

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

Applicant/Program: Old Louisville Neighborhood Council Visitor Center  
Applicant Requested Amount: \$4,000  
Appropriation Request Amount: \$4,000

Executive Summary of Request The visitors center is a community meeting place for the neighborhood associations, community partners, and visitors for historic Old Louisville. Funds for the center will be used for the marketing efforts to promote the historic district & walking tours.

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.

District # 6 Primary Sponsor Signature  Amount \$4,000 Date 8-28-2018

**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: \_\_\_\_\_

**LOUISVILLE METRO COUNCIL  
NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

<b>Legal Name of Applicant Organization</b>	Old Louisville Neighborhood Council
<b>Program Name and Request Amount</b>	HISTORIC Old Louisville and Visitor Center \$4,000
	<b>Yes/No/NA</b>
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	...Y
Is the funding proposed by Council Member(s) less than or equal to the request amount?	...Y
Is the proposed public purpose of the program viable and well-documented?	...Y
Will all of the funding go to programs specific to Louisville/Jefferson County?	...Y
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	...Y
Has prior Metro Funds committed/granted been disclosed?	...Y
Is the application properly signed and dated by authorized signatory?	...Y
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	...Y
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	...NA
Is the entity in good standing with: <ul style="list-style-type: none"> <li>▶ Kentucky Secretary of State?</li> <li>▶ Louisville Metro Revenue Commission?</li> <li>▶ Louisville Metro Government?</li> <li>▶ Internal Revenue Service?</li> <li>▶ Louisville Metro Human Relations Commission?</li> </ul>	...Y
Is the current Fiscal Year Budget included?	...Y
Is the entity's board member list (with term length/term limits) included?	...Y
Is recommended funding less than 33% of total agency operating budget?	...Y
Does the application budget reflect only the revenue and expenses of the project/program?	...Y
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	...NA
Is the most recent annual audit (if required by organization) included?	...NA
Is a copy of Signed Lease (if rent costs are requested) included?	...NA
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	...NA
Are the Articles of Incorporation of the Agency included?	...Y
Is the IRS Form W-9 included?	...Y
Is the IRS Form 990 included?	...Y
Are the evaluation forms (if program participants are given evaluation forms) included?	...NA
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	...NA
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	...NA
Prepared by: <i>Shalanna M. Zylstra</i>	Date: 6/28/18

**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

SECTION 1 – APPLICANT INFORMATION			
<b>Legal Name of Applicant Organization:</b> Old Louisville Neighborhood Council <i>(as listed on: <a href="http://www.sos.ky.gov/business/records">http://www.sos.ky.gov/business/records</a>)</i>			
<b>Main Office Street &amp; Mailing Address:</b> 1340 S. 4th Street, Louisville, Ky 40208			
<b>Website:</b> oldlouisville.org			
<b>Applicant Contact:</b>	Shawn Fields Williams	<b>Title:</b>	Executive Director
<b>Phone:</b>	502-338-2893	<b>Email:</b>	shawn.williams@oldlouisville.org
<b>Financial Contact:</b>	Michael Meador	<b>Title:</b>	Treasurer
<b>Phone:</b>	917-929-9609	<b>Email:</b>	michaelmeador@gmail.com
<b>Organization's Representative who attended NDF Training:</b> Shawn Williams.			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
<b>Program Facility Location(s):</b>	1340 S. 4th Street, Louisville KY 40208		
<b>Council District(s):</b>	6	<b>Zip Code(s):</b>	40203, 40208
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
<b>PROGRAM/PROJECT NAME:</b> Historic Old Louisville Neighborhood and Visitors Center			
<b>Total Request: (\$)</b>	4,000	<b>Total Metro Award (this program) in previous year: (\$)</b>	4000
<b>Purpose of Request (check all that apply):</b>			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
<b>The Following are Required Attachments:</b>			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current year projected budget <input checked="" type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> 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		<input checked="" type="checkbox"/> 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	
<b>For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.</b>			
<b>Source:</b>	EAF	<b>Amount: (\$)</b>	4,000
<b>Source:</b>		<b>Amount: (\$)</b>	
<b>Source:</b>		<b>Amount: (\$)</b>	
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:**

Old Louisville Neighborhood Council

**Vision Statement**

Historic Old Louisville seeks to be a vibrant and diverse community that welcomes all who call this place home or visit us to enjoy our rich architectural and arts heritage.

**Mission Statement**

To advocate, promote, and protect Old Louisville' s historic architecture and streetscapes within a diverse neighborhood of residents and businesses while advancing artistic and cultural events to build community.

**Goals**

To be the official voice of Old Louisville, serving as a strong advocate for a safe, clean, healthy community where all can flourish.

To preserve and protect one of the nation' s oldest historic preservation districts of Victorian mansions, as well as its distinctive 19th and early 20th century homes and landscapes.

To encourage heritage tourism for enrichment and educational purposes.

To promote artistic and educational events within this culturally diverse neighborhood, thereby building community and fostering cooperation.

To promote neighborhood revitalization and business development.

**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

**SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF**

Board Member	Term End Date
Brent Logsdon, Chairman	December 31, 2019
Leah Stewart, Vice Chair	December 31, 2019
Michael Meador, Treasurer	December 31, 2019
Chuck Anderson, Secretary	December 31, 2019
Darlene Metts, Belgravia Court Association	December 31, 2019
Jonathan Klunk, Central Park West Association	December 31, 2019
Kevin Carman, Garvin Gate Neighborhood Association	December 31, 2019
Stephen Peterson, Limerick Association for Neighborhood Advancement	December 31, 2019
Lira Johnson, Ouerbacker Court Association	December 31, 2019
Janice Theriot, St. James Court Association	December 31, 2019
Nick Kilby, Second Street Neighborhood Association	December 31, 2019
Bruce Cohen, Seventh Street Edge Association	December 31, 2019
Jim Brooks, South Fourth Street Associaton	December 31, 2019
Sharon Dills, South Third Street Association	December 31, 2019
Becky Medley, The 1300 Association	December 31, 2019
Ray Robinson, Toonerville Trolley Neighborhood Association	December 31, 2019
Brian McMahon, West St. Catherine Neighborhood Association	December 31, 2019

**Describe the Board term limit policy:**

The Old Louisville Neighborhood Council Board of Directors are Representatives of the 14 neighborhood associations and the elected executive committee. Board members are chosen by their neighborhood associations and then serve a two year term. The executive committee is elected by the Board of Directors and serves a two year term. Currently, the Board of Directors are serving from January 1, 2018-December 31, 2019.

Three Highest Paid Staff Names	Annual Salary
Shawn Fields Williams, Executive Director	\$35,000
Kelli Guinn, Administrative Assistant	\$13,728

Page 3 Addendum

Continuation of Board of Directors

Term End Date

Irene Spicer, Treyton Oak Towers Neighborhood Association

December 31, 2019

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.):**

The Historic Old Louisville Neighborhood and Visitors Center serves a two fold purpose. First, it serves as a community meeting place for neighborhood associations and community partners. The OLNC member neighborhood associations meet regularly at the center for the business meetings. Receptions are held at the center by community partners such as the St. James Court Art Show and Kentucky Shakespeare, as well as Jazz in Central Park.

Secondly, the Visitors Center serves as the gateway for visitors to the historic district of Old Louisville. We work closely with the Louisville Convention and Visitors Bureau to draw out of town visitors and group tours to the Victorian mansion district of Old Louisville. The Historic Old Louisville Walking Tours are operated out of the Visitors Center April-October each year providing a guided 75 minute architectural and historical walking tour of the heart of the mansion district. Local residents also come to the visitors center and take the tours as well, for example the UofL University Club members are planning to take the walking tours in 2019.

Please visit: [oldlouisville.org](http://oldlouisville.org)

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

The funds for the Historic Old Louisville Visitors Center will be used for the marketing efforts to promote the historic district and the walking tours. Funds will be used for printing the Historic Old Louisville Walking Tour booklet - a 48 page color booklet which describes the architecture and history of the buildings in the preservation district. This booklet is given to each tour attendee. Funds will also defray the cost of the graphic design services to revise the booklet and create marketing collateral, such as rack cards which will be distributed to the Louisville Visitors Center downtown, downtown area hotels and attractions, as well as community partners such as the Conrad Caldwell House Museum, the Filson Historical Society, the Asia Institute Crane House, and the University of Louisville Visitor Services, which help promote the tours. The funds will also be used to cover printing costs of the rack cards and posters to promote the walking tours, as well as any events that are included at the Visitors Center, such as free concerts.

**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

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

NA

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

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.

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.



## 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:**

The Historic Old Louisville Neighborhood and Visitors Center serves as a community center for the 12,000 residents of Old Louisville. The 14 neighborhood associations use the center for meetings and events. Attendance can be tracked for each meeting and provided to the administrative assistant who can keep a running tally.

The Old Louisville Neighborhood Council tracks the visitors to the Historic Old Louisville Visitors Center during its days of operation. In 2015 the Center had only 1,890 visitors. In 2016, there were 3005. In 2017, there were 3000. In 2018, with better marketing for the walking tours, there is a clear uptick in visitors and we are now offering walking tours twice a day and on demand when staff is available. The Historic Old Louisville Walking Tours have become a steady revenue stream for the OLNC. Guided walking tour sales have average \$1200 per month. We can track sales with the Square-Up Merchant Services. With the addition and marketing of the new LOU LIFT service we are anticipating greater numbers of walking tour attendees.

We also participate in the Fund for the Arts Cultural Pass each year to offer JCPS students and their parents the opportunity to take a guided walking tour of Historic Old Louisville. We track our participants through the google doc that the the FFA uses.

**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.**

Generally, the Old Louisville Neighborhood Council is always expanding its community partnerships. The OLNC spearheaded the Old Louisville Arts Council with area arts organizations to collaborate and cross promote events. The OLAC includes: OLNC, Kentucky Shakespeare, U of L, Ky College of Art and Design, St. James Court Art Show, Garvin Gate Blues Festival, The Conrad Caldwell House Museum, The Filson Historical Society, Asia Institute Crane House, and the Louisville Free Public Library. In addition, the OLNC has spearheaded an Old Louisville Business Alliance of area businesses in Old Louisville to work more collaboratively and proactively to solve problems. The organizations participating to date include: Luckett-Farley; SOBRO district businesses; Dan Borsch restaurants Tavern, Burger Boy, Old Louisville Pizza, and Toonerville Deli; Bridgehaven; McCulloch Architects; Craig Machinery and Design; Grover Enterprises; Christian Care Communities; Hyland Insurance; Family and Children's Place; Barrister Hall Attorneys; Community Coordinated Child Care; Westerfield-Barre Co; Synergy Rehabilitation; Aztec Flooring; Old Louisville Brewery; Mary Martin Semonin Realtor; Old Louisville Fleur de Lis Bed and Breakfast; Louisville Bourbon Inn; Virtue; Gallery 133; Amici Cafe; Sabor Latino; Seafood Lady, St. James Court Art Show.

