know so we can consider the effect of the change on your exempt status and foundation status. If you amend your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, let us know all changes in your name or address.

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

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

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

Donors may deduct contributions to you only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fundraising events may not necessarily qualify as deductible contributions, depending on the circumstances. Revenue Ruling 67-246, published in Cumulative Bulletin 1967-2, on page 104, gives guidelines regarding when taxpayers may deduct payments for admission to, or other participation in, fundraising activities for charity.

You are not required to file Form 990, Return of Organization Exempt From Income Tax, if your gross receipts each year are normally $25,000 or less. If you receive a Form 990 package in the mail, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally $25,000 or less, and sign the return.

If you are required to file a return you must file it by the 15th day of the fifth month after the end of your annual accounting period. We charge a penalty of $10 a day when a return is filed late, unless there is reasonable

RIVERSIDE, THE FARNSLEY-MOREMAN

cause for the delay. However, the maximum penalty we charge cannot exceed $5,000 or 5 percent of your gross receipts for the year, whichever is less. We may also charge this penalty if a return is not complete. So, please be sure your return is complete before you file it.

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

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

This determination is based on evidence that your funds are dedicated to the purposes listed in section 501(c)(3) of the Code. To assure your continued exemption, you should keep records to show that funds are spent only for those purposes. If you distribute funds to other organizations, your records should show whether they are exempt under section 501(c)(3). In cases where the recipient organization is not exempt under section 501(c)(3), you must have evidence that the funds will remain dedicated to the required purposes and that the recipient will use the funds for those purposes.

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

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

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,

C. Ashley Bullard

C. Ashley Bullard
District Director

Enclosure(s):
Form 872-C

Riverside, the Farnsley-Moremen Landing, Inc.

Summary of Projected Operating Budget 2014-2015

Income

Fundraising

Brick Campaign	1,000
Derby Brunch Income	40,000
Memberships	3,000
Plant Sale	7,000
Donations (unrestricted)	5,000
Donations (restricted)	0
Grants	10,000
Museum Store Sales	4,000
Interest Income	77
Programming	
Building Blocks Fieldtrips	24,000
Ice Cream Social	5,900
200 Years On the Ohio	7,900
Holiday Event	2,000
Program Income - Other	150
TOTAL OPERATING INCOME	**110,027**

Expenses

Derby Brunch Expenses	18,000
Plant Sale Expenses	3,700
Museum Store Merchandise/Taxes	2,000
Building Blocks	19,370
Ice Cream Social	5,000
200 Years On the Ohio	5,000
Holiday Event	1,200
Other Programs	3,500
Support (insurance, fees, postage, supplies)	1,200
Volunteer Recognition	1,500
Historic Garden	3,000
Grant for Seasonal Employees to Metro	4,500
Special Projects (historic house and chapel)	20,000
TOTAL OPERATING EXPENSES	**87,970**
Profit/(Loss)	**22,057**

Riverside, the Farnsley-Moremen Landing, Inc.

Board Membership 2014

Reba Doutrick, Chair

[redacted]

Carmen Miller, Vice-Chair

[redacted]

Term Expires: 12/31/2016

Nicole Jacobsen-Nally, Treasurer

[redacted]

Term Expires: 12/31/2015

Kathleen Blanton, Secretary

[redacted]

Term Expires: 12/31/2016

Sandy Allen

[redacted]

Term Expires: 12/31/2014

Dennis Burke

[redacted]

Term Expires: 12/31/2016

James Caskey

[redacted]

Virginia Crowder

[redacted]

Term Expires: 12/31/2014

Laura Dunne

[redacted]

Term Expires: 12/31/2015

Scott Farley

[redacted]

Term Expires: 12/31/2015

[redacted]

Term Expires: 12/31/2015

John Hamilton

[redacted]

ExOfficio

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 7/01 , 2012, and ending 6/30 , 2013

B Check if applicable:
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

C RIVERSIDE THE FARNSLEY-MOREMEN LANDING INC
7410 MOORMAN ROAD
LOUISVILLE, KY 40272

D Employer Identification Number
[redacted]
502-935-6809

G Gross receipts $ 1,589,743.

F Name and address of principal officer: B
Same As C Above

H(a) Is this a group return for affiliates? [ ] Yes [X] No
H(b) Are all affiliates included? [ ] Yes [ ] No
If 'No,' attach a list. (see instructions)

I Tax-exempt status [X] 501(c)(3) [ ] 501(c) ( ) ◄ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ► N/A

H(c) Group exemption number ►

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ►

L Year of Formation: 1995 **M** State of legal domicile: KY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: ALL ACTIVITIES REPRESENT HISTORICAL LIFE AND SHOWCASE HISTORICAL ACTIVITY

2 Check this box ► [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	15
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	0
5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	0
6 Total number of volunteers (estimate if necessary)	6	20
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.

