

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

Applicant/Program: Community Connections Group, Inc.
Applicant Requested Amount: \$4,185.00
Appropriation Request Amount:

Executive Summary of Request
Funds will help support Quarterly Community Connections events, which are designed to close the 9th street divide

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.

7 District # [Signature] Primary Sponsor Signature \$500.00 Amount 11/27/17 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
Final Appropriations Amount: _____

Applicant/Program:

Community Connections Group, INC.

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

N/A

Council Member Signature and Amount

District 1	_____	\$ _____
District 2	_____	\$ _____
District 3	_____	\$ _____
District 4	_____	\$ _____
District 5	_____	\$ _____
District 6	_____	\$ _____
District 7	_____	\$ _____
District 8	_____	\$ _____
District 9	_____	\$ _____
District 10	_____	\$ _____
District 11	_____	\$ _____
District 12	_____	\$ _____
District 13	_____	\$ _____
District 14	_____	\$ _____
District 15	_____	\$ _____

Applicant/Program:

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 16 _____ \$ _____

District 17 _____ \$ _____

District 18 _____ \$ _____

District 19 _____ \$ _____

District 20 _____ \$ _____

District 21 _____ \$ _____

District 22 _____ \$ _____

District 23 _____ \$ _____

District 24 _____ \$ _____

District 25 _____ \$ _____

District 26 _____ \$ _____

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Legal Name of Applicant Organization	
Program Name and Request Amount	
	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	<input type="checkbox"/> ... YES
Is the funding proposed by Council Member(s) less than or equal to the request amount?	<input type="checkbox"/> ... YES
Is the proposed public purpose of the program viable and well-documented?	<input type="checkbox"/> ... YES
Will all of the funding go to programs specific to Louisville/Jefferson County?	<input type="checkbox"/> ... YES
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	<input type="checkbox"/> ... YES
Has prior Metro Funds committed/granted been disclosed?	<input type="checkbox"/> ... N/A
Is the application properly signed and dated by authorized signatory?	<input type="checkbox"/> ... YES
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	<input type="checkbox"/> ... YES
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	<input type="checkbox"/> ... N/A
Is the entity in good standing with: <ul style="list-style-type: none"> ▶ Kentucky Secretary of State? ▶ Louisville Metro Revenue Commission? ▶ Louisville Metro Government? ▶ Internal Revenue Service? ▶ Louisville Metro Human Relations Commission? 	<input type="checkbox"/> ... YES
Is the current Fiscal Year Budget included?	<input type="checkbox"/> ... YES
Is the entity's board member list (with term length/term limits) included?	<input type="checkbox"/> ... YES
Is recommended funding less than 33% of total agency operating budget?	<input type="checkbox"/> ... NO
Does the application budget reflect only the revenue and expenses of the project/program?	<input type="checkbox"/> ... YES
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	<input type="checkbox"/> ... N/A
Is the most recent annual audit (if required by organization) included?	<input type="checkbox"/> ... N/A
Is a copy of Signed Lease (if rent costs are requested) included?	<input type="checkbox"/> ... N/A
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	<input type="checkbox"/> ... N/A
Are the Articles of Incorporation of the Agency included?	<input type="checkbox"/> ... YES
Is the IRS Form W-9 included?	<input type="checkbox"/> ... YES
Is the IRS Form 990 included?	<input type="checkbox"/> ... N/A
Are the evaluation forms (if program participants are given evaluation forms) included?	<input type="checkbox"/> ... N/A
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	<input type="checkbox"/> ... N/A
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	<input type="checkbox"/> ... N/A
Prepared by: <i>Erin Hinton</i>	Date: <i>11/27/17</i>

Attachments

- IRS Exempt Status Letter
- Current Year Projected Budget
- Current Financial Statement
- Articles of Incorporation
- IRS Form W-9
- Agency Program Narrative
- Program Description

Notes on Attachments/ Community Connections Group, Inc.