In this program specifically we work collaboratively with the University of Louisville Visitor Services to promote the tours. We work closely with the Louisville Convention and Visitors Bureau to promote Old Louisville as a heritage tourism destination to group tours. We promote the walking tours through the Louisville Visitors Center downtown. We work with area attractions and hotels to provide information on the historic district and the walking tours. We work with area restaurateurs to promote their businesses as part of the experience for out of town visitors to Old Louisville. We work with the Conrad Caldwell House

**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
<b>A: Personnel Costs Including Benefits</b>		13,000	13,000
<b>B: Rent/Utilities</b>			
<b>C: Office Supplies</b>		750	750
<b>D: Telephone</b>		1600	1600
<b>E: In-town Travel</b>			
<b>F: Client Assistance (See Detailed List on Page 8)</b>			
<b>G: Professional Service Contracts</b>		3350	3350
<b>H: Program Materials</b>	4000	1000	5000
<b>I: Community Events &amp; Festivals (See Detailed List on Page 8)</b>			
<b>J: Machinery &amp; Equipment</b>		850	850
<b>K: Capital Project</b>			
<b>L: Other Expenses (See Detailed List on Page 8)</b>			
<b>*TOTAL PROGRAM/PROJECT FUNDS</b>	4000	20550	24550
<b>% of Program Budget</b>	16 %	84 %	100%

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

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	
Fees Collected from Program Participants	
Other (please specify)	\$20,550 (tour sales/events)
<b>Total Revenue for Columns 2 Expenses **</b>	<b>\$20,550</b>

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

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



**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

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

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
<p align="center"><i>Total Value of In-Kind</i>  <b>(to match Program Budget Line Item.</b>                      Volunteer Contribution &amp; Other In Kind)</p>		

**\* 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:** January 1, 2018

**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.

<b>Signature of Legal Signatory:</b>		<b>Date:</b>	August 14, 2018
<b>Legal Signatory: (please print):</b>	Shawn Fields Williams	<b>Title:</b>	Executive Director
<b>Phone:</b>	502-338-2893/ 635-5244	<b>Extension:</b>	
		<b>Email:</b>	shawn.williams@oldlouisville.org

## THE OLD LOUISVILLE NEIGHBORHOOD COUNCIL, INC.

### General Information

<b>Organization Number</b>	0177929
<b>Name</b>	THE OLD LOUISVILLE NEIGHBORHOOD COUNCIL, INC.
<b>Profit or Non-Profit</b>	N - Non-profit
<b>Company Type</b>	KCO - Kentucky Corporation
<b>Status</b>	A - Active
<b>Standing</b>	G - Good
<b>State</b>	KY
<b>File Date</b>	5/16/1983
<b>Organization Date</b>	5/16/1983
<b>Last Annual Report</b>	2/15/2018
<b>Principal Office</b>	1340 S. 4TH ST.(IN CENTRAL PARK) LOUISVILLE, KY 40208
<b>Registered Agent</b>	OLD LOUISVILLE NEIGHBORHOOD COUNCIL INC. 1340 S. 4TH. ST. IN CENTRAL PARK LOUISVILLE, KY 40208

### Current Officers

<b>President</b>	<u>Deborah Stewart</u>
<b>Vice President</b>	<u>Brent Logsdon</u>
<b>Secretary</b>	<u>Chuck Anderson</u>
<b>Treasurer</b>	<u>Michael Meador</u>
<b>Director</b>	<u>Shawn Fields Williams</u>
<b>Director</b>	<u>Leah Stewart</u>
<b>Director</b>	<u>Becky Medley</u>
<b>Director</b>	<u>James Brooks</u>

### Individuals / Entities listed at time of formation

<b>Director</b>	<u>RICHARD L JANES</u>
<b>Director</b>	<u>COROLYN BEALL</u>
<b>Director</b>	<u>ROSE GREENOUGH NETT</u>
<b>Incorporator</b>	<u>RICHARD L JANES</u>

### Images available online

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

<u>Annual Report</u>	2/15/2018	1 page	<u>PDF</u>
<u>Annual Report</u>	6/13/2017	1 page	<u>PDF</u>
<u>Annual Report</u>	6/28/2016	1 page	<u>PDF</u>
<u>Annual Report</u>	6/30/2015	1 page	<u>PDF</u>
<u>Amendment</u>	8/19/2014	1 page	<u>tiff</u> <u>PDF</u>


<a href="#">Annual Report</a>	1/24/2014	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	1/10/2013	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	1/3/2012	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	1/13/2011	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	1/26/2010	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	1/21/2009	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	8/5/2008	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	6/14/2007	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	6/16/2006	2 pages	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	4/21/2005	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Statement of Change</a>	7/12/2004	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	6/10/2003	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	7/2/2002	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	11/29/2001	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Statement of Change</a>	10/1/2001	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	10/30/2000	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Sixty Day Notice Return</a>	9/1/2000	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Statement of Change</a>	8/31/1999	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	8/3/1999	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	5/14/1998	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1997	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1996	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1995	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1994	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	3/22/1993	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	3/27/1992	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1991	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1991	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1990	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1989	1 page	<a href="#">tiff</a> <a href="#">PDF</a>
<a href="#">Articles of Incorporation</a>	5/16/1983	7 pages	<a href="#">tiff</a> <a href="#">PDF</a>

## Assumed Names

## Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	2/15/2018 2:46:52 PM	2/15/2018 2:46:52 PM	
Annual report	6/13/2017 11:33:07 AM	6/13/2017 11:33:07 AM	
Annual report	6/28/2016 3:54:17 PM	6/28/2016 3:54:17 PM	
Annual report	6/30/2015 11:30:17 AM	6/30/2015 11:30:17 AM	
Amendment - Change name	8/19/2014 11:15:23 AM	8/19/2014	<a href="#">THE OLD LOUISVILLE INFORMATION CENTER, INC.</a>

## Microfilmed Images

 **IRS** Department of the Treasury  
Internal Revenue Service  
P.O. Box 2508  
Cincinnati OH 45201

In reply refer to: 0248153327  
Jan. 27, 2015 LTR 4168C 0  
[REDACTED] 000000 00  
00021940  
BODC: TE

THE OLD LOUISVILLE NEIGHBORHOOD  
COUNCIL INC  
1340 S 4TH ST IN CENTRAL PARK  
LOUISVILLE KY 40208

Employer Identification Number: [REDACTED]  
Person to Contact: Ms. Espelage  
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Jan. 15, 2015, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in October 1984.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

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

Please refer to our website [www.irs.gov/eo](http://www.irs.gov/eo) for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.



0248153327  
Jan. 27, 2015 LTR 4168C 0  
[REDACTED] 000000 00  
00021941

THE OLD LOUISVILLE NEIGHBORHOOD  
COUNCIL INC  
1340 S 4TH ST IN CENTRAL PARK  
LOUISVILLE KY 40208

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

*Doris P. Kenwright*

Doris Kenwright, Operation Mgr.  
Accounts Management Operations 1

*OLNC  
Current Budget 2018*

**Old Louisville Neighborhood Council INC**  
**Profit & Loss Budget Overview**  
January through December 2018

	Old Louisville Live			Tours	Central Park Improvement
	OLNC Operations	(Programs)	(Programs)	(Programs)	(Programs)
	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
<b>Ordinary Income/Expense</b>					
<b>Income</b>					
43400 · Direct Public Support					
43401 · Corporate/Business Contribution		8,750.00			
43403 · Individual Contributions					2,000.00
43404 · Neighborhood Assoc Contribution	7,525.00		14,000.00		3,300.00
43406 · Star Sponsorships					
43400 · Direct Public Support - Other		8,000.00			
<b>Total 43400 · Direct Public Support</b>	<b>7,525.00</b>	<b>30,750.00</b>			<b>5,300.00</b>
44000 · Grant Income					
44001 · NDF Grants		2,500.00		4,000.00	
44101 · EAF Grants		2,500.00			
44102 · Cultural Pass				4,600.00	
<b>Total 44000 · Grant Income</b>	<b>0.00</b>	<b>5,000.00</b>		<b>8,600.00</b>	
46000 · Rental Income					
46400 · Other Types of Income					
43415 · Walking Tour Booklet Revenue				300.00	
46415 · Membership Dues	350.00				
47122 · Ad Sales				8,700.00	
<b>Total 46400 · Other Types of Income</b>	<b>350.00</b>			<b>9,000.00</b>	
47500 · Ticket Sales					
47501 · Pre-Sale Tickets					
47502 · Ticket Sales - Door					6,500.00
47505 · VIP Ticket Sales					
<b>Total 47500 · Ticket Sales</b>					<b>6,500.00</b>
48250 · Concessions Income					
48251 · Food/Alcohol/Beverage Sales					
48252 · Vendor Sit Fee					
48253 · Vendor Revenue Share					250.00

**Old Louisville Neighborhood Council INC**  
**Profit & Loss Budget Overview**  
 January through December 2018

	Old Louisville Live	Tours	Central Park Improvement
	OLNC Operations (Programs)	(Programs)	(Programs)
	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
48250 · Concessions Income - Other	6,500.00		
Total 48250 · Concessions Income	<u>6,750.00</u>		
Total Income	7,875.00	42,500.00	24,100.00
Cost of Goods Sold			
65217 · Food/Alcohol/Bev. Costs-Program		2,650.00	
65117 · Food/Alcohol/Bev. Costs-Events			
Total COGS		<u>2,650.00</u>	
Gross Profit	7,875.00	39,850.00	24,100.00
Expense			
65000 · Operations			
66001 · Payroll Expenses	60.00		
62110 · Payroll Accounting Fees	11,000.00		
66010 · Admin Payroll Expenses	1,650.00		
67000 · Payroll Tax Expense	12,710.00		
Total 66001 · Payroll Expenses	<u>12,710.00</u>		
62100 · Contract Services			
62130 · Commissions	8,000.00		
62135 · EXDirector Contract	10,500.00		
62160 · Outside Contract/Labor Services	2,000.00		
Total 62100 · Contract Services	<u>20,500.00</u>		
65200 · Insurance Expenses			
65224 · Liability on Premises	1,500.00		
65220 · Insurance - Liability, D and O	950.00		
Total 65200 · Insurance Expenses	<u>2,450.00</u>		
65300 · Marketing			
65400 · Web Design and Maintenance	2,300.00		
Total 65300 · Marketing	<u>2,300.00</u>		
65010 · Books, Subscriptions, Reference	350.00		
65011 · Cleaning & Maintenance	720.00		
65019 · Membership Dues	525.00		
65030 · Printing and Copying	360.00		