	Prior Year	Current Year
Revenue		
8 Contributions and grants (Part VIII, line 1h)	4,682.	42,200.
9 Program service revenue (Part VIII, line 2g)	33,240.	40,798.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	84.	77.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	58,952.	1,506,668.
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	96,958.	1,589,743.
Expenses		
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
14 Benefits paid to or for members (Part IX, column (A), line 4)		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
16a Professional fundraising fees (Part IX, column (A), line 11e)		
b Total fundraising expenses (Part IX, column (D), line 25) ► 1,424,855.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	116,354.	1,527,710.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	116,354.	1,527,710.
19 Revenue less expenses. Subtract line 18 from line 12	-19,396.	62,033.
Net Assets or Fund Balances	**Beginning of Current Year**	**End of Year**
20 Total assets (Part X, line 16)	223,143.	335,176.
21 Total liabilities (Part X, line 26)	0.	0.
22 Net assets or fund balances. Subtract line 21 from line 20	223,143.	335,176.

Part II Signature Block

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

Sign Here

► Reba Doutrick Signature of officer Date 2/17/14

► ~~[illegible]~~ Reba Doutrick ~~[illegible]~~ Chair
Type or print name and title.

Paid Preparer Use Only

Print/Type preparer's name: Diane Howard
Preparer's signature: Diane Howard
Date: 2-7-2014
Check [ ] if self-employed
PTIN: P00794960
Firm's name ► Stephens & Lawson
Firm's address ► 5203 Dixie Hwy
Louisville, KY 40216
Firm's EIN ► 61-1242942
Phone no. (502) 448-4376

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

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:

ALL ACTIVITIES REPRESENT HISTORICAL LIFE AND SHOWCASE HISTORICAL ACTIVITY

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 and section 4947(a)(1) trusts 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 $ 96,858. including grants of $) (Revenue $)

ALL ACTIVITIES REPRESENT HISTORICAL LIFE AND SHOWCASE HISTORICAL ACTIVITY

4b (Code:) (Expenses $ including grants of $) (Revenue $)

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services. (Describe in Schedule O.)

(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ► 96,858.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

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

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

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. X

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► None

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make 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 makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. See Schedule O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

► PATTI LINN 7410 MOORMAN ROAD LOUISVILLE KY 40272 502-935-6809

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compens[redacted]nd 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 dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(1) See Attached List Director	10 0							0.	0.	0.
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensat [redacted] *t)*

(A) Name and title	(B) Average hours per week (list any hours for related organiza-tions below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
)										
)										
)										
)										
)										
)										
)										
)										
)										
)										
)										
b Sub-total ▶								0.	0.	0.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 0

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual*	3		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If 'Yes' complete Schedule J for such individual*	4		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If 'Yes,' complete Schedule J for such person.*	5		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

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

TEEA0108L 01/24/13

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
1 a Federated campaigns	1a					
b Membership dues	1b					
c Fundraising events	1c					
d Related organizations	1d					
e Government grants (contributions)	1e					
f All other contributions, gifts, grants, and similar amounts not included above	1f	42,200.				
g Noncash contributions included in lns 1a-1f:	$					
h Total. Add lines 1a-1f			42,200.			
	Business Code					
2 a EVENT ADMISSIONS			22,926.	22,926.		
b MISC PROGRAM RECEIPTS			12,329.	12,329.		
c MUSEUM STORE RECEIPTS			3,768.	3,768.		
d Membership Dues & Assessments			1,775.			1,775.
e						
f All other program service revenue						
g Total. Add lines 2a-2f			40,798.			
3 Investment income (including dividends, interest and other similar amounts)			77.			77.
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
	(i) Real	(ii) Personal				
6 a Gross rents						
b Less: rental expenses						
c Rental income or (loss)						
d Net rental income or (loss)						
	(i) Securities	(ii) Other				
7 a Gross amount from sales of assets other than inventory						
b Less: cost or other basis and sales expenses						
c Gain or (loss)						
d Net gain or (loss)						
8 a Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18	a	57,238.				
b Less: direct expenses	b					
c Net income or (loss) from fundraising events			57,238.			
9 a Gross income from gaming activities. See Part IV, line 19	a	1,449,430.				
b Less: direct expenses	b					
c Net income or (loss) from gaming activities			1,449,430.			1,449,430.
10 a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code					
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions.			1,589,743.	39,023.	0.	1,451,282.

rt IX Statement of Functional Expenses

ction 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 . . . . . . ☐

not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
Grants and other assistance to individuals in the United States. See Part IV, line 22				
Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
Benefits paid to or for members				
Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
Other salaries and wages				
Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
Other employee benefits				
Payroll taxes				
Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch O)				
Advertising and promotion				
Office expenses				
Information technology				
Royalties				
Occupancy				
Travel				
Payments of travel or entertainment expenses for any federal, state, or local public officials				
Conferences, conventions, and meetings				
Interest	16.	16.		
Payments to affiliates				
Depreciation, depletion, and amortization				
Insurance				
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 FUNDRAISING EXPENSES	1,424,855.			1,424,855.
b CONTRACT LABOR	61,950.	61,950.		
c HISTORICAL RESEARCH & RESTORE	18,209.	18,209.		
d INSURANCE	4,367.		4,367.	
e All other expenses	18,313.	16,683.	1,630.	
Total functional expenses. Add lines 1 through 24e	1,527,710.	96,858.	5,997.	1,424,855.
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
1	Cash — non-interest-bearing	34,520.	1	85,184.
2	Savings and temporary cash investments	126,769.	2	138,138.
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 10a			
b	Less: accumulated depreciation 10b		10c	
11	Investments — publicly traded securities		11	
12	Investments — other securities. See Part IV, line 11		12	
13	Investments — program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	61,854.	15	111,854.
16	**Total assets.** Add lines 1 through 15 (must equal line 34)	223,143.	16	335,176.
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
26	**Total liabilities.** Add lines 17 through 25	0.	26	0.
	Organizations that follow SFAS 117 (ASC 958), check here ► ☒ and complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	96,374.	27	197,038.
28	Temporarily restricted net assets	126,769.	28	138,138.
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	223,143.	33	335,176.
34	Total liabilities and net assets/fund balances	223,143.	34	335,176.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI ... [X]

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,589,743.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,527,710.
3	Revenue less expenses. Subtract line 2 from line 1	3	62,033.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	223,143.
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) See Schedule O	9	50,000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	335,176.

