## NEIGHBORHOOD DEVELOPMENT FUNDFICE OF METRO COUNCIL CLERK Not-for-Profit Transmittal and Approval Form

	DATE 11:0:4 TIME: 9
Applicant/Program: 2Not1: Fatherhoo	d & Families, Inc.
and to encourage the involvement of fa organization is requesting funding for t both of which will take place in November	Fatherhood & Families, Inc. is a non-profit organization that children by implementing strategies to keep families together athers, with the primary focus on low in communities. The heir annual Fatherhood Conference and Mother's Forum, ber. The organization is requesting \$6000 to cover the cost rence and 30 participants for the motherhood conference.
Is this program/project a fundraiser? Is this applicant a faith based organization? Does this application include funding for su	Yes No Yes No No ub-grantee(s)?  Yes No No
The Council guidelines and letties	I Development Fund Application and have found it complete and st approval of funding in the following amount(s). I have read the to be furthered by the funds requested and I agree that the public d the disclosure section below, if required.
District # Primary Sponsor Signature	Amount Date 10.29.19
Primary Sponsor Disclosure List below any personal or business relation organization, its volunteers, its employees or	ship you, your family or your legislative assistant have with this r members of its board of directors.
Approved by:	
Appropriations Committee Chairman	n Date
Clerk's Office Only:	
D	Committee Assess I. I.A.
Original Appropriation:	Committee Amended Appropriation:  Council Amended Appropriation:
1 Page Effective February 2014	OFFICE OF METRO COUNCIL CLERK REVIEWED

Applicant	t/Program:		
	Additional Disclo	sure and Signatu	ıres
List below	al Council Office Disclosure any personal or business relationship you, on, its volunteers, its employees or member	your family or your le	agiglativa assists at lease 34
District #	Barbar Shankling Council Member Signature	\$\frac{1}{252}\$ Amount	9/18/14 Date
District #	Marke Butture Council Member Signature	#257 Amount	10/9/14 Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date

this

NDF NON-PROFIT APPLICATION CHECKLIST	
Legal Name of Applicant Organization: 2Not1: Fatherhood & Families, Inc.	
Program Name: 6 <sup>th</sup> Annual Fatherhood Conference & 8 <sup>th</sup> Annual Mother's Forum Request Amount:6,000	Yes/No/N
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?	Yes
Request form: Is the funding proposed less than or equal to the request amount?	Yes
<b>Request form:</b> Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?	Yes
Application Page 1: Has prior Metro funds committed/granted been disclosed?	Yes
Application Page 1: Is the application properly signed and dated by authorized signatory?	Vec
<b>Application Page 3:</b> Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?	Yes
<b>Application Pages 3 – 5:</b> Is the proposed public purpose of the program well-documented?	Yes
<b>Application 4:</b> Is there adequate documentation of how the proceeds of the fundraiser will be spent?	N/A
Application Budget Page 6: Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for "Metro, Non Metro and Total" expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?	Yes
Faith Based Organizations: Is the signed Faith Based Form signed and included?	NA
Jefferson County Only: Will all funding be spent in Louisville/Jefferson County?	Yes
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?	NA
Good Standing: Is the entity in good standing with:  Kentucky Secretary of State – include Secretary of State website information on organization Louisville Metro Government – check OMB monthly report filed in Council Financial Reports Internal Revenue Service – most recent Form 990 included	Yes
<b>Separate Taxing Districts:</b> If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?	NA
Small Cities: Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)	NA
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?	NA
IRS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes
Operating Budget: Is the organization's current fiscal year operating budget included?	Yes
Ordinance Required: Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.	No
Board Members: Is the entity's board member list (with term length/term limits) included?	Yes
Staff: Is a list of the highest paid staff included with their expected annual personnel costs?	Yes
Annual Audit: Is the most recent annual audit (if required by organization) included?	yes
Rent Requests: Is a copy of signed lease included?	NA
Articles of Incorporation: Are the Articles of Incorporation of the organization included?	Yes
RS Form W-9: Is the IRS Form W-9 included?	Yes
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?	yes
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement acluded (if required by the organization)?	NA
Prepared by: Keidra King Date: 11/5/201	1