Old Louisville Neighborhood Council INC  
**Profit & Loss Budget Overview**  
 January through December 2018

Old Louisville Live      Tours      Central Park Improvement

OLNC Operations	(Programs)	(Programs)	(Programs)
Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
	4,140.00	5,236.00	
	29,127.00	8,636.00	3,530.00

- Total 61900 · Marketing- Program
- Total 60000 · Program Expenses
- 70000 · Event Expenses
- 75000 · Ex Director Contract- Events
- 74001 · Payroll Accounting Fees-Events
- 74000 · Accounting Fees- Events
- 71200 · Equipment Rental- Events
- 71000 · Contract Services- Events
- 71100 · Security- Events
- 70900 · Insurance- Events
- 70600 · Artist/Talent/Performer Fees- E
- 70400 · Postage & Mail Processing-Event
- 70700 · Supplies- Events
- 70800 · Permit Fees- Events
- 65100 · Marketing- Events
- 65100.6 · Radio
- 65101 · PR/Promotion Services
- 65102 · Graphic Design
- 65103 · Print Media
- 65104 · Online/Web Related
- Total 65100 · Marketing- Events
- 70000 · Event Expenses - Other
- Total 70000 · Event Expenses
- Total Expense
- Net Ordinary Income
- Net Income

43,709.00	29,127.00	8,636.00	3,530.00
-35,834.00	10,723.00	15,464.00	1,770.00
-35,834.00	10,723.00	15,464.00	1,770.00

Old Louisville Neighborhood Council INC  
Profit & Loss Budget Overview  
January through December 2018

Old Louisville Neighborhood Council 2018 Budget

	Total Community Garden (Programs)	Programs - Other (Programs)	Total Programs (Programs)	Spring HT (Events)	Old Lou Brew (Events)
Ordinary Income/Expense	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
Income					
43400 · Direct Public Support					
43401 · Corporate/Business Contribution			8,750.00		
43403 · Individual Contributions			2,000.00	1,000.00	
43404 · Neighborhood Assoc Contribution			17,300.00	500.00	
43406 · Star Sponsorships				500.00	
43400 · Direct Public Support - Other			8,000.00		
Total 43400 · Direct Public Support			36,050.00	2,000.00	
44000 · Grant Income					
44001 · NDF Grants			6,500.00		
44101 · EAF Grants			2,500.00		
44102 · Cultural Pass			4,600.00		
Total 44000 · Grant Income			13,600.00		
46000 · Rental Income		575.00	575.00		
46400 · Other Types of Income					
43415 · Walking Tour Booklet Revenue			300.00		
46415 · Membership Dues					
47122 · Ad Sales			8,700.00		
Total 46400 · Other Types of Income			9,000.00		
47500 · Ticket Sales					
47501 · Pre-Sale Tickets				2,000.00	1,200.00
47502 · Ticket Sales - Door			6,500.00	7,000.00	8,000.00
47505 · VIP Ticket Sales					2,000.00
Total 47500 · Ticket Sales			6,500.00	9,000.00	11,200.00
48250 · Concessions Income					
48251 · Food/Alcohol/Beverage Sales				1,000.00	
48252 · Vendor Sit Fee					1,500.00
48253 · Vendor Revenue Share			250.00		1,000.00

Old Louisville Neighborhood Council INC  
Profit & Loss Budget Overview

January through December 2018

Total Community Garden      Programs - Other      Spring HT      Old Lou Brew

(Programs)      (Programs)      Total Programs      (Events)      (Events)

Jan - Dec 18      Jan - Dec 18      Jan - Dec 18      Jan - Dec 18      Jan - Dec 18

48250 · Concessions Income - Other

Total 48250 · Concessions Income

Total Income

Cost of Goods Sold

65217 · Food/Alcohol/Bev. Costs-Program

65117 · Food/Alcohol/Bev. Costs-Events

Total COGS

Gross Profit

Expense

65000 · Operations

66001 · Payroll Expenses

62110 · Payroll Accounting Fees

66010 · Admin Payroll Expenses

67000 · Payroll Tax Expense

Total 66001 · Payroll Expenses

62100 · Contract Services

62130 · Commissions

62135 · ExDirector Contract

62160 · Outside Contract/Labor Services

Total 62100 · Contract Services

65200 · Insurance Expenses

65224 · Liability on Premises

65220 · Insurance - Liability, D and O

Total 65200 · Insurance Expenses

65300 · Marketing

65400 · Web Design and Maintenance

Total 65300 · Marketing

65010 · Books, Subscriptions, Reference

65011 · Cleaning & Maintenance

65019 · Membership Dues

65030 · Printing and Copying

	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
48250 · Concessions Income - Other			6,500.00		
Total 48250 · Concessions Income			6,500.00	1,000.00	2,500.00
Total Income	575.00		72,475.00	12,000.00	13,700.00
Cost of Goods Sold			2,650.00		
65217 · Food/Alcohol/Bev. Costs-Program					
65117 · Food/Alcohol/Bev. Costs-Events					
Total COGS			2,650.00		
Gross Profit	575.00		69,825.00	12,000.00	13,700.00
Expense					
65000 · Operations					
66001 · Payroll Expenses					
62110 · Payroll Accounting Fees					
66010 · Admin Payroll Expenses					
67000 · Payroll Tax Expense					
Total 66001 · Payroll Expenses					
62100 · Contract Services					
62130 · Commissions					
62135 · ExDirector Contract					
62160 · Outside Contract/Labor Services					
Total 62100 · Contract Services					
65200 · Insurance Expenses					
65224 · Liability on Premises					
65220 · Insurance - Liability, D and O					
Total 65200 · Insurance Expenses					
65300 · Marketing					
65400 · Web Design and Maintenance					
Total 65300 · Marketing					
65010 · Books, Subscriptions, Reference					
65011 · Cleaning & Maintenance					
65019 · Membership Dues					
65030 · Printing and Copying					

Old Louisville Neighborhood Council INC  
Profit & Loss Budget Overview  
January through December 2018

	Total Community Garden		Programs - Other		Spring HT	Old Lou Brew
	(Programs)	(Programs)	Total Programs	(Events)	(Events)	(Events)
	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
50000 · Support of Other Organization						
65032 · Professional Fees						
65032.2 · Accounting Fees						
Total 65032 · Professional Fees						4,975.00
65035 · Refreshments						
65040 · Office Supplies						
65060 · Telephone, Telecommunications						
65090 · Utilities		180.00				
Total 65000 · Operations		180.00				4,975.00
60000 · Program Expenses						
64002 · Ex Director Contract- Program		17,500.00				
63000 · Payroll Expense- Program			3,000.00			
63001 · Payroll Tax Expense- Program			400.00			
64001 · Payroll Accounting Fees- Program		1,000.00	1,000.00			
64000 · Accounting Fees- Program		2,700.00	2,700.00			
62105 · Security- Program			1,260.00			
62000 · Insurance- Program		120.00	1,520.00			
62103 · Artist/Talent/Performer Fees-P			20,350.00			
61400 · Refreshments- Program			500.00			
61901 · Permit Fees- Program			1,957.00			
61800 · Tools,Materials,&Equipment- P						
61803 · Equipment Maintenance- Program			750.00			
61801 · Equipment and Vehicle Rental			2,300.00			
Total 61800 · Tools,Materials,&Equipment- P			3,050.00			
61900 · Marketing- Program						
61900.1 · Print			1,000.00			400.00
61900.4 · PR/Promotion Services			400.00			300.00
61900.5 · Graphic Design			1,800.00			500.00
61900.6 · Print Media			5,336.00			400.00
61900.7 · Online/Web Related			840.00			300.00
61900.9 · Other Marketing						150.00



## Old Louisville Neighborhood Council INC Profit & Loss Budget Overview

January through December 2018

	Total Community Garden		Programs - Other		Spring HT	Old Lou Brew
	(Programs)	(Programs)	Total Programs	(Events)	(Events)	(Events)
	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
Total 61900 · Marketing-Program			9,376.00	2,050.00		
Total 60000 · Program Expenses	120.00	21,200.00	62,613.00	2,050.00		
70000 · Event Expenses						
75000 · Ex Director Contract- Events						
74001 · Payroll Accounting Fees-Events						
74000 · Accounting Fees- Events						
71200 · Equipment Rental- Events						
71000 · Contract Services- Events						
71100 · Security- Events						280.00
70900 · Insurance- Events						476.00
70600 · Artist/Talent/Performer Fees- E						1,200.00
70400 · Postage & Mail Processing-Event						
70700 · Supplies- Events						
70800 · Permit Fees- Events						
65100 · Marketing- Events						2,000.00
65100.6 · Radio						300.00
65101 · PR/Promotion Services						500.00
65102 · Graphic Design						1,211.00
65103 · Print Media						300.00
65104 · Online/Web Related						4,311.00
Total 65100 · Marketing- Events						6,267.00
70000 · Event Expenses - Other						
Total 70000 · Event Expenses						
Total Expense	300.00	21,200.00	62,793.00	7,025.00		6,267.00
Net Ordinary Income	275.00	-21,200.00	7,032.00	4,975.00		7,433.00
Net Income	275.00	-21,200.00	7,032.00	4,975.00		7,433.00

Old Louisville Neighborhood Council INC  
Profit & Loss Budget Overview  
January through December 2018

Ordinary Income/Expense Income	HHT	HHT VIP Event	Events - Other		TOTAL
	(Events)	(Events)	(Events)	Total Events	
	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
43400 · Direct Public Support					
43401 · Corporate/Business Contribution	1,000.00		1,000.00		9,750.00
43403 · Individual Contributions	3,500.00		4,500.00		6,500.00
43404 · Neighborhood Assoc Contribution	2,750.00		3,250.00		28,075.00
43406 · Star Sponsorships	2,000.00		2,500.00		2,500.00
43400 · Direct Public Support - Other	2,750.00		2,750.00		10,750.00
Total 43400 · Direct Public Support	12,000.00		14,000.00		57,575.00
44000 · Grant Income					
44001 · NDF Grants					6,500.00
44101 · EAF Grants					2,500.00
44102 · Cultural Pass					4,600.00
Total 44000 · Grant Income					13,600.00
46000 · Rental Income					575.00
46400 · Other Types of Income					
43415 · Walking Tour Booklet Revenue					300.00
46415 · Membership Dues					350.00
47122 · Ad Sales					8,700.00
Total 46400 · Other Types of Income					9,350.00
47500 · Ticket Sales					
47501 · Pre-Sale Tickets	33,750.00		36,950.00		36,950.00
47502 · Ticket Sales - Door	11,250.00		26,250.00		32,750.00
47505 · VIP Ticket Sales		7,500.00	9,500.00		9,500.00
Total 47500 · Ticket Sales	45,000.00	7,500.00	72,700.00		79,200.00
48250 · Concessions Income					
48251 · Food/Alcohol/Beverage Sales		600.00	1,600.00		1,600.00
48252 · Vendor Sit Fee			1,500.00		1,500.00
48253 · Vendor Revenue Share			1,000.00		1,250.00