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: [X] Cash [ ] Accrual [ ] Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: [ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis	2a		X
b	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: [X] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis	2b	X	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X	
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		

HEDULE A
(m 990 or 990-EZ)

rtment of the Treasury
al Revenue Service

Public Charity Status and Public Support

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.**

OMB No. 1545-0047

2012

Open to Public Inspection

of the organization: RIVERSIDE THE FARNSLEY-MOREMEN LANDING INC

[redacted]

Reason for Public Charity Status (All organizations must complete this part.) S

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

☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i).**

☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

☐ 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:

☐ 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.)

☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

☒ 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.)

☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

☐ 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.)

☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 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?

			Yes	No
(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?	11 g (i)		
(ii)	A family member of a person described in (i) above?	11 g (ii)		
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11 g (iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document? Yes	No	(v) Did you notify the organization in column (i) of your support? Yes	No	(vi) Is the organization in column (i) organized in the U.S.? Yes	No	(vii) Amount of monetary support
al									

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

Schedule A (Form 990 or 990-EZ) 2012

TEEA0401L 08/09/12

rt 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.)

ction A. Public Support

endar year (or fiscal year inning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	215,230.	33,497.	38,850.			287,577.
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
The value of services or facilities furnished by a governmental unit to the organization without charge						0.
Total. Add lines 1 through 3	215,230.	33,497.	38,850.	0.	0.	287,577.
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)						55,502.
Public support. Subtract line 5 from line 4						232,075.

ction B. Total Support

endar year (or fiscal year inning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Amounts from line 4	215,230.	33,497.	38,850.	0.	0.	287,577.
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,319.	75.	99.			1,493.
Net income from unrelated business activities, whether or not the business is regularly carried on						0.
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
Total support. Add lines 7 through 10						289,070.

Gross receipts from related activities, etc (see instructions) 12 83,173.

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 ► [X]

ction C. Computation of Public Support Percentage

Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 %

Public support percentage from 2011 Schedule A, Part II, line 14 15 %

a **33-1/3% support test – 2012.** If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► [ ]

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 ► [ ]

a **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 ► [ ]

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 ► [ ]

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► [ ]

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 [redacted] fails to qualify under the tests listed below, please complete Part II.)

tion A. Public Support

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

tion B. Total Support

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

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** ► ☐

ction C. Computation of Public Support Percentage

Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) — 15 — %

Public support percentage from 2011 Schedule A, Part III, line 15 — 16 — %

tion D. Computation of Investment Income Percentage

Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f)) — 17 — %

Investment income percentage from **2011** Schedule A, Part III, line 17 — 18 — %

a **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 ► ☐

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

rt IV **Supplemental Information.** Complete this part to provide the explanations required b[redacted] Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

edule B
m 990, 990-EZ,
0-PF)
tment of the Treasury
l Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No. 1545-0047

2012

of the organization RIVERSIDE THE FARNSLEY-MOREMEN LANDING INC

Employer identification number
6[redacted]

nization type (check one):

s of:	Section:
990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

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

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

eral Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

cial Rules

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

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

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not total to more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of $5,000 or more during the year. . . . . ► $

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

of organization

VERSIDE THE FARNSLEY-MOREMEN

er [redacted]

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	LOUISVILLE METRO REVENUE COMMISSION 611 WEST JEFFERSON STREET LOUISVILLE, KY 40202	$ 9,200.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
	LG&E AND KU SERVICES COMPANY P.O. BOX 32030 LOUISVILLE, KY 40232	$ 30,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization: RIVERSIDE THE FARNSLEY-MOREMEN

Employer identification number: [redacted]

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

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

of organization

VERSIDE THE FARNSLEY-MOREMEN

[redacted]

rt III **Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8) or (10) organizations that total more than $1,000 for the year.** Complete columns (a) through (e) and the following line entry.

For organizations completing Part III, enter total of *exclusively* religious, charitable, etc, contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) . . . . ► $ N/A

Use duplicate copies of Part III if additional space is needed.

(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 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
RIVERSIDE THE FARNSLEY-MOREMEN LANDING INC

Employer identification number
[redacted]

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? ☐ Yes ☐ 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? ☐ Yes ☐ 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)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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 ►$ 111,854.

III Organizations Maintaining Collections of Art, Historical Treasures, or Other Simi [redacted]

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):

- [X] Public exhibition
- [ ] Scholarly research
- [ ] Preservation for future generations
- d [ ] Loan or exchange programs
- e [ ] Other ____________

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

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 [X] No

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.