- No 990 has been filed for this agency; as it is newly formed (**August 25, 2017**) and the agency has not completed its fiscal year.
- Currently this agency has no required annual audit.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization: Community Connections Group, Inc. <i>(as listed on: http://www.sos.ky.gov/business/records)</i>			
Main Office Street & Mailing Address: 2500 Montgomery Street, Suite 2, Lou, KY 40212			
Website: Facebook.com/communityconnectionskey			
Applicant Contact:	James Linton	Title:	President
Phone:	502-345-7018	Email:	JLinton63@yahoo.com
Financial Contact:	James Linton	Title:	President
Phone:	502-345-7018	Email:	JLinton63@yahoo.com
Organization's Representative who attended NDF Training: James Linton			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	2500 Montgomery Street, Lou, KY 40212		
Council District(s):	District 5	Zip Code(s):	40212
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: Closing of the Ninth Street Divide			
Total Request: (\$)	4,185	Total Metro Award (this program) in previous year: (\$)	0.00
Purpose of Request (check all that apply):			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current year projected budget <input checked="" type="checkbox"/> Current financial statement Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation (current & signed) Cost estimates from proposed vendor if request is for capital expense		Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 Evaluation forms if used in the proposed program Annual audit (if required by organization) Faith Based Organization Certification Form, if applicable	
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:	N/A	Amount: (\$)	
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the applicant met the BBB Charity Review Standards? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

See Attached Agency Narrative

Program Description/ Closing of the Ninth Street Divide (Diversity Breakfast)

Community Connections Group Inc., will be dealing with the subject that some don't want to talk about, which is the racial divide between Ninth Street that takes place in Louisville, Kentucky. Many of us know that this has existed for far too long and Community Connections believes that it's time that we do something and begin to break down some of the racial tensions and racial divide that exist in America and also in Louisville.

To address this issue, our agency will host a Diversity Breakfast (Quarterly), four events total for the year; to talk about how we can become a better city and begin to work together and network to try to offset some of the violence that takes place in the city.

There will a total of 150 people in attendance at each breakfast. There will a mixture of residents and community leaders; represented at each breakfast.

We are also very proud to announce the host for the breakfast is Renee Murphy from WHAS Channel 11 News, Renee has also spent the last year doing reports on the Ninth Street divide. There will be a lot of media attention to bring awareness to this event so we may begin to break down the racial tension in our city.

Here are some facts to consider

Almost a half century after the local fair housing movement began in 1967, Louisville remains a deeply segregated city, with about half of all residents surrounded by people of their same race, according to a Metro Human Relations Commission report... **Source-** *Nearly half of Louisville lives in extreme segregation* (Courier Journal).

While schools may be more diverse, residents still live in sharply divided neighborhoods (in Louisville). Two zip codes in the center of the city are home to 2.7% of the area's population, but nearly 20% of the city's black population live there... **Source-** *The 9 most segregated cities in America* (Huffington Post).

"We live in a complex multiracial society with woefully inadequate knowledge and little support for constructive policies geared toward equalizing opportunity, raising achievement and high school completion rates for all groups, and helping students learn how to live and work successfully in a society composed of multiple minorities... **Source-** *The City That Believed in Desegregation* (The Atlantic).

How Diversity Affects Our Local Youth- "We have a lot of students in high poverty, a lot of students who come to us with a lot of issues because of that poverty, but we need to be the equalizer at giving those kids a shot," ... "As a matter of fact, some of the highest-achieving schools in the district are the most diverse, because they're good and everybody wants to go there."... **Source-** *The City That Believed in Desegregation* (The Atlantic).

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
James Linton	Jan 1, 2019
Camille Linton	Jan 1, 2019
Margaret Harris	Jan 1, 2019
Leandra Belle	Jan 1, 2019
Jerry Hazzard	Jan 1, 2019

Describe the Board term limit policy:
 Election of board members shall occur at each annual meeting of the board of directors. The terms of directors shall be staggered. Initial board members shall serve a term of two years (unless re-elected). Thereafter, board members shall serve two year terms with approximately half of the directors elected at each annual meeting.

Three Highest Paid Staff Names	Annual Salary
No paid staff.	

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 – PROGRAM/PROJECT NARRATIVE

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

See attached program description

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

- Food/Refreshments
- Entertainment
- Event Preparations

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:

- 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.

N/A

- Reimbursements should not be made before application date 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.

N/A

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Program Benefits

Diversity in society allows for richness and variety, boosting innovation which leads to economic growth, improving access to jobs, producing culturally vibrant and varied communities and preventing stagnation. Early exposure to ethnic and economy diversity prepares children and students for a multicultural world, with studies demonstrating that this type of socializing contributes significantly to their academic development and level of cultural awareness..

Source- What Are The Advantages of Diversity in Society/

Data will be measured and collected via Community Surveys.