## Old Louisville Neighborhood Council INC Profit & Loss Budget Overview

January through December 2018

	Events - Other				TOTAL
	(Events)	(Events)	(Events)	(Events)	
	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
48250 · Concessions Income - Other	1,500.00			1,500.00	8,000.00
Total 48250 · Concessions Income	1,500.00	600.00		5,600.00	12,350.00
Total Income	58,500.00	8,100.00		92,300.00	172,650.00
Cost of Goods Sold					
65217 · Food/Alcohol/Bev. Costs-Program		1,425.00		1,425.00	2,650.00
65117 · Food/Alcohol/Bev. Costs-Events		1,425.00		1,425.00	4,075.00
Total COGS		2,850.00		2,850.00	6,725.00
Gross Profit	58,500.00	6,675.00		90,875.00	168,575.00
Expense					
65000 · Operations					
66001 · Payroll Expenses					60.00
62110 · Payroll Accounting Fees					11,000.00
66010 · Admin Payroll Expenses					1,650.00
67000 · Payroll Tax Expense					12,710.00
Total 66001 · Payroll Expenses					25,360.00
62100 · Contract Services					8,000.00
62130 · Commissions					10,500.00
62135 · EXDirector Contract					2,000.00
62160 · Outside Contract/Labor Services					20,500.00
Total 62100 · Contract Services					31,000.00
65200 · Insurance Expenses					1,500.00
65224 · Liability on Premises					950.00
65220 · Insurance - Liability, D and O					2,450.00
Total 65200 · Insurance Expenses					2,400.00
65300 · Marketing					2,300.00
65400 · Web Design and Maintenance					2,300.00
Total 65300 · Marketing					2,300.00
65010 · Books, Subscriptions, Reference					350.00
65011 · Cleaning & Maintenance					720.00
65019 · Membership Dues					525.00
Total 65010-19 · Printing and Copying					1,595.00

Old Louisville Neighborhood Council INC  
**Profit & Loss Budget Overview**  
 January through December 2018

	Events - Other				TOTAL
	HHT (Events)	HHT VIP Event (Events)	HHT (Events)	Total Events (Events)	
50000 · Support of Other Organization				4,975.00	4,975.00
65032 · Professional Fees					
65032.2 · Accounting Fees					1,620.00
Total 65032 · Professional Fees					<u>1,620.00</u>
65035 · Refreshments	450.00			450.00	450.00
65040 · Office Supplies					720.00
65060 · Telephone, Telecommunications					1,454.00
65090 · Utilities					180.00
Total 65000 · Operations	<u>450.00</u>			<u>5,425.00</u>	<u>49,314.00</u>
60000 · Program Expenses					
64002 · Ex Director Contract- Program					17,500.00
63000 · Payroll Expense -Program					3,000.00
63001 · Payroll Tax Expense- Program					400.00
64001 · Payroll Accounting Fees-Program					1,000.00
64000 · Accounting Fees- Program					2,700.00
62105 · Security- Program					1,260.00
62000 · Insurance- Program					1,520.00
62103 · Artisv/Talent/Performer Fees-P					20,350.00
61400 · Refreshments- Program					500.00
61901 · Permit Fees- Program					1,957.00
61800 · Tools,Materials,&Equipment- P					
61803 · Equipment Maintenance- Program					750.00
61801 · Equipment and Vehicle Rental					2,300.00
Total 61800 · Tools,Materials,&Equipment- P					<u>3,050.00</u>
61900 · Marketing- Program					
61900.1 · Print					400.00
61900.4 · PR/Promotion Services					300.00
61900.5 · Graphic Design					500.00
61900.6 · Print Media					400.00
61900.7 · Online/Web Related					300.00
61900.9 · Other Marketing					150.00

Old Louisville Neighborhood Council INC  
Profit & Loss Budget Overview  
January through December 2018

	HHT			Events - Other		
	(Events)	(Events)	(Events)	Total Events	TOTAL	
	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
Total 61900 · Marketing- Program				2,050.00		11,426.00
Total 60000 · Program Expenses				2,050.00		64,663.00
70000 · Event Expenses						
75000 · Ex Director Contract- Events			7,000.00	7,000.00		7,000.00
74001 · Payroll Accounting Fees-Events			400.00	400.00		400.00
74000 · Accounting Fees- Events			6,480.00	6,480.00		6,480.00
71200 · Equipment Rental- Events	1,050.00		400.00	1,450.00		1,450.00
71000 · Contract Services- Events	2,000.00			2,000.00		2,000.00
71100 · Security- Events				280.00		280.00
70900 · Insurance- Events		300.00		776.00		776.00
70600 · Artis/Talent/Performer Fees- E				1,200.00		1,200.00
70400 · Postage & Mail Processing-Event	250.00			250.00		250.00
70700 · Supplies- Events	100.00			100.00		100.00
70800 · Permit Fees- Events	140.00	366.00		506.00		506.00
65100 · Marketing- Events						
65100.6 · Radio				2,000.00		2,000.00
65101 · PR/Promotion Services	1,350.00			1,650.00		1,650.00
65102 · Graphic Design				500.00		500.00
65103 · Print Media	2,350.00			3,561.00		3,561.00
65104 · Online/Web Related	2,250.00			2,550.00		2,550.00
Total 65100 · Marketing- Events	5,950.00			10,261.00		10,261.00
70000 · Event Expenses - Other	650.00			650.00		650.00
Total 70000 · Event Expenses	10,140.00	1,066.00	13,880.00	31,353.00		31,353.00
Total Expense	10,590.00	1,066.00	13,880.00	38,828.00		145,330.00
Net Ordinary Income	47,910.00	5,609.00	-13,880.00	52,047.00		23,245.00
Net Income	47,910.00	5,609.00	-13,880.00	52,047.00		23,245.00

# OLNC Current Financial Statement

## June 2018 P&L

Category	June 2018 P&L			YTD Net	Budget (FY)
	Revenue	Expenses	Net		
Operations	\$0	\$5,953 <sup>1</sup>	-\$5,953	-\$25,075	-\$70,914
Old Louisville Live	\$8,300 <sup>2</sup>	\$1,550	\$6,750	\$7,476	\$10,723
Tours	\$5,791 <sup>3</sup>	\$1,528	\$4,263	\$7,567	\$15,464
Property Improvement Committee	\$500	-\$3,031	\$3,531	\$3,735	\$1,770
Community Garden	\$50	\$276	-\$226	-\$328	\$275
Mansion Tour	\$500	\$0	\$500	\$15,364	\$12,958
Old Lou Brew	\$500	\$0	\$500	\$4,000	\$7,433
Holiday Home Tour	\$0	\$505	-\$505	-\$3,011	\$47,085
<b>Total</b>	<b>\$15,641</b>	<b>\$6,781</b>	<b>\$8,860</b>	<b>\$9,728</b>	<b>\$24,794</b>

- <sup>1</sup> Higher than normal due to three bi-weekly payrolls (occurs twice per year)
- <sup>2</sup> Includes \$2.5k NDF grant, \$5k Paradise Tomato Kitchens
- <sup>3</sup> Includes \$4k NDF grant for printing booklets - already incurred

# May 2018 P&L

Category	May 2018 P&L			YTD Net	Budget (FY)
	Revenue	Expenses	Net		
Operations	\$2,153	\$4,507	-\$2,354	-\$19,122	-\$70,914
Old Louisville Live	\$1,548	\$4,398	-\$2,850	\$726	\$10,723
Tours	\$1,031	\$1,723	-\$692	\$3,303	\$15,464
Property Improvement Committee	\$0	-\$963	\$963	\$204	\$1,770
Community Garden	\$0	\$29	-\$29	-\$102	\$275
Mansion Tour	\$0	\$1,498	-\$1,498	\$14,864	\$12,958
Old Lou Brew	\$0	\$0	\$0	\$3,500	\$7,433
Holiday Home Tour	\$0	\$83	-\$83	-\$2,506	\$47,085
<b>Total</b>	<b>\$4,731</b>	<b>\$11,275</b>	<b>-\$6,543</b>	<b>\$868</b>	<b>\$24,794</b>

## Forms 990 / 990-EZ Return Summary

For calendar year 2017, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

### OLD LOUISVILLE NEIGHBORHOOD COUNCIL

<b>Net Asset / Fund Balance at Beginning of Year</b>		<u>128,658</u>
<b>Revenue</b>		
Contributions	<u>59,923</u>	
Program service revenue	<u>63,806</u>	
Investment income	<u>1</u>	
Capital gain / loss		
Fundraising / Gaming:		
Gross revenue		
Direct expenses		
Net income		
Other income	<u>412</u>	
<b>Total revenue</b>		<u>124,142</u>
<b>Expenses</b>		
Program services		
Management and general		
Fundraising		
<b>Total expenses</b>		<u>136,071</u>
<b>Excess / (deficit)</b>		<u>-11,929</u>
Changes		<u>275</u>
<b>Net Asset / Fund Balance at End of Year</b>		<u>117,004</u>

Reconciliation of Revenue	
Total revenue per financial statements	_____
Less:	
Unrealized gains	_____
Donated services	_____
Recoveries	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
<b>Total revenue per return</b>	<u>_____</u>

Reconciliation of Expenses	
Total expenses per financial statements	_____
Less:	
Donated services	_____
Prior year adjustments	_____
Losses	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
<b>Total expenses per return</b>	<u>_____</u>

Balance Sheet			
	Beginning	Ending	Differences
Assets	<u>139,237</u>	<u>121,569</u>	
Liabilities	<u>10,579</u>	<u>4,565</u>	
Net assets	<u>128,658</u>	<u>117,004</u>	<u>-11,654</u>

**Miscellaneous Information**

Amended return \_\_\_\_\_

Return / extended due date 11/15/18

Failure to file penalty \_\_\_\_\_



Form **8879-EO**

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

OMB No. 1545-1878

Department of the Treasury  
Internal Revenue Service  
Name of exempt organization

For calendar year 2017, or fiscal year beginning ....., 2017, and ending ....., 20 .....