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

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

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

Did the organization include an amount on Form 990, Part X, line 21? .... [ ] Yes [ ] No

If 'Yes,' explain the arrangement in Part XIII. Check here if the explantion has been provided in Part XIII .... [ ]

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

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

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

Board designated or quasi-endowment ► ________ %

Permanent endowment ► ________ %

Temporarily restricted endowment ► ________ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

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	3a(i)		
(ii) related organizations	3a(ii)		
If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

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
Land				
Buildings				
Leasehold improvements				
Equipment				
Other				

Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* .... ► 0.

VII Investments – Oth

(a) Description of secu (including name of

inancial derivatives. . . . .

losely-held equity interests. . .

ther

(Column (b) must equal Form 990, Par

VIII Investments – Pro

(a) Description of inves

(Column (b) must equal Form 990, Par

IX Other Assets. See

COLLECTIONS

(Column (b) must equal Form

X Other Liabilities. S

(a) Description of

Federal income taxes

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	1,589,743.
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	1,589,743.
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	1,589,743.

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

1 Total expenses and losses per audited financial statements			1	1,527,710.
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	1,527,710.
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	1,527,710.

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.

HEDULE G
m 990 or 990-EZ)

ment of the Treasury
al Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, lin[redacted]
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

2012

[redacted]en to Public
spection

of the organization RIVERSIDE THE FARNSLEY-MOREMEN LANDING INC

[redacted]er

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

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

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

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
►						0.

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

rt II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part I[redacted]rted more than $15,000 of fundraising event contributions and gross income on For[redacted]1 and 6b. List events with gross receipts greater than $5,000.

	(a) Event #1 VARIOUS PROMOT (event type)	(b) Event #2 (event type)	(c) Other events None (total number)	(d) Total events (add column (a) through column (c))
1 Gross receipts	57,238.			57,238.
2 Less: Charitable contributions				
3 Gross income (line 1 minus line 2)	57,238.			57,238.
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs				
7 Food and beverages				
8 Entertainment				
9 Other direct expenses				
10 Direct expense summary. Add lines 4 through 9 in column (d)				
11 Net income summary. Combine line 3, column (d), and line 10				57,238.

t III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
1 Gross revenue	1,449,430.			1,449,430.
2 Cash prizes				
3 Non-cash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	☐ Yes 0 % ☒ No	☐ Yes 0 % ☒ No	☐ Yes 0 % ☒ No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				
8 Net gaming income summary. Combine lines 1, column (d) and line 7				1,449,430.

Enter the state(s) in which the organization operates gaming activities: KY

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

b If 'No,' explain:

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

b If 'Yes,' explain:

Does the organization operate gaming activities with nonmembers? . . . . [X] No

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity administer charitable gaming? . . . . [ ] Yes [X] No

Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	%
b An outside facility	13b	100.0 %

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

Name ►

Address ►

a Does the organization have a contact with a third party from whom the organization receives gaming revenue? . . . . [ ] Yes [X] No

b If 'Yes,' enter the amount of gaming revenue received by the organization ► $ ______ and the amount of gaming revenue retained by the third party ► $ ______

c If 'Yes,' enter name and address of the third party:

Name ►

Address ►

Gaming manager information:

Name ►

Gaming manager compensation ► $

Description of services provided ►

[ ] Director/officer [ ] Employee [ ] Independent contractor

Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . [ ] Yes [X] No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► $

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

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization RIVERSIDE THE FARNSLEY-MOREMEN LANDING INC

[redacted]

Form 990, Part VI, Line 11b - Form 990 Review Process

DRAFT IS REVIEWED BY BOARD MEMBER BEFORE SUMMITTED.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

ITEMS ARE AVALIABLE TO THE PUBLIC UPON REQUEST

Form 990, Part XI, Line 9
Other Changes In Net Assets Or Fund Balances

ADDITIONAL COLLECTIONS	$ 50,000.
Total	$ 50,000.

Form **W-9**
(Rev. January 2003)
Department of the Treasury
Internal Revenue Service

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
Riverside, the Farnsley-Moremen, Inc.

Business name, if different from above

Check appropriate box: ☐ Individual/ Sole proprietor ☐ Corporation ☐ Partnership ☑ Other ▶ non profit Corp. ☑ Exempt from backup withholding

Address (number, street, and apt. or suite no.)
7410 Moorman Road

Requester's name and address (optional)

City, state, and ZIP code
Louisville KY 40272

List account number(s) here (optional)

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

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

Social security number

or

[redacted]

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

Part II **Certification**

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), **and**
2. I am not subject to backup withholding because: **(a)** I am exempt from backup withholding, or **(b)** I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or **(c)** the IRS has notified me that I am no longer subject to backup withholding, **and**
3. I am a U.S. person (including a U.S. resident alien).

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 ▶** Pattie Rian **Date ▶** 8-6-14

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.

U.S. person. 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.

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.*

Foreign person. If you are a foreign person, use the appropriate Form W-8 (see **Pub. 515,** Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.

2. The treaty article addressing the income.

3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

317199

RECEIVED & FILED
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JUL 1 10 41 AM '93
BOB BABBAGE
SECRETARY OF STATE
COMM. OF KENTUCKY
BY

ARTICLES OF INCORPORATION

OF

RIVERSIDE, THE FARNSLEY-MOREMEN LANDING, INC.