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.

Parters; per this event

Main Event Sports Show- Provide media coverage and visibility for the event

WLOU Radio- provide media coverage and visibility for the event

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – PROGRAM/PROJECT BUDGET SUMMARY

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

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
A: Personnel Costs Including Benefits	0	0	0
B: Rent/Utilities	0	0	0
C: Office Supplies	0	0	0
D: Telephone	0	0	0
E: In-town Travel	0	0	0
F: Client Assistance (See Detailed List on Page 8)	0	0	0
G: Professional Service Contracts	\$2985.00	\$2985.00	\$5970.00
H: Program Materials	\$200.00	\$200.00	\$400.00
I: Community Events & Festivals (See Detailed List on Page 8)	0	0	0
J: Machinery & Equipment	0	0	0
K: Capital Project	0	0	0
L: Other Expenses (See Detailed List on Page 8)	\$1000.00	\$1000.00	\$2000.00
*TOTAL PROGRAM/PROJECT FUNDS	\$4185.00	\$4185.00	\$8370.00
% of Program Budget	50 %	50 %	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)	Sponsorships
Fees Collected from Program Participants	
Other (please specify)	
Total Revenue for Columns 2 Expenses **	\$4185.00

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

**Must equal or exceed total in column 2.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7 (circle one and use multiple sheets if necessary)	Column 1	Column 2	Column (1 + 2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
Entertainment	1,000	1,000	2,000
Total	1,000	1,000	2,000

Applicant's Initials JK

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

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

Agency Fiscal Year Start Date: August 25, 2017

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

If YES, please explain:

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 7 – 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 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 and the funds will not be disbursed to our organization.
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 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.


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 8 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:		Date:	11-14-2017
Legal Signatory: (please print):	JAMES LINTON	Title:	President
Phone:	502-345-7018	Extension:	
Email:	JLinton63@gmail.com		

THE COMMUNITY CONNECTIONS GROUP, INC.

COMMUNITY BUILDING, CULTURAL LITERACY, AND THE PROMOTION OF LIFE SKILLS



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CONTACT

Email contacts:

jlinton63@yahoo.com
Silverapple1@bellsouth.net

Contact numbers:

502-345-7018
502-609-1419

Address

2500 Montgomery Street, Suite #2
Louisville, Kentucky 40212

PROMOTION OF LIFE SKILLS

Current Programs/ Services

The Charles B. Linton Gentlemen's Club (geared toward male youth aged 6-12 years old).

Program that teaches the following:

Manners

Conflict Resolution

Self Respect

Social Responsibility

Accountability

Miss Leavell's Ladies Who Lunch (geared toward female youth aged 6-12 years old).

Program that teaches the following

Etiquette

Instilling in them that manners matter and courtesy is contagious

Self Respect

Social Responsibility

Accountability

Many West Louisville youth experience and are affected by violence... "Too many young people see violence as the only way to resolve issues, and we've got to find a way to turn that around. We've got to show our young people another way ... Intentional injury is the leading cause of death among 10-to-24-year-olds in Kentucky, and the second leading cause of death for this age group nationally..." The CDC acknowledges youth violence as a preventable public health problem for individuals and communities. **(The Community Connections Group's Life Skills Programs give youth the strategies to live more safe and productive lives).** –Source-City News

CULTURAL LITERACY

Current Programs/Services

- Hosts poetry events and open mics.
- Hosts book launches, tours, and readings, for local writers and authors.
- Hosts a monthly community book club.
- Facilitate and organize college tours for middle to high school aged youth.
- Facilitate and promote art exhibits and shows/ promoting local and national artists.
- Community Connections Catering- teaches catering and culinary arts skills to school aged youth.

The arts show us how to change the world around us by allowing us to change our inner world. The arts create beauty and order where there appears to be none... Making art and experiencing art is an act of hope and renewal. Participating in a community arts program may not directly put bread in the mouth, but it provides a rich and nourishing spiritual meal that is often underrated. **–Source-** *How Do The Arts Build Communities?*

COMMUNITY BUILDING

Current Programs/Services

Community Connections Radio Show

The Community Connections Radio Show brings new voices to the table with the latest community dialogue to keep local residents informed; while engaging Louisville to get involved with the issues that matter. Listeners interact with guests by calling in or by participating in online discussions and forums on Facebook [@communityconnectionsKY](#).