▶ Do not send to the IRS. Keep for your records.  
▶ Go to [www.irs.gov/Form8879EO](http://www.irs.gov/Form8879EO) for the latest information.

**2017**

**OLD LOUISVILLE NEIGHBORHOOD COUNCIL**

Name and title of officer

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

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

1a	Form 990 check here ▶ <input type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	
2a	Form 990-EZ check here ▶ <input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	<b>124,142</b>
3a	Form 1120-POL check here ▶ <input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here ▶ <input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here ▶ <input type="checkbox"/>	b	Balance Due (Form 8868, line 3c)	5b	

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

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize **Mary Morrow & Associates** to enter my PIN **31110** as my signature  
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶

Date ▶ **08/07/18**

#### Part III Certification and Authentication

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

**61213452535**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶

Date ▶ **08/07/18**

**ERO Must Retain This Form — See Instructions**

**Do Not Submit This Form to the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2017)

Form **990-EZ**

# Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2017

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to [www.irs.gov/Form990EZ](http://www.irs.gov/Form990EZ) for instructions and the latest information.

**A For the 2017 calendar year, or tax year beginning** \_\_\_\_\_, **and ending** \_\_\_\_\_

<p><b>B</b> Check if applicable:</p> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<p><b>C Name of organization</b> <b>OLD LOUISVILLE NEIGHBORHOOD COUNCIL</b></p> <p>Number and street (or P.O. box, if mail is not delivered to street address) Room/suite  <b>1340 SOUTH FOURTH ST-IN CENTRAL PAR</b></p> <p>City or town, state or province, country, and ZIP or foreign postal code  <b>LOUISVILLE KY 40208</b></p>	<p><b>D Employer identification number</b> [REDACTED]</p> <p><b>E Telephone number</b> <b>502-635-5244</b></p> <p><b>F Group Exemption Number</b> ▶</p>
--	---	---

**G Accounting Method:**  Cash  Accrual Other (specify) ▶ \_\_\_\_\_

**H Check**  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**I Website:** ▶ **OLDLOUISVILLE.ORG**

**J Tax-exempt status** (check only one) —  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**K Form of organization:**  Corporation  Trust  Association  Other \_\_\_\_\_

**L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts.** If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **124,142**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

	Description	Line	Amount
Revenue	1 Contributions, gifts, grants, and similar amounts received	1	59,923
	2 Program service revenue including government fees and contracts	2	63,806
	3 Membership dues and assessments	3	
	4 Investment income	4	1
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c Less: direct expenses from gaming and fundraising events	6c		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a Gross sales of inventory, less returns and allowances	7a		
b Less: cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8 Other revenue (describe in Schedule O)	8	412	
<b>9 Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	<b>124,142</b>	
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	33,720
	13 Professional fees and other payments to independent contractors	13	32,368
	14 Occupancy, rent, utilities, and maintenance	14	2,677
	15 Printing, publications, postage, and shipping	15	3,169
	16 Other expenses (describe in Schedule O)	16	64,137
<b>17 Total expenses.</b> Add lines 10 through 16	17	<b>136,071</b>	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-11,929
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	128,658
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	275
	<b>21 Net assets or fund balances at end of year.</b> Combine lines 18 through 20	21	<b>117,004</b>

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2017)



Part V Other Information (Note the Schedule A and personal benefit contract information in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization
40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed
None
42a The organization's books are in care of MARY MORROW & ASSOCIATES Telephone no. 502-638-0665
1347 S 3RD ST SUITE 304
Located at LOUISVILLE KY ZIP + 4 40208
42b 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)? If "Yes," enter the name of the foreign country:
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).
42c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country:
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year
43
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44a
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44b
44c Did the organization receive any payments for indoor tanning services during the year?
44c
44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
44d
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45a
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)
45b

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<input checked="" type="checkbox"/>

**Part VI Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47 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		<input checked="" type="checkbox"/>
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<input checked="" type="checkbox"/>
49a Did the organization make any transfers to an exempt non-charitable related organization?		<input checked="" type="checkbox"/>
b If "Yes," was the related organization a section 527 organization?		<input checked="" type="checkbox"/>

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a completed Schedule A

Yes  No

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 *Leah Stewart*  
 Signature of officer  
 Date 8-8-18  
 Type or print name and title Leah Stewart Treasurer

Paid Preparer Use Only  
 Print/Type preparer's name Mary C Morrow  
 Preparer's signature  
 Date 08/08/18  
 Check self-emp  
 PTIN  
 Firm's name Mary Morrow & Associates  
 Firm's address 1347 S 3rd St Ste 304 Louisville, KY 40208-3300  
 Firm's EIN  
 Phone no. 502-419-8025

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

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

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

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.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization

**OLD LOUISVILLE NEIGHBORHOOD COUNCIL**

Employer identification number

[REDACTED]

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: .....
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....
- 10  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.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations:
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

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

Schedule A (Form 990 or 990-EZ) 2017

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	14,518	112,149	63,752	64,101	59,923	314,443
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 <b>Total.</b> Add lines 1 through 3	14,518	112,149	63,752	64,101	59,923	314,443
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 <b>Public support.</b> Subtract line 5 from line 4.						314,443

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	14,518	112,149	63,752	64,101	59,923	314,443
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 <b>Total support.</b> Add lines 7 through 10						314,443

12 Gross receipts from related activities, etc. (see instructions) 12 64,219

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

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 100.00%

15 Public support percentage from 2016 Schedule A, Part II, line 14 15 100.00%

16a **33 1/3% support test—2017.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

**b 33 1/3% support test—2016.** 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

17a **10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

**b 10%-facts-and-circumstances test—2016.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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



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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a 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						
8 Public support. (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a 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						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

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

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2017.** 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—2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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



**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations (continued)**

- 11 Has the organization accepted a gift or contribution from any of the following persons?
  - a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
  - b A family member of a person described in (a) above?
  - c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

	Yes	No
11a		
11b		
11c		

**Section B. Type I Supporting Organizations**

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

	Yes	No
1		
2		

**Section C. Type II Supporting Organizations**

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

	Yes	No
1		

**Section D. All Type III Supporting Organizations**

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

	Yes	No
1		
2		
3		

**Section E. Type III Functionally-Integrated Supporting Organizations**

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
  - a  The organization satisfied the Activities Test. Complete line 2 below.
  - b  The organization is the parent of each of its supported organizations. Complete line 3 below.
  - c  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

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

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
  - b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.**
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
  - b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		



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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4).	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		





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

Department of the Treasury  
Internal Revenue Service

Name of the organization

**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.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2017**

Open to Public Inspection

**OLD LOUISVILLE NEIGHBORHOOD COUNCIL**

Employer identification number

**Form 990-EZ, Part I, Line 8 - Other Revenue**

Description	Amount
RENTAL	\$ 412
<b>Total</b>	<b>\$ 412</b>

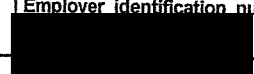
**Form 990-EZ, Part I, Line 16 - Other Expenses**

Description	Amount
<b>Expenses</b>	
MARKETING - PROGRAMS	\$ 4,074
SUPPLIES	\$ 52
DUES	\$ 625
SUPPLIES	\$ 900
TELEPHONE	\$ 1,537
REFRESHMENTS	\$ 1,209
PROGRAM SUPPLIES	\$ 1,821
PERMIT FEES	\$ 1,307
TOOLS, MATERIALS EQUIPMENT	\$ 2,250
WEB DESIGN	\$ 1,815
	\$ 20
FINANCE CHARGE	\$ 40
LIABILITY & D&O INS	\$ 2,780
WORKERS COMP	\$ 1,449
PROGRAM INS	\$ 274
OLD LOUISVILLE LIVE	\$ 24,300
TOURS	\$ 2

Name of the organization

Employer identification number

**OLD LOUISVILLE NEIGHBORHOOD COUNCIL**



HOLIDAY HOUSE TOUR	\$	6,441
PARK GROUNDS	\$	2,317
COMMUNITY GARDEN	\$	630
OLD LOU BREW	\$	5,311
VICTORIAN TEA	\$	83
APPRECIATION-HHT	\$	415
BANK FEES	\$	463
LICENSE & FEES	\$	340
TOONERVILLE TROLLY	\$	2,500
MIDDLE SCHOOL	\$	200
OTHER	\$	550
Non-investment Depreciation	\$	432
<b>Total</b>	<b>\$</b>	<b>64,137</b>

Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
PRIOR YEAR ADJUSTMENT	\$ 275

Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beg. of Year	End of Year
Grants Receivable	\$ 5,550	\$ 600
Prepaid Expenses and Deferred Charges	\$ 0	\$ 336
FF&E	\$ 62,908	\$ 62,908
Less Accumulated Depreciation	\$ 5,135	\$ 6,820
	\$ 3,556	\$ 3,556
Less Accumulated Amortization	\$ 1,621	\$ 2,331
<b>Total</b>	<b>\$ 65,258</b>	<b>\$ 58,249</b>

Name of the organization

Employer identification number

OLD LOUISVILLE NEIGHBORHOOD COUNCIL

Form 990-EZ, Part II, Line 26 - Other Liabilities

Description	Beg. of Year	End of Year
Accounts Payable and Accrued Expenses	\$ 2,222	\$ 875
CREDIT CARDS	\$ 4,785	\$ 2,273
PAYROLL LIABILITIES	\$ 3,398	\$ 1,049
SALES TAX PAYABLE	\$ 174	\$ 368

Form 990-EZ, Part III - Primary Exempt Purpose

To advocate, promote, and protect Old Louisville's historic architecture and streetscapes within a diverse neighborhood of residents and businesses while advancing artistic and cultural events to build community.

Form 990-EZ, Part III, Line 31 - All Other Accomplishment

Support of TOONERVILLE TROLLEY NEIGHBORHOOD ORGANIZATION



Form **4562**

**Depreciation and Amortization**  
(Including Information on Listed Property)

OMB No. 1545-0172

**2017**

Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to your tax return.  
▶ Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

Attachment Sequence No. **179**

Name(s) shown on return

**OLD LOUISVILLE NEIGHBORHOOD COUNCIL**

Business or activity to which this form relates

**Indirect Depreciation**

**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	510,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,030,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2016 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12	▶ 13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	1,556

**Part III MACRS Depreciation (Don't include listed property.) (See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2017	17	129
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

**Section B—Assets Placed in Service During 2017 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	1,685
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

OLD LOUISVILLE NEIGHBORHOOD COUNCIL

Form 4562 (2017)

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? 24b If "Yes," is the evidence written? 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 26 Property used more than 50% in a qualified business use: 27 Property used 50% or less in a qualified business use: 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (don't include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use?