The undersigned, desiring to organize a non stock, non-profit corporation under the laws of the Commonwealth of Kentucky in accordance with the provisions of Chapter 273 of the Kentucky Revised Statutes hereby certifies:

ARTICLE I 717383

The name of the corporation shall be; Riverside, The Farnsley-Moremen Landing, Inc. The mailing address of its principal office is Jefferson County Courthouse, Office of the County Judge/Executive, 527 West Jefferson Street, Louisville, Kentucky 40202.

ARTICLE II

The period of duration of the corporation shall be perpetual.

ARTICLE III

The purposes of the corporation shall be not-for-profit but to promote the historic Farnsley-Moremen homesite for charitable, educational, and scientific purposes; to enhance the advancement of education, culture and the arts in the County of Jefferson and the state of Kentucky; to solicit, receive, hold

Multi-page document. Select page: 1 2 3 4 5 6

and disburse gifts, bequests and other funds for said purposes; to promote the maintenance and operation of Riverside, The Farnsley-Moremen Landing; and to do all things necessary and incident thereto. The corporation is organized exclusively for charitable and educational purposes.

ARTICLE IV

No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth 'n Article III. No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation and the corporation shall not participate in, or intervene in any political campaigns on behalf of or in opposition to any candidate for political office. Notwithstanding any other provisions of these Articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under Section 501 (c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under Section 170 (c)(2) of the Internal Revenue Code or corresponding section of any future tax code.

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Multi-page document. Select page: 1 2 3 4 5 6

ARTICLE V

The address of the initial registered office of the corporation is Jefferson County Courthouse, Office of the County Judge/Executive, 527 West Jefferson Street, Louisville, Kentucky 40202; and the name of its initial registered agent at said address is Genon G. Hensley.

ARTICLE VI

The affairs of the corporation shall be managed by a Board of Directors, the number of members of such Board of Directors to be fixed from time to time by the by-laws, but at no time shall the Board of Directors be comprised of less than three members. The names and addresses of the persons who are to serve as the initial directors are as follows:

Name	[redacted]
David L. Armstrong	
Joseph W. Phelps	
Bruce Traughber	

The initial directors shall serve until their successors are appointed as determined under Article VII hereof.

ARTICLE VII

The corporation's Board of Directors will consist of nine (9) individuals who will be appointed by the County Judge/ Executive of Jefferson County, Kentucky. Board members will serve three year staggered terms and the term groups will be three (3), three (3), and three (3).

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ARTICLE VIII

Amendments to the Article of Incorporation shall require the affirmative vote of the members of the Board of Directors in office at any regular or special meeting, provided that the amendment has been submitted to the Board in writing at least thirty (30) calendar days before the meeting in which the vote to amend takes place.

ARTICLE IX

No members, director, officer, employee, or agent of the corporation shall be personally liable for the debts or liabilities of the corporation.

ARTICLE X

In order to carry out its purposes, the corporation shall be funded primarily by private donations of money, goods or services from members of the public, including individuals, corporations, clubs, associations and other organizations. When appropriate, the corporation may receive funding in the form of money, goods or services form federal, state and local entities as long as the receipt of such funds does not violate any law or cause the corporation to lose its tax exempt status under the United States Internal Revenue Code then under the United States Internal Revenue Code then in effect. The corporation shall have no capital stock and shall be comprised of members and have no shareholders.

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ARTICLE XI

Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by the jurisdictional court of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

ARTICLE XII

The corporation will distribute its income for each tax year at such time and in such manner as not to become subject to the tax on undistributed income imposed by Section 4942 of the Internal Revenue Code, or corresponding section of any future federal tax code. The corporation will not engage in any act of self-dealing as defined in Section 4941(d) of the Internal Revenue Code, or corresponding section of any future federal tax code. The corporation will not retain any excess business holdings as defined in Section 4943(c) of the Internal Revenue Code, or corresponding section of any future federal tax code. The corporation will not make any investments in such manner as to subject it to tax under Section 4944 of the Internal Revenue Code, or corresponding section of any future federal tax code.

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Multi-page document. Select page: 1 2 3 4 5 6

The corporation will not make any taxable expenditures as defined in Section 4945(d) of the Internal Revenue Code, or corresponding section of any future federal tax code.

ARTICLE XIII

The name and mailing address of the incorporator is Genon G. Hensley, Office of the County Judge/Executive, 527 West Jefferson Street, Louisville, Kentucky 40202.

IN WITNESS WHEREOF, I have signed these Articles of Incorporation, this 29TH day of June, 1993.

Genon G. Hensley
Genon G. Hensley

Subscribed and sworn to before me by Genon G. Hensley this 29th day of June, 1993.

My commission expires: 2-22-96

Beverly Card
Notary Public
State-at-Large, Kentucky

THIS INSTRUMENT PREPARED BY:

Genon G. Hensley
Genon G. Hensley
Attorney at Law
527 West Jefferson Street
Louisville, Kentucky 40202
(502) 574-6161

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RIVERSIDE, THE FARNSLEY MOREMEN LANDING INC.

AUDITED FINANCIAL STATEMENTS

FOR THE YEAR ENDED JUNE 30, 3013

STEPHENS & LAWSON
Certified Public Accountants

RIVERSIDE, THE FARNSLEY-MOREMEN LANDING, INC

Table of Contents

STEPHENS
& LAWSON
Certified Public Accountants

INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees of
Riverside, The Farnsley-Moremen Landing, Inc.