Facilitates/Hosts- Community Groups, Forums, and Annual Events- Hosts local groups and forums that are focused on empowering individuals, families, and communities.

- Annual Back To School /Supplies Giveaway – Provides 800 backpacks and additional school supplies to underserved school aged youth and their families.
- Annual Thanksgiving Turkey Giveaway
- Annual Muhammad Ali Birthday Celebration (Promoting and Honoring Ali's Seven Principles)
- Facilitates the **10 Step Solution for Safe Neighborhoods-** Community forum that promotes solutions that assists in the prevention of community violence.

Being active within our society brings us inspiration, helps us succeed in business and helps us find our way in life.

Participating in our local community helps us fulfill our **need of purpose**.

Communities thrive when people are better connected. Local economies expand, businesses succeed, education grows, and support systems become more efficient.

Source- *Kearney- The Importance of Community and How To Get Involved*

FOUNDERS

James Linton

Mr. James Linton is a visionary and impactful socialpreneur, who has over thirty years of experience as a community event organizer, promoter, and purveyor of the arts. Mr. Linton has been acknowledged as a major contributor to the economic development of Metro Louisville; due, in part, to his various entrepreneurial ventures and pursuits.

Margaret Leavell Harris

Margaret Leavell Harris is a retired AT&T executive. She prides herself in being a community activist, a concerned citizen; and most importantly, a disciple of the Most High God.

James Linton and Margaret Leavell Harris has formed the Community Connections Group Inc., in order to provide programs and services that will improve the quality of life for local residents of the River City.



MISSION/PRINCIPLES

The Community Connections Group Inc. is a nonprofit organization that is dedicated to empowering youth, adults, and community agencies. Our mission is achieved via the following principles; *Community Building, Cultural Literacy, and the Promotion of Life Skills*

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

DEPARTMENT OF THE TREASURY

Date:

AUG 25 2017

COMMUNITY CONNECTIONS GROUP
INCORPORATED
6606 FERNBUSH DRIVE
LOUISVILLE, KY 40228-0000

Employer Identification Number:

[REDACTED]

DLN:

26053550006277

Contact Person:

NANCY L HEAGNEY

ID# 31306

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Public Charity Status:

170(b)(1)(A)(vi)

Form 990/990-EZ/990-N Required:

Yes

Effective Date of Exemption:

April 26, 2017

Contribution Deductibility:

Yes

Addendum Applies:

No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947

COMMUNITY CONNECTIONS GROUP

Sincerely,

Stephen A. Martin

Director, Exempt Organizations
Rulings and Agreements

Projected Budget/Current Year (Operational Budget). Community Connections Group, Incorporated.

Line Item Description	Amount
Travel and Mileage	\$500
Supplies & Materials	\$2,000
Space/Lease	\$12,000
Equipment/ Office Supplies	\$1,000
Contracted Services	\$5,000
Training and Personal Development	\$250
Total Annual Budget	\$20,750



Community Connections, Incorporated

2500 Montgomery Street, Suite #2, Louisville, KY 40212

Ph. 502- 345-7018

JLinton63@yahoo.com

Facebook.Com/Communityconnections

Community Connections, Incorporated

Financial Statement

For two months, Ending October 31, 2017

Revenues and Gains	
Revenues (Grants, Donations)	\$14,645.00
Interest Revenues	\$0
Gain on sales of assets	\$0
Total Revenue and Gains	\$14,645.00

Expenses and Losses	
Operational Costs	\$7945
Commissions Expense	\$0
Office Supplies and Equipment Expenses	\$200
Advertising/Marketing	\$500
Interest Expense	\$0
Total Expenses and Losses	\$8645

0983664.09 mstratton
ADD
Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
4/26/2017 9:18 AM
Fee Receipt: \$8.00

ARTICLES OF INCORPORATION
COMMUNITY CONNECTIONS GROUP, INC.

For the purpose of forming a nonprofit corporation in Kentucky pursuant to KRS Chapter 273, the undersigned directors of the corporation hereby submit the following Articles of Incorporation to the Secretary of State filing.

ARTICLE I

NAME/REGISTERED OFFICE & PRINCIPAL OFFICE

The name of the corporation shall be Community Connections Group, Inc. The corporation's Principal office is located at 6606 Fernbush Drive., Louisville, Kentucky 40228. And it's agent for service of process is James Linton 6606 Fernbush Drive., Louisville, Kentucky 40228.