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

42 Amortization of costs that begins during your 2017 tax year (see instructions): 43 Amortization of costs that began before your 2017 tax year 44 Total. Add amounts in column (f). See the instructions for where to report

**Federal Asset Report**

FYE: 12/31/2017

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>Prior MACRS:</b>										
1	COPIER	5/11/12	825			X	412	5 HY 200DB	801	24
3	FURNITURE & FIXTURES	9/01/14	749			X	374	7 HY 200DB	585	47
7	ADDITIONAL FF&E	1/01/15	655			X	327	7 HY 200DB	454	58
			<u>2,229</u>				<u>1,113</u>		<u>1,840</u>	<u>129</u>
<b>Other Depreciation:</b>										
2	LEGACY LEASEHOLD IMP	9/01/14	48,867				48,867	39 MO S/L	2,871	1,253
5	WINDOWS	9/08/15	9,900				9,900	39 MO S/L	328	254
6	LEGACY ADDITIONAL	1/01/15	1,912				1,912	39 MO S/L	96	49
	<b>Total Other Depreciation</b>		<u>60,679</u>				<u>60,679</u>		<u>3,295</u>	<u>1,556</u>
	<b>Total ACRS and Other Depreciation</b>		<u>60,679</u>				<u>60,679</u>		<u>3,295</u>	<u>1,556</u>
<b>Amortization:</b>										
4	PROGRAM START-UP	9/01/14	988				988	5 MO Amort	593	197
8	ADDITIONAL START-UP	1/01/15	2,568				2,568	5 MO Amort	1,028	513
			<u>3,556</u>				<u>3,556</u>		<u>1,621</u>	<u>710</u>
	<b>Grand Totals</b>		66,464				65,348		6,756	2,395
	<b>Less: Dispositions and Transfers</b>		0				0		0	0
	<b>Less: Start-up/Org Expense</b>		0				0		0	0
	<b>Net Grand Totals</b>		<u>66,464</u>				<u>65,348</u>		<u>6,756</u>	<u>2,395</u>

**KY Asset Report**

FYE: 12/31/2017

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Basis for Depr	KY Prior	KY Current	Federal Current	Difference Fed - KY
<b>Prior MACRS:</b>								
1	COPIER	5/11/12	825	825	801	24	24	0
3	FURNITURE & FIXTURES	9/01/14	749	749	585	47	47	0
7	ADDITIONAL FF&E	1/01/15	655	655	454	58	58	0
			<u>2,229</u>	<u>2,229</u>	<u>1,840</u>	<u>129</u>	<u>129</u>	<u>0</u>
<b>Other Depreciation:</b>								
2	LEGACY LEASEHOLD IMP	9/01/14	48,867	48,867	2,871	1,253	1,253	0
5	WINDOWS	9/08/15	9,900	9,900	328	254	254	0
6	LEGACY ADDITIONAL	1/01/15	1,912	1,912	96	49	49	0
	<b>Total Other Depreciation</b>		<u>60,679</u>	<u>60,679</u>	<u>3,295</u>	<u>1,556</u>	<u>1,556</u>	<u>0</u>
	<b>Total ACRS and Other Depreciation</b>		<u>60,679</u>	<u>60,679</u>	<u>3,295</u>	<u>1,556</u>	<u>1,556</u>	<u>0</u>
<b>Amortization:</b>								
4	PROGRAM START-UP	9/01/14	988	988	593	197	197	0
8	ADDITIONAL START-UP	1/01/15	2,568	2,568	1,028	513	513	0
			<u>3,556</u>	<u>3,556</u>	<u>1,621</u>	<u>710</u>	<u>710</u>	<u>0</u>
	<b>Grand Totals</b>		<u>66,464</u>	<u>66,464</u>	<u>6,756</u>	<u>2,395</u>	<u>2,395</u>	<u>0</u>
	<b>Less: Dispositions</b>		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	<b>Less: Start-up/Org Expense</b>		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	<b>Net Grand Totals</b>		<u>66,464</u>	<u>66,464</u>	<u>6,756</u>	<u>2,395</u>	<u>2,395</u>	<u>0</u>

**AMT Asset Report**

FYE: 12/31/2017

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>Prior MACRS:</b>									
1	COPIER	5/11/12	825		X	412	5 HY 200DB	801	24
3	FURNITURE & FIXTURES	9/01/14	749		X	374	7 HY 200DB	585	47
7	ADDITIONAL FF&E	1/01/15	655		X	327	7 HY 200DB	454	58
			<u>2,229</u>			<u>1,113</u>		<u>1,840</u>	<u>129</u>
<b>Other Depreciation:</b>									
2	LEGACY LEASEHOLD IMP	9/01/14	0			0	0 HY	0	0
5	WINDOWS	9/08/15	0			0	0 HY	0	0
6	LEGACY ADDITIONAL	1/01/15	0			0	0 HY	0	0
	<b>Total Other Depreciation</b>		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	<b>Total ACRS and Other Depreciation</b>		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	<b>Grand Totals</b>		2,229			1,113		1,840	129
	<b>Less: Dispositions and Transfers</b>		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	<b>Net Grand Totals</b>		<u>2,229</u>			<u>1,113</u>		<u>1,840</u>	<u>129</u>

**Bonus Depreciation Report**

FYE: 12/31/2017

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
<b>Activity: Form 990, Page 1</b>								
1	COPIER	5/11/12	825		0	0	413	412
3	FURNITURE & FIXTURES	9/01/14	749		0	0	375	374
7	ADDITIONAL FF&E	1/01/15	655		0	0	328	327
	<b>Form 990, Page 1</b>		<u>2,229</u>		<u>0</u>	<u>0</u>	<u>1,116</u>	<u>1,113</u>
	<b>Grand Total</b>		<u>2,229</u>		<u>0</u>	<u>0</u>	<u>1,116</u>	<u>1,113</u>

**Depreciation Adjustment Report**

FYE: 12/31/2017

**All Business Activities**

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
<b>MACRS Adjustments:</b>						
Page 1	1	1	COPIER	24	24	0
Page 1	1	3	FURNITURE & FIXTURES	47	47	0
Page 1	1	7	ADDITIONAL FF&E	58	58	0
				<u>129</u>	<u>129</u>	<u>0</u>

**Future Depreciation Report FYE: 12/31/18**

FYE: 12/31/2017

**Form 990, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
<b>Prior MACRS:</b>					
1	COPIER	5/11/12	825	0	0
3	FURNITURE & FIXTURES	9/01/14	749	34	33
7	ADDITIONAL FF&E	1/01/15	655	41	41
			<u>2,229</u>	<u>75</u>	<u>74</u>
<b>Other Depreciation:</b>					
2	LEGACY LEASEHOLD IMP	9/01/14	48,867	1,253	0
5	WINDOWS	9/08/15	9,900	254	0
6	LEGACY ADDITIONAL	1/01/15	1,912	49	0
	<b>Total Other Depreciation</b>		<u>60,679</u>	<u>1,556</u>	<u>0</u>
	<b>Total ACRS and Other Depreciation</b>		<u>60,679</u>	<u>1,556</u>	<u>0</u>
<b>Amortization:</b>					
4	PROGRAM START-UP	9/01/14	988	198	0
8	ADDITIONAL START-UP	1/01/15	2,568	514	0
			<u>3,556</u>	<u>712</u>	<u>0</u>
	<b>Grand Totals</b>		<u>66,464</u>	<u>2,343</u>	<u>74</u>



**KY Future Depreciation Report**

**FYE: 12/31/18**

FYE: 12/31/2017

**Form 990, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>KY</u>
<b>Prior MACRS:</b>				
1	COPIER	5/11/12	825	0
3	FURNITURE & FIXTURES	9/01/14	749	34
7	ADDITIONAL FF&E	1/01/15	655	41
			<u>2,229</u>	<u>75</u>
<b>Other Depreciation:</b>				
2	LEGACY LEASEHOLD IMP	9/01/14	48,867	1,253
5	WINDOWS	9/08/15	9,900	254
6	LEGACY ADDITIONAL	1/01/15	1,912	49
	<b>Total Other Depreciation</b>		<u>60,679</u>	<u>1,556</u>
	<b>Total ACRS and Other Depreciation</b>		<u>60,679</u>	<u>1,556</u>
<b>Amortization:</b>				
4	PROGRAM START-UP	9/01/14	988	198
8	ADDITIONAL START-UP	1/01/15	2,568	514
			<u>3,556</u>	<u>712</u>
	<b>Grand Totals</b>		<u>66,464</u>	<u>2,343</u>

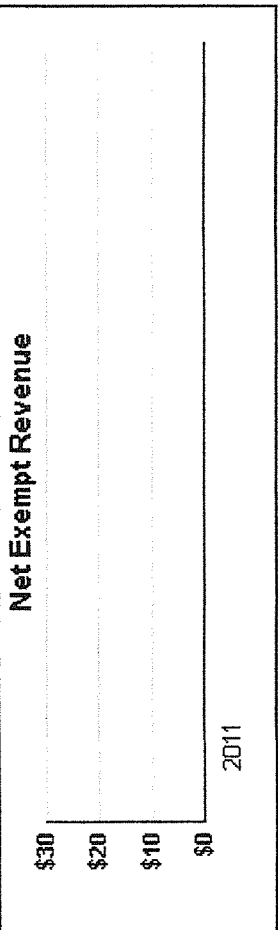
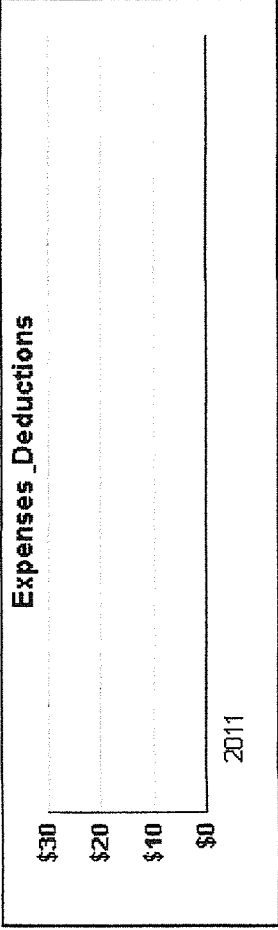
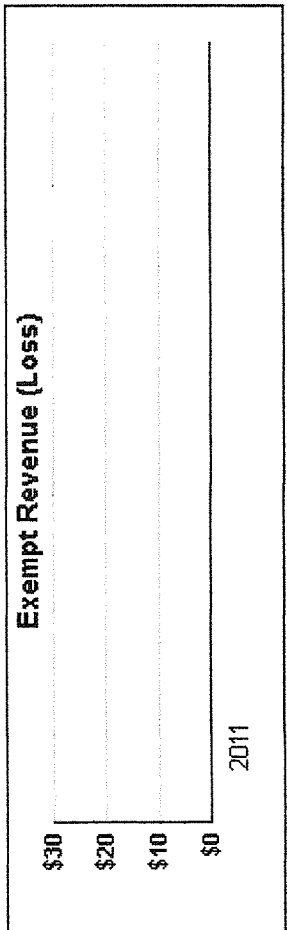
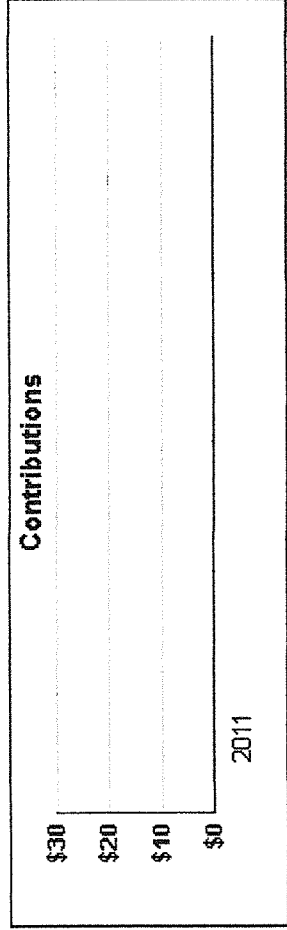
**Tax Return History**