We have audited the accompanying financial statements of Riverside, The Farnsley-Moremen Landing, Inc. (a nonprofit organization), which comprise the statement of assets, liabilities, and net assets—cash basis as of June 30, 2013, and the related statement of support, revenue, and expenses & changes in net assets—cash basis for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the cash basis of accounting as described in Note B; this includes determining that the cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the assets, liabilities, and net assets of Riverside, The Farnsley-Moremen Landing, Inc. as of June 30, 2013, and its support, revenue, and expenses for the year then ended in accordance with the cash basis of accounting as described in Note A.

Basis of Accounting

We draw attention to Note B of the financial statements, which describes the basis of accounting. The financial statements are prepared on the cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Stephens & Lawson CPA's

Louisville, Kentucky

May 7, 2014

5203 DIXIE HIGHWAY • LOUISVILLE, KENTUCKY 40216-1758 • (502) 448-4376 • FAX (502) 448-4375

Riverside, The Farnsley - Moremen Landing, Inc
Statement of Assets Liabilities & Net Assets - Cash Basis
June 30, 2013

ASSETS

CURRENT ASSETS		
Cash - Unrestricted	$ 85,184	
Cash - Restricted	138,138	
Total Current Assets		$ 223,322
FIXED ASSETS		
Furnishing Collections	111,046	
Total Fixed Assets		111,046
TOTAL ASSETS		$ 334,368

LIABILITIES AND NET ASSETS

LIABILITIES		
Total Liabilities		$ -
NET ASSETS		
Unrestricted	$ 196,230	
Temporarily Restricted	138,138	
TOTAL NET ASSETS		334,368
TOTAL LIABILITIES AND NET ASSETS		$ 334,368

See Accompanying Notes to the Financial Statements

Riverside, The Farnsley - Moremen Landing, Inc
Statement of Support Revenue, Expenses & Changes in Net Assets - Cash Basis
For the year ended June 30, 2013

	Unrestricted	Temporarily	Total
SUPPORT AND REVENUE			
Event Admissions	$ 22,926	$ -	$ 22,926
Fund Raising Income	1,506,668	-	1,506,668
Interest	30	47	77
Membership Dues	1,775	-	1,775
Museum Shop Receipts	3,768	-	3,768
Promotional Events and Donations	17,711	30,598	48,309
Non Cash Capital Contributions	45,000	-	45,000
Other Program Income	6,220	-	6,220
TOTAL SUPPORT AND REVENUE	1,604,098	30,645	1,634,743
FUNCTIONAL EXPENSES			
PROGRAM SERVICES			
Contract Services	57,758	-	57,758
Historical Research and Restoration	18,209	-	18,209
Interest Expense	16	-	16
Museum Store Merchandise	2,085	-	2,085
Personnel Costs	3,500	-	3,500
Promotion Expenses	2,859	-	2,859
Sales Tax	531	-	531
Supplies & Materials	1,940	-	1,940
Volunteer Personnel Costs	2,518	-	2,518
Other Program Services	3,250	-	3,250
TOTAL PROGRAM SERVICES	92,666	-	92,666
MANAGEMENT AND GENERAL			
Fund-raising	1,424,855	-	1,424,855
Insurance	4,367	-	4,367
Office Expense	1,171	-	1,171
Other Administrative Costs	459	-	459
TOTAL MANAGEMENT AND GENERAL	1,430,852	-	1,430,852
TOTAL FUNCTIONAL EXPENSES	1,523,518	-	1,523,518
NET ASSETS RELEASED FROM RESTRICTIONS	19,276	(19,276)	-
CHANGE IN NET ASSETS	99,856	11,369	111,225
NET ASSETS, BEGINNING OF YEAR	96,374	126,769	223,143
NET ASSETS, END OF YEAR	$ 196,230	$ 138,138	$ 334,368

See Accompanying Notes to the Financial Statements

NOTE A – HISTORY AND ORGANIZATION

Riverside, The Farnsley-Moremen Landing, Inc. (the Organization) is a non-profit organization under IRS section 501 (c) (3) incorporated in the State of Kentucky during 1995.

Riverside, The Farnsley-Moremen Landing, Inc. exists to promote, preserve, restore and interpret historic farm life on the Ohio River, specifically, to encourage efforts to preserve the historic aspects of riverfront properties in southwest Jefferson County Kentucky. The Organization receives significant support from Louisville Metro Government as further described in Note C.

Riverside, The Farnsley-Moremen Landing, Inc. raises monies to conduct archaeological excavations, renovate, restore and reconstruct historic buildings, which upon completion are donated to Louisville Metro Government. The Organizations received monies from tourists who come to see the historic farm and experience the way life was when the house was lived in.

NOTE B – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

This summary of significant accounting policies of Riverside, The Farnsley-Moremen Landing, Inc. is presented to assist in understanding the Organization's financial statements.

Basis of Accounting

The financial statements of Riverside, The Farnsley-Moremen Landing, Inc. have been prepared on the cash basis of accounting. Revenues are recorded when received and expenses are recorded when the invoice is paid. To ensure observance of limitations and restrictions placed on the use of resources available to the Organization, the accounts are maintained by categorizing all transactions based on the program service for which the transactions have been initiated and current accounting standards.