		SECTION 1 - APP	LICANT INFORMAT	TION			
Legal Name of App	licant Organ	nization.					
(as listed on: http://www.sos.ky.gov/business/records) 2NOT1: Fatherhood & Families, Inc.							
Main Office Street & Mailing Address: 1626 West Chestnut Street, Louisville, KY 40203							
Website: 2NOT1.or							
Applicant Contact:	Shawr	Shawn Gardner Title: President & Founder					
Phone:	(502) 6	27-0356					
Financial Contact: Dr. Georgia Turner Title: Board Chair							
Phone: (502) 396-9630							
Organization's Rep	resentative	who attended NDF Train	ning:	, , , ,			
GEO	OGRAPHICA	L AREA(S) WHERE PROG	GRAM ACTIVITIES	ARE (WILL BE) PROVIDED			
Program Facility Lo	cation(s):	Russell Avea, West B					
Council District(s):		1,2,3,4,5,6,15	Zip Code(s):				
	SECTI	ON 2 – PROGRAM REQU					
PROGRAM/PROJEC				rhood Conference and 8th Annual Mother's Forum			
Total Request: (\$)	6,000			m) in previous year: (\$) 2,500			
Purpose of Request	(check all t	hat apply):					
		erally cannot exceed 33%					
		s/events for direct benef					
Capital Pro	ject of the	organization (equipment	t, furnishing, buildi	ng, etc)			
The Following are R	equired Att	achments:					
IRS Exempt Status D		1 Letter	Signed lease if	rent costs are being requested			
Current Year Project			IRS Form W9				
Current financial st		e term & term limits	Evaluation form	ns if used in the proposed program			
Most recent IRS For		20.11	Annual audit (if	required by organization)			
Articles of Incorpora		20-н		ganization Certification Form, if required			
A CONTRACT OF THE PROPERTY OF		endor if request is for	Staff including	the 3 highest paid staff			
capital expense			***				
For the current fiscal	year endin	g June 30, list all funds a	ppropriated and/o	or received from Louisville Metro			
dovernment for this	or any otne	r program or expense, in	icluding funds rece	ived through Metro Federal Grants, lopment Funds). Attach additional			
sheet if necessary.	1	seanen Appropriation (N	eighborhood Deve	iopment Funds). Attach additional			
Source:	Mayor's He	ealthy Hometown Grant	Amount: (\$)	3,835.00			
Source:	Healthy Star	t Fatherhood Discussions	Amount: (\$)	2,831.00			
Source:			Amount: (\$)				
Has the applicant con	tacted the	BBB Charity Review for p		Yes No			
		narity Review Standards?					

Page 1 Effective April 2014



#### SECTION 3 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

Mission: The purposes of 2NOT1 will be to promote the safety and well-being of children by implementing strategies to keep families together and to encourage the involvement of fathers, with a primary focus on low income communities, through the following:

- 1. Educate low income individuals and communities on the subject of fatherhood and the barriers that impede the successful interaction of father and child;
- 2. Enhance and safeguard the interests of children and to protect and improve their relationships with their fathers and other significant males in their lives, within and outside the family;
- 3. Generate a pool of positive male role models to mentor other youth and fathers that can benefit from the support;
- 4. Serve as an educational and networking vehicle for men's, father's, and children's organizations with a focus on family through an annual conference on fatherhood:
- 5. Serve as a repository and clearinghouse for all information relating to fatherhood issues;
- 6. Engage in other charitable and educational activities consistent with the above purposes.



#### SECTION 4 - PROGRAM/PROJECT NARRATIVE

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

The 6th Annual Fatherhood Conference will bring the community together to focus on barriers that hinders responsible fathering. The conference will allow fathers and fatherhood practitioners to network and build support systems. The conference will allow community leaders, organizations, and stakeholders the opportunity to address responsible fatherhood. Additionally, the conference will promote responsible fatherhood and will allow fathers and those serving fathers to meet experts in the field. The conference is a one-day event proposed to be held on Friday, November 14, 2014. See attached flier.

The project is the 8th Annual Mother's Forum. The forum is a one-day event proposed to be held on Saturday, November 22, 2014. It will bring together mothers, grandmothers, aunts, and any woman raising children to address the barriers associated with raising children as a single parent. The attendees will fellowship with each other while receiving support and resources to assist them in their efforts. The activity will address the struggles of being a single parent (mother). See attached flier.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s): Fatherhood Conference: The funding will be used to pay for participant scholarships to cover registration fees. Funds will be used to provide \$75 scholarships for 60 Fatherhood Conference participants to attend the event.