Form **990T**

**2017**

Name **OLD LOUISVILLE NEIGHBORHOOD COUNCIL** Employer Identification Number [REDACTED]

	2013	2014	2015	2016	2017	2018
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income						
<b>Total trade or business income</b>						
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						



Form **990T**

**Tax Return History**

**2017**

Name

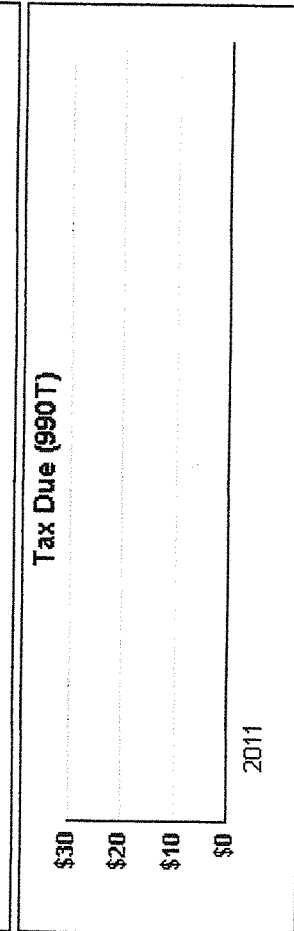
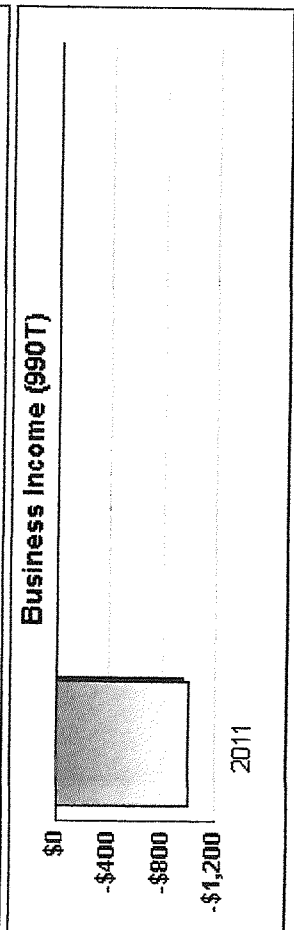
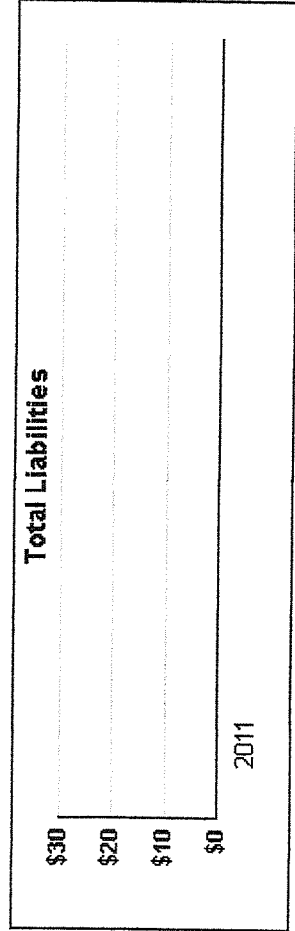
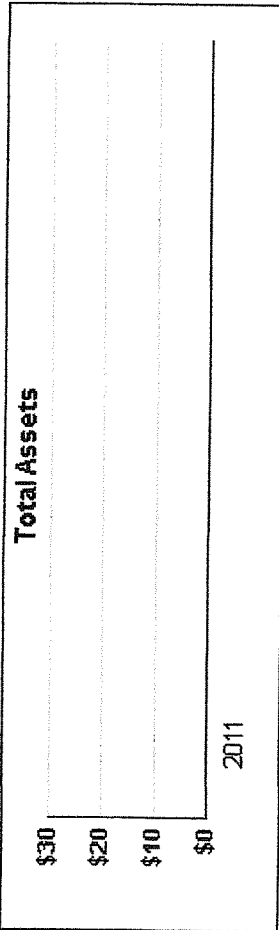
**OLD LOUISVILLE NEIGHBORHOOD COUNCIL**

Number



	2013	2014	2015	2016	2017	2018
Other deductions .....						
Net operating loss deduction .....						
Specific deduction .....	1,000					
<b>Income after expense and deductions</b> .....	<b>-1,000</b>					
Income tax (corporate or trust) .....						
Other taxes .....						
<b>Total taxes</b> .....						
General business credit .....						
Other credits .....						
<b>Net tax after credits</b> .....						
Estimated tax payments .....						
Other payments .....						
<b>Balance due/Overpayment</b> .....						

\* Income shown net of expenses



**Federal Statements**

FYE: 12/31/2017

**Schedule A, Part II, Line 1(e)**

Description	Amount
LOUISVILLE LIVE - GRANTS	370
LOUISVILLE-LIVE - GRANTS	7,500
LOUISVILLE LIVE -PUBLIC SUPPORT	26,778
HOLIDAY HOME TOUR SPONSORS	8,755
OPERATING GRANTS	2,000
CENTRAL PARK IMPROVEMENT	3,800
ST JAMES COURT	
LOUISVILLE METRO	
THIRD ST	
GARVIN GATE - CENTRAL PARK	
VARIOUS - CENTRAL PARK	
SOUTH FOURTH ST	
2ND ST	
OTHER PUBLIC SUPPORT	10,584
LOUISVILLE /JEFFERSON COUNTY	
1300 ASSOCIATION	
3RD ST	
UK INTERN SUPPORT	
RON HARRIS	
KOSAIR	
GENSCAPE	
TOM & NANCY WOODCOCK	
SUPPORT FOR STREET SIGNS	
ADVERTISING	136
Total	59,923

**Schedule A, Part II, Line 12 - Current year**

Description	Amount
OLD LOUISVILLE LIVE	4,311
OLD LOUISVILLE TOURS	10,224
COMMUNITY GARDEN	825
HOLIDAY HOUSE TOURS	38,851
OLD LOU BREW	6,391

Federal Statements

FILE: 123172017

Schedule A, Part II, Line 12 - Current year (continued)

Description	Amount
VICTORIAN TEA	\$ 2,628
GIFT SHOP/T-SHIRTS	446
STAINED GLASS WORKSHOP	130
BANK INTEREST	1
RENTAL	412
Total	\$ 64,219



*Old Louisville  
Neighborhood Council*

The Old Louisville Neighborhood Council, Inc.

On July 22, 2014, the board of directors for the Old Louisville Neighborhood Council (Federal EIN # [REDACTED], a 501 (c)4 tax-exempt nonprofit organization, unanimously voted to dissolve the corporation. On August 22, 2014, the Articles of Dissolution were filed with the Commonwealth of Kentucky. All assets previously controlled by the Old Louisville Neighborhood Council were transferred to the Old Louisville Information Center, a 501 (c)3 tax-exempt nonprofit organization.

On July 22, 2014, the board of directors for the Old Louisville Information Center (Federal EIN # [REDACTED] adopted an amendment of Article I, effectively changing the corporation's name to the Old Louisville Neighborhood Council, Inc. On August 22, 2014, articles of amendment were filed with the Commonwealth of Kentucky.

Old Louisville Neighborhood Council, INC Executive Committee as of January 2015:

Howard Rosenberg, Chairman  
Jason Scott, Vice Chairman  
Leah Wiseman, Secretary  
Eric Cowley, Treasurer

Phone: (502) 635-5244

Address: The Old Louisville Neighborhood Council, Inc.  
1340 S. 4<sup>th</sup> Street in Central Park  
Louisville, KY 40208-2350

Email: [olnc@bellsouth.net](mailto:olnc@bellsouth.net)

Website: [www.oldlouisville.org](http://www.oldlouisville.org)

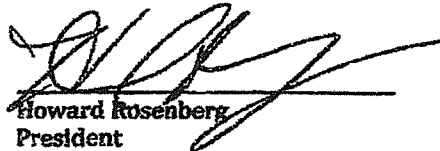
00730 0450

0075161.09 amcray  
DIS  
Allison Lundergan Grimes  
Kentucky Secretary of State  
Received and Filed:  
8/19/2014 11:12 AM  
Fee Receipt: \$5.00

ARTICLES OF DISSOLUTION  
OF  
THE OLD LOUISVILLE NEIGHBORHOOD COUNCIL, INC.

1. The name of the Corporation is The Old Louisville Neighborhood Council, Inc.
2. The Resolution to Dissolve and the Corporation's Plan of Distribution were adopted at a meeting of the members held on July 22, 2014 at which a quorum was present, and such resolution and plan received at least two-thirds (2/3) of the votes that members present at such meeting or represented by proxy were entitled to cast.
3. All debts, obligations and liabilities of the Corporation have been paid and discharged.
4. The Corporation's assets have been distributed, in accordance with the Corporation's Articles of Incorporation and its Plan of Distribution, to The Old Louisville Information Center, Inc., an organization described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended.
5. All of the Corporation's remaining property and assets have been transferred, conveyed or distributed in accordance with the provisions of KRS 273.161 to KRS 273.390.
6. There are no suits pending against the Corporation in any court.

I declare under penalty of perjury under the laws of Kentucky that the foregoing is true and correct.