ARTICLE II

PURPOSE

1. To attract and coordinate the resources of community, business and government in support of those in need in the community.
2. To encourage and support artistic opportunities and projects in artistically underserved communities.
3. To promote a culture of healthful nutrition among the undernourished and malnourished and malnourished in the community.
4. To promote a culture of educational achievement throughout the community.
5. To promote an atmosphere of peace and tranquility in the community.
6. To support other charitable activities and organizations within the meaning of section (501)(c)(3).
7. All other purpose available to (501)(c)(3) nonprofit corporation in Kentucky.

ARTICLE III

LIMITATIONS

At all the following shall operate as conditions restricting the operation and activities of the corporation:

1. No part of the earnings of the corporation shall inure to any member of the corporation not qualifying as exempt under section (501)(c)(3) of the internal Revenue Code of 1986, as now enacted or hereafter amended, nor to any director or officer of the corporation that corporation as a reasonable allowance for authorized expenditures incurred on behalf of the corporation.
2. No substantial part of the activities of the corporation shall constitute the carrying on of propaganda or otherwise attempting to influence legislation, or an initiative or referendum before the public, and the corporation shall not participate in, or intervene in (including by publication or distribution of statements), any political campaign on behalf of, or in opposition to, any candidate for public office.
3. Notwithstanding any other provisions of these Articles, the corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from federal

income tax under section (501)(c)(3) of internal Revenue Code of 1986 , as now of hereafter amended.

4. The corporation shall not lend any of its assets to any officer or director of this corporation (unless such loan program is regularly conducted as part of the activities of the organization and the qualification of the individual to participate in same is determined by a panel composed solely of non-Board members), or guarantee to any person the payment of a loan by an officer or director of this corporation.

**ARTICLE IV
DIRECTORS**

The Board of Directors shall consist of not less than three(3) nor more than five(5) members and the initial Board of Directors who are the incorporators, shall be the following:

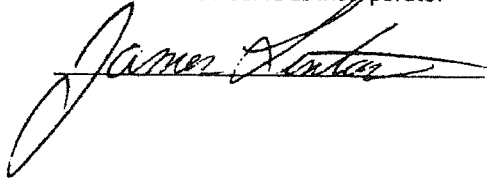
James Linton
6606 Fernbush
Louisville, Kentucky 40228

Leandra Belle
4216 Telovi
Louisville, Kentucky 40241

Jerry Hazard
1932 W. Madison
Louisville, Kentucky 40210

Camille Linton
6606 Fernbush
Louisville, Kentucky 40228

James Linton will serve as incorporator

A handwritten signature in black ink, appearing to read "James Linton", written over a horizontal line.

James Linton

Date

James Linton

4-20-17

Camille Linton

Camille Linton

4-20-17

Leandra Belle

Leandra Belle CG

4/20/17

Jerry Hazard

4-20-17

Jerry Hazard

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.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Community Connections Group, Inc.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>	
	5 Address (number, street, and apt. or suite no.) 6406 Fernbush Drive	Requester's name and address (optional)
	6 City, state, and ZIP code Lou, KY 40228	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

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

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table>												
or												
Employer identification number												

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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 3.

Sign Here	Signature of U.S. person ▶	Date ▶ Oct 17/2017
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General Instructions

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

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

COMMUNITY CONNECTIONS GROUP, INC.**General Information**

Organization Number	0983664
Name	COMMUNITY CONNECTIONS GROUP, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	4/26/2017
Organization Date	4/26/2017
Last Annual Report	5/26/2017
Principal Office	6606 FERNBUSH DRIVE LOUISVILLE, KY 40228
Registered Agent	JAMES LINTON 6606 FERNBUSH DRIVE LOUISVILLE, KY 40228

Current Officers

President	James Linton
Director	Margaret Leavell Harris
Director	Camille Linton
Director	Jerry Hazard
Director	Leandrea Belle
Director	James Linton

Individuals / Entities listed at time of formation

Director	JAMES LINTON
Director	LEANDREA BELLE
Director	JERRY HAZARD
Director	CAMILLE LINTON
Incorporator	JAMES LINTON

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	5/26/2017	1 page	PDF	
Articles of Incorporation	4/26/2017	4 pages	tiff	PDF

Assumed Names**Activity History**

Filing	File Date	Effective Date	Org. Referenced
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