Contributions, Revenues and Restrictions

All contributions are considered available for the Organization's general programs unless specifically restricted by the donor. Amounts received that are designated for future periods or restricted by the donor are reported as temporarily or permanently restricted support and increase that respective class of net assets. Contributions received with temporary restrictions that are met in the same reporting period are reported as unrestricted support and increase unrestricted net assets. Investment income that is limited to specific uses by donor restrictions is reported as increases in unrestricted net assets if the restrictions are met in the same reporting period as the income is recognized.

In accordance with current accounting standards, contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence or nature of any donor restrictions. These standards, time restricted contributions are required to be reported as temporarily restricted support and are then reclassified to unrestricted net assets upon expiration of the time restriction.

Donated Services

The Organization benefits from the volunteer services of a large number of individuals who help maintain the property, give tours, and facilitate special events among other activities. The value of these services is not reflected in the financial statements but is estimated to exceed $25,000 based upon approximate hourly rate for the type of service performed.

NOTE B – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES-CONTINUED

Fixed Assets

Furnishing Collection

Collection items acquired are recorded at cost if purchased and at fair market value at date of accession if donated. Gains and losses from deaccession are reported as changes in net assets based on the absence or existence and nature of donor-imposed restrictions.

The Organization capitalizes its collections, on items over $500. The collections are made up of artifacts of historical significance and art objects that are held for educational, research, and curatorial purposes. Each of the items is cataloged, preserved, and cared for, and activities verifying their existence and assessing their conditions are performed continuously. The collections are subject to a policy that requires proceeds from their sales to be used to acquire other items for collections. These collections consist solely of historic home furnishings.

The value of furniture on loan from other entities at June 30, 2013 was approximately $8,500. Such items are not reflected in the financial statements.

Donated Assets

Donated assets consist of antique furniture that has been used to furnish the home and chapel. The Organization records the value of these assets when there is an objective basis available to measure their value. Donated assets are reflected as contributions in the accompanying statements at their estimated fair market values by the donor at date of receipt.

Income Taxes

The Organization is exempt from federal income taxes under Section 501 (c) (3) of the Internal Revenue Code. However, income from certain activities not directly related to the Organization's tax-exempt purpose is subject to taxation as unrelated business income. In addition, the Organization qualifies for the charitable contribution deduction under Section 170 (b) (1) (A) and has been classified as an organization other than a private foundation under Section 509 (a) (2).

Currently, the Organization has no obligations for any unrelated business income tax.

The Organization's Federal Exempt Organization Income Tax Returns (Form 990) for 2010, 2011, and 2012 are subject to examination by the IRS, generally for three years after they were filed.

Use of Estimates

Management used 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 revenue and expenses. Actual results could differ from those estimates.

NOTE C – CONCENTRATION OF FISCAL SUPPORT AND RELATED PARTY TRANSACTIONS

Louisville Metro Government owns the real estate and structures where Riverside, Farnsley-Moremen Landing, Inc. operates. Louisville Metro Government receives monies from corporations and individuals who want to rent the property for events. Louisville Metro Government owns the property that houses the Organization's fixed asset collection, provides monetary and non-monetary support to the Organization.

For the year ended June 30, 2013 a significant portion of the Organization's support was received from Louisville Metro Government. The Organization's Volunteer Board members and Louisville Metro Government officials are instrumental in raising funds for the Organization's operations. A summary of Louisville Metro Government's monetary outlays on behalf of the Organization is presented below.

This information is not reflected on the financial statements of Riverside, Farnsley-Moremen Landing, Inc

REVENUE GENERATED			
	Donations	$ 3,500	
	Miscellaneous	5,817	
	Rentals	48,845	
	Tour Admissions	1,745	
	TOTAL REVENUE		$ 59,907
EXPENDITURES			
	Contractual Services	44,829	
	Personnel Costs	176,330	
	Supplies & Material	1,712	
	TOTAL EXPENDITURES		222,871
EXPENDITURES IN EXCESS OF REVENUE GENERATED			$(162,964)

Certain board members which have expertise in specific areas locate and arrange for the purchase of artifacts for the Organization's historical collection. Such members provide these services on a voluntary basis and do not monetarily benefit from these transactions

NOTE D – CASH

At year-end, the carrying amount of the Organization's cash was $ 223,322. Of this amount $71,664 was covered by federal depository insurance. The remaining balance was covered by Securities Investor Protection Corporation (SIPC) insurance.

Cash consisted of the following at June 30, 2013:	Book Value	Bank Balance
Republic Bank Checking	$ 47,275	$ 47,275
BB&T	24,389	24,389
Morgan Keegan Money Market Account	151,658	151,658
Total	$ 223,322	$223,322

NOTE E – COMMITMENTS

The Organization, in the course of historical restoration, routinely enters into contracts for professional services and construction. The nature of the project's are routinely short-term, but have no set end date and are based on completion of the work involved. A number of such contracts were in force at June 30, 2013.

NOTE F – RESTRICTED

A portion of cash is listed as restricted. These amounts represent donations received to be expended for specific purposes which have not yet been expended. Interest earned on these amounts are also added to the restricted amounts. These donor-designated funds are reported as temporarily restricted net assets.

NOTE G - SUBSEQUENT EVENTS

In April 2013, the Commonwealth of Kentucky Public Protection Cabinet Department of Charitable Gaming suspended charitable gaming operations (bingo) for one year from April 30, 2013 to April 30, 2014. The Organization violated the 40% rule for charitable gaming. This activity accounted for 92% of revenue during the fiscal year ended June 30, 2013.