  
Howard Rosenberg  
President

Date: July 29, 2014

61191074.1

Document No.: DN2014104423  
Lodged By: WYATT TARRANT COMBS  
Recorded On: 08/20/2014 09:56:11  
Total Fees: 11.00  
Transfer Tax: .00  
County Clerk: ROBBIE HOLSCLOW-JEFF CO KY  
Deputy Clerk: EVERAY

END OF DOCUMENT

00730457

0075161.09 amrcray  
AMD  
Alison Lundergan Grimes  
Kentucky Secretary of State  
Received and Filed:  
8/19/2014 11:12 AM  
Fee Receipt: \$8.00



COMMONWEALTH OF KENTUCKY  
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Amendment (Domestic Nonprofit Corporation)	NPA
---	---	-----

Pursuant to the provisions of KRS 14A and KRS Chapter 273, the undersigned applies to amend articles and, for that purpose, submits the following statements:

1. The name of the corporation on record with the Office of the Secretary of State is:  
**The Old Louisville Neighborhood Council, Inc.**

(The name must be identical to the name on record with the Secretary of State.)

2. The text of each amendment adopted: Article IV (4): Upon dissolution of the Council, the Board of Directors shall, after paying or making provision for the payment of all liabilities of the Council, dispose of all the assets of the Council exclusively for the purpose of the Council in such manner, or to such organization or organizations established and operated exclusively for charitable purposes as shall at the time qualify under Sec. 501(c)(3) of the Internal Revenue Code of 1986, as amended, as the Board of Directors shall determine.

3. The date of adoption of each amendment was July 22, 2014

4. Check either a, b or c (whichever is applicable):

- a.  The amendment(s) was (were) duly adopted by a quorum present at such meeting and that such amendment received at least two-thirds (2/3) of the votes which members present at such meeting or represented by proxy were entitled to cast.
- b.  The amendment(s) was (were) duly adopted by consent in writing and was (were) signed by all members entitled to vote with respect thereto.
- c.  The amendment(s) was (were) duly adopted by the board of directors and such amendment(s) received the vote of a majority of the directors in office since there are no members or members entitled to vote.

5. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is \_\_\_\_\_  
(Delayed effective date and/or time)

I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.

Howard Rosenberg  
Printed Name

President  
Title

July 22, 2014  
Date

Signature of Officer or Chairman of the Board

(01/12)

Document No.: DN2014104422  
Lodged By: WYATT TARRANT COMBS  
Recorded On: 08/20/2014 09:55:39  
Total Fees: 11.00  
Transfer Tax: .00  
County Clerk: BOBBIE HOLSCLAW-JEFF CO KY  
Deputy Clerks: EVENAY

END OF DOCUMENT



007300459

0177929.09 amoray  
AMD  
Allison Lundergan Grimes  
Kentucky Secretary of State  
Received and Filed:  
8/19/2014 11:15 AM  
Fee Receipt: \$8.00



COMMONWEALTH OF KENTUCKY  
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 594-3490 www.sos.ky.gov	<b>Articles of Amendment</b> (Domestic Nonprofit Corporation)	<b>NPA</b>
---	--	------------

Pursuant to the provisions of KRS 14A and KRS Chapter 273, the undersigned applies to amend articles and, for that purpose, submits the following statements:

1. The name of the corporation on record with the Office of the Secretary of State is:

**The Old Louisville Information Center, Inc.**

(The name must be identical to the name on record with the Secretary of State.)

2. The text of each amendment adopted: Article I: The name of the corporation shall be: The Old Louisville Neighborhood Council, Inc.

3. The date of adoption of each amendment was July 22, 2014

4. Check either a, b or c (whichever is applicable):

- a.  The amendment(s) was (were) duly adopted by a quorum present at such meeting and that such amendment received at least two-thirds (2/3) of the votes which members present at such meeting or represented by proxy were entitled to cast.
- b.  The amendment(s) was (were) duly adopted by consent in writing and was (were) signed by all members entitled to vote with respect thereto.
- c.  The amendment(s) was (were) duly adopted by the board of directors and such amendment(s) received the vote of a majority of the directors in office since there are no members or members entitled to vote.

5. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is August 4, 2014

(Delayed effective date and/or time)

I declare under penalty of perjury under the laws of Kentucky that the foregoing is true and correct.

**Howard Rosenberg**

**President**

**July 22, 2014**

Signature of Officer or Chairman of the Board

Printed Name

Title

Date

(01/12)

Document No.: DNE2014104424  
Lodged By: WYATT TARRANT COMBS  
Recorded On: 08/20/2014 09:56:27  
Total Fees: 11.00  
Transfer Tax: .00  
County Clerk: BOBBIE HOLSCLAW-JEFF CD KY  
Deputy Clerk: EVENAY

END OF DOCUMENT

FILED IN OFFICE  
A 29567

JUN 2 1983

ORIGINAL COPY FILED  
SECRETARY OF STATE OF KENTUCKY  
FRANKFORT, KENTUCKY

BREMER BROTHERS, CORP.  
BY *DS* D.C.

ARTICLES OF INCORPORATION

OF

MAY 16 1983

THE OLD LOUISVILLE INFORMATION CENTER, INC.

*Carroll J. Hill*  
SECRETARY OF STATE

I, THE UNDERSIGNED, for the purpose of forming a non-profit, non-stock corporation; under and pursuant to the laws of the Commonwealth of Kentucky, and more particularly Chapter 273 of the Kentucky Revised Statutes, hereby certify as follows:

ARTICLE I

The name of the Corporation shall be:

THE OLD LOUISVILLE INFORMATION CENTER, INC.

ARTICLE II

The duration of the Corporation shall be perpetual.

ARTICLE III

The principal place of business of the Corporation is to be located at 1340 So. Fourth Street (in Central Park), Louisville, Kentucky, 40208 and such other places in said city or elsewhere as its Board of Directors may by resolution designate.

The name and address of the registered agent for service of process is:

Richard L. Janes  
1340 So. 4th Street (in Central Park)  
Louisville, Kentucky 40208

ARTICLE IV

The Corporation is organized and shall be operated exclusively for charitable and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1954 (or corresponding provisions of any later Federal tax laws), including

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

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

- 1) To operate a resource center for the residents of the Old Louisville neighborhood which will provide a wide variety of educational material, information, and other services to help them meet social, health, welfare, educational and cultural needs.
- 2) To engage in educational and charitable activity designed to lessen neighborhood tensions and to encourage and promote community cooperation and pride.
- 3) To engage in educational and charitable activity designed to combat neighborhood deterioration and to promote community revitalization and development.
- 4) To encourage, promote, and provide activity for neighborhood youth designed to instill in them a friendly and cooperative spirit and to advance their educational and cultural development.

#### ARTICLE V

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

#### ARTICLE VI

The Corporation shall be empowered to do all acts reasonable and necessary and within the laws of the State of Kentucky, in particular those enumerated in KRS 273.171, to further its purposes set out in Article IV, except as follows and as otherwise stated in these Articles:

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

b) Notwithstanding, any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1954 or the corresponding provisions of any subsequent Federal tax laws. If and so long as the Corporation is a private foundation as defined in Section 509(a) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws:

1) The Corporation shall distribute its income for each taxable year at such time and in such manner as not to become subject to the tax on undistributed income imposed by Section 4942 of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

2) The Corporation shall not engage in any act of self-dealing as defined in Section 4941(d) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

3) The Corporation shall not retain any excess business holdings as defined in Section 4943(c) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

4) The Corporation shall not make any investments in such manner as to subject it to tax under Section 4944 of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

5) The Corporation shall not make any taxable expenditures as defined in Section 4945(d) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

#### ARTICLE VII

The names and addresses of the incorporators are:

INCORPORATOR

MAILING ADDRESS

Richard L. Janes

1409 So. Brook Street  
Louisville, Kentucky 40208

#### ARTICLE VIII

The names and addresses of the members of the initial Board of Directors are:

Richard L. Janes  
1409 So. Brook Street  
Louisville, Kentucky 40208

Carolyn Beall  
1216 So. Floyd Street  
Louisville, Kentucky 40203

Rose Greenough Nett  
940 So. 6th Street  
Louisville, Kentucky 40203

#### ARTICLE IX

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

#### ARTICLE X

The officers and members of this Corporation shall not be held personally liable for any debt or obligation of the Corporation solely because of their position as officers and members of the Corporation.

#### ARTICLE XI


In the event of dissolution of the Corporation, the Board of Directors shall, after paying or making provision for the payment of all liabilities of the Corporation, dispose of all assets of the Corporation exclusively for the purposes of the Corporation, in such manner, or to such organizations organized and operated exclusively for charitable or educational purposes as shall at the time qualify as an exempt organization under Section 501(c)(3) of the Internal Revenue Code of 1954 (or corresponding provisions of any later Federal tax laws), as the Board of Directors shall determine.

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

#### ARTICLE XII

Amendments to these Articles shall be made pursuant to the provisions of K.R.S. 273.263.

IN TESTIMONY WHEREOF, witness the signatures of the Incorporator of this Corporation on this 2 day of May, 1983.



Before me, the undersigned authority, personally appeared RICHARD L. JANES and being first duly sworn, acknowledged that he was an incorporator of the aforementioned Corporation, and that he signed the foregoing Articles of Incorporation as his free act and deed.

Witness my signature and seal of office this 2 day of May, 1983.

My Commission Expires: 8-16-86

  
NOTARY PUBLIC, STATE-AT-LARGE,  
KENTUCKY

This Document Prepared By:

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# Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

<b>Print or type.</b> <b>See Specific Instructions on page 3.</b>	<p><b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.                  Old Louisville Neighborhood Council</p> <p><b>2</b> Business name/disregarded entity name, if different from above</p> <p><b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p> <input type="checkbox"/> Individual/sole proprietor or single-member LLC                         <input 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) ▶ _____  <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small> </p> <p><input checked="" type="checkbox"/> Other (see instructions) ▶ <b>Nonprofit organization exempt under IRS Code 501(c)(3)</b></p>	<p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p><b>5</b> Address (number, street, and apt. or suite no.) See instructions.                  1340 S 4th Street</p> <p><b>6</b> City, state, and ZIP code                  Louisville, KY 40208</p> <p><b>7</b> List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

## 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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> </tr> </table>				
<b>or</b>				
<b>Employer identification number</b>				

## Part II Certification

Under penalties of perjury, I certify that:

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

<b>Sign Here</b>	Signature of U.S. person <i>[Handwritten Signature]</i> <b>Exec. Director</b>	Date <b>7/25/18</b>
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## General Instructions

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

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### 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, later.*