Success will be evaluated by the number of participants, the resources provided, assessments and evaluations and networking opportunities for the attendees. Success will be gaged by an ongoing commitment to the work with the mothers various times throughout the year.

Mother's Forum: The funding will be used to pay for participant scholarships to cover registration fees. Funds will be used to provide \$50 scholarships for 30 Mother's Forum participants.

Success will be evaluated by the number of participants, the resources provided, assessments and evaluations and networking opportunities for the attendees. Success will be gaged by an ongoing commitment to the work with the mothers various times throughout the year.

Page 3 Effective April 2014



C: If this request is a fundraiser, please detail how the proceeds will be spent: This request is not for a fundraiser.
D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date
and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:
Effective October 24, 2013, reimbursements should not be made unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):
<ul> <li>✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan</li> <li>✓ Attach a copy of cancelled checks to provide proof of purchase of activities associated with the work plan</li> </ul>
Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.
■ The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement: ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.
The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the country
agreement.

Page 4 Effective April 2014



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 6th Annual Fatherhood Conference will be a venue for fathers and fatherhood practitioners to network and build support systems. The conference will allow community leaders, organizations, and stakeholders the opportunity to address responsible fatherhood. Additionally, the conference will promote responsible fatherhood and will allow fathers and those serving fathers to meet experts in the field.

The 8th Annual Mother's Forum will be a venue for mother's and others who care for children to will gain knowledge from peer parenting. At the forum, these caregivers will have access to resources from presenters, vendors, and service providers.

There will be workshops "knowledge sessions". At the end of the forum and the conference, participants will be asked to complete an evaluation form. The evaluation form will seek feedback on the usefulness of the forum and the effectiveness of the presenter. The evaluations will also ask general questions about barriers faced, support and services needed, and suggestions for next year's forum.

The evaluations will be gathered by a volunteer and submitted to a University of Louisville professor who has agreed to review and analysis the data gathered. After which, a report will be generated and email/mailed to event participants, supporters, and community stakeholders.

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.

New Legacy Reentry Corporation is a faith based community organization that is committed to breaking the cycle of chronic recidivism for ex-offenders (men and women) who were previously incarcerated for non violent, nonsexual crimes. The organization will assist with recruitment and conference coordination

Plymouth is a community-based organization located in the Russell neighborhood. Plymouth provides services to address the needs of individuals, families, and youth. Plymouth allows 2NOT1 to hold community meetings and will assist with recruitment efforts. The 7th Annual Mother's Forum will be held at Plymouth Community Center.

Louisville Metro Health and Wellness Healthy Start program seeks to reduce infant mortality in targeted areas of west Louisville. Infant mortality rates in these areas range between 1.5 and 2 times higher than those of Metro Louisville as a whole. Healthy Start primarily works with mothers and has recently started working with fathers. Healthy Start will facilitate a workshop, recruit participants, and assist with the coordination of the events.

The Catholic Enrichment Center is a community gathering place where people are able to find the answers to many of their questions concerning enhancing one's life from a holistic perspective.

Page 5 Effective April 2014



## SECTION 5 - PROGRAM/PROJECT BUDGET SUMMARY

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

	Column 1	Column 2	Column (1+2)=3
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies		\$ 735	\$735
D: Telephone		<b>4700</b>	ΨΙΟΌ
E: In-town Travel			
F: Client Assistance (Attach Detailed List)	\$6,000	See Section C	\$6,000
G: Professional Service Contracts		\$2,400	\$2,400
H: Program Materials		\$1,000	\$1,000
: Community Events & Festivals (Attach Detail List)		Ψ1,000	Ψ1,000
l: Small Equipment			
K: Capital Equipment			
: Other Expenses (Attach Detail List)			
*TOTAL PROGRAM/PROJECT FUNDS	\$6,000	\$4,135	\$10,135
% of Program Budget	59.2 %	40.8 %	100%

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

Other State, Federal or Local Government	on o i unius.
United Way	
Private Contributions (do not include individual donor names)	\$4,135
Fees Collected from Program Participants	41,100
Other (please specify)	4,470 (in-kind services/space)
Total Revenue for Columns 2 Expenses	

<sup>\*</sup>Total of Column 1 MUST match "Total Request on Page 1, Section 2"

Page 6 Effective April 2014

<sup>\*\*</sup>Must equal or exceed total in column 2.