The Organization has evaluated subsequent events through May 7, 2014, the date the financial statements were available to be issued.

NOTE H - MUSEUM STORE

The Organization operated a store that sells books, candy, and other items similar to those that could have been purchased in the era of the historical house. Income and expense for the store were the following for the year ended June 30, 2013

Sales	$ 3,768
Cost of sales	(2,085)
Gross Profit	1,683
Operating Expense	(531)
Net Profit	$ 1,152

Sales revenue and cost of sales are reported net of discounts, estimated returns, and sales taxes.

NOTE I—FUND-RAISING EXPENSE

Total fund-raising expense for the year ended June 30, 2013 was $1,424,855, which represents 95% of the total fund-raising income. The ratio of expenses to amounts raised is computed using actual expenses and related contributions on a cash basis.

NOTE J - CONCENTRATION OF GAMING OPERATIONS

Approximately 92% of the Organization's revenue is derived from gaming operations which is renewed annually. Gaming income was $1,506,668, total income was $1,634,743. The current level of the Organization's operations and program services were minimally impacted by the cessation of the gaming operations on April 30, 2013. Transfers in the amount of $38,000 went into the operating account.

NOTE K - ADVERTISING COSTS

The Organization uses advertising to promote its programs among the audiences it serves. Advertising costs are expensed as incurred. Advertising expenses for the year ended June 30, 2013 were zero.

RIVERSIDE, THE FARNSLEY-MOREMEN LANDING, INC.

General Information

Organization Number	0317199
Name	RIVERSIDE, THE FARNSLEY-MOREMEN LANDING, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	7/1/1993
Organization Date	7/1/1993
Last Annual Report	5/28/2014
Principal Office	7410 MOORMAN ROAD LOUISVILLE, KY 40272
Registered Agent	PATTI LINN 7410 MOORMAN RD LOUISVILLE, KY 40272

Current Officers

President	Reba Doutrick
Vice President	Carmen Miller
Secretary	Kathleen Blanton
Treasurer	Jacobsen Nicole
Director	Reba Doutrick
Director	Kathleen Blanton
Director	Jacobsen Nicole
Director	Carmen Miller

Individuals / Entities listed at time of formation

Director	DAVID L. ARMSTRONG
Director	JOSEPH W. PHELPS
Director	BRUCE TRAUGHBER
Incorporator	GENON G. HENSLEY

Images available online

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

Annual Report	5/28/2014	1 page	PDF
Annual Report	7/1/2013	1 page	PDF
Annual Report	6/11/2012	1 page	PDF
Annual Report	7/30/2011	1 page	PDF
Annual Report	6/23/2010	1 page	PDF

Annual Report	7/17/2009	1 page	PDF	
Annual Report	5/28/2008	1 page	tiff	PDF
Annual Report	5/22/2007	1 page	PDF	
Annual Report	5/5/2006	1 page	PDF	
Annual Report	4/27/2005	1 page	tiff	PDF
Annual Report	10/8/2003	1 page	tiff	PDF
Annual Report	6/7/2001	1 page	tiff	PDF
Annual Report	7/6/2000	1 page	tiff	PDF
Annual Report	8/13/1999	1 page	tiff	PDF
Annual Report	7/27/1998	2 pages	tiff	PDF
Annual Report	7/1/1997	1 page	tiff	PDF
Annual Report	7/1/1996	1 page	tiff	PDF
Annual Report	7/1/1995	2 pages	tiff	PDF
Reinstatement	3/20/1995	2 pages	tiff	PDF
Statement of Change	3/20/1995	2 pages	tiff	PDF
Administrative Dissolution	11/1/1994	1 page	tiff	PDF
Annual Report	7/1/1994	1 page	tiff	PDF
Articles of Incorporation	7/1/1993	6 pages	tiff	PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	5/28/2014 4:26:47 PM	5/28/2014 4:26:47 PM	
Annual report	7/1/2013 10:56:34 AM	7/1/2013 10:56:34 AM	
Annual report	6/11/2012 3:08:51 PM	6/11/2012 3:08:51 PM	
Annual report	7/30/2011 1:19:27 PM	7/30/2011 1:19:27 PM	
Annual report	6/23/2010 3:06:04 PM	6/23/2010 3:06:04 PM	
Annual report	7/17/2009 4:53:26 PM	7/17/2009 4:53:26 PM	
Annual report	5/28/2008 1:15:34 PM	5/28/2008	
Annual report	5/22/2007 4:54:31 PM	5/22/2007 4:54:31 PM	
Annual report	5/5/2006 2:52:58 PM	5/5/2006 2:52:58 PM	
Registered agent address change	6/18/2003 4:12:31 PM	6/18/2003	
Annual report	6/13/2003	6/13/2003	

Microfilmed Images

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

Annual Report	4/22/2005	1 page
Annual Report	7/29/2004	1 page
Annual Report	10/8/2003	1 page
Statement of Change	6/18/2003	1 page
Annual Report	7/5/2002	1 page
Annual Report	6/7/2001	1 page
Annual Report	7/6/2000	1 page
Annual Report	8/13/1999	1 page
Annual Report	7/27/1998	2 pages
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