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

	Value of Contribution	Method of Valuation			
(2) spaces and utilities	\$3,170	Statement from Center			
10 volunteers X 10 per hour @ 6 h	\$ 600	invoices			
7 facilitators/volunteer x \$25 per h	\$ 700	invoices			
Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution &Other In Kind)  \$4,470  Statements and invoices					
DONOR INFORMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION. VOLUNTEERS NEED NOT BE ISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NOTING HOW MANY HOURS PER PERSON PER WEEK					
RSON PER WEEK	ON ONE LINE AS A TOTAL NO	TING HOW MANY HOURS PER			
RSON PER WEEK  ency Fiscal Year Start Date:  es your Agency anticipate a significant increase of	or decrease in your budget f	TING HOW MANY HOURS PER			
The state of the s	ON ONE LINE AS A TOTAL NO	TING HOW MANY HOURS PER			
ency Fiscal Year Start Date:  es your Agency anticipate a significant increase of the projected for next fiscal year?  NO	or decrease in your budget f	TING HOW MANY HOURS PER			
ency Fiscal Year Start Date:  es your Agency anticipate a significant increase of the projected for next fiscal year?  NO	or decrease in your budget f	TING HOW MANY HOURS PER			

Page 7 Effective April 2014



#### **SECTION 6 – CERTIFICATIONS & ASSURANCES**

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

#### Standard Assurances

- 1. Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
- 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
- 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.
- Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
- The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue 5. Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
- 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.
- Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal 7.
- Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
- Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
- 10. Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
- 11. Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the

#### Standard Certifications

- The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
- The Agency has a written Affirmative Action/Equal Opportunity Policy.
- 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.
- 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.
- 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 of employees has with any Councilperson, Councilperson's family, Councilperson's staff or any Louisville Metro Government employee.

#### SECTION 7 - CERTIFICATIONS & ASSURANCES

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

Signature of Legal S	ignatory: S	Shawol Carda			
		Shawn L. Gardn	er / /4	Date:	09-16-2014
Legal Signatory: (ple	ease print):	Drawn	I andre	Title:	President and Founder
Phone:		Extension:	Email:		

Page 8

Effective April 2014

Name	Title	d of Directors To	
Shawn Gardner	President/Founder	Continual	Term Limit Continual
Georgia Turner	Board Chair	2 years	October 31, 2013 –
Galen Demus	Board Member	2 years	October 31, 2015 October 31, 2013 –
Herlon Robinson	Board Member	1 year	October 31, 2015 October 31, 2013 –
Kevin Cosby	Board Member	1 year	October 31, 2014 October 31, 2013 –
William Samuels	<b>Board Member</b>	1 year	October 31, 2014 October 31, 2013 –
Nicole Compton	Board Member	1 year	October 31, 2014 October 31, 2013 –
Brandon Lawrence	Board Member	1 year	October 31, 2014 October 31, 2013 – October 31, 2014

# Motherhood

The Joys and Pains of Motherhood!

9:00 am Location: Hotel Louisville
Address: 120 W Broadway, Louisville, KY
Email: 2NOW info@2NOT) one
Phone: 502 622.02.6

The forum will offer co-parenting workshops, entertainment, invaluable resources, relaxation exercies, affirmations, food activities for children, and fabulous gifts.



2NOT1 Fatherhood & Families, Inc.

6TH ANNUAL FATHERHOOD CONFERENCE



SAVE THE DATE!

MUHAMMAD ALI CENTER 144 N 6TH ST. LOUISVILLE, KY 40202

TIME OF EVENT 8:30AM TO 4:30PM

\$75 CONFERENCE COST COVERS CONFERENCE MATERIAL AND MEALS EMAIL: 2NOTIINFO@2NOTI.ORG PHONE: 502.627.0356

SPECIAL APPRECIATION TO THE SPONSORS OF THIS YEARS CONFERENCE; PLYMOUTH COMMUNITY CENTER, MUHAMMAD ALI CENTER, COUNCILMAN DAVID TANDY



#### Evaluation Form

#### Annual 2NOT1: Fatherhood and Families Fatherhood Conference

ate:		Worksho	p #/ Pane	l Title:					
		Please cl	eck all t	hat apj	oly.				
		SEX:	F M						
	PARENT □	COUNSE	LOR 🗆		ADI	TRIVIN	RATO:	R□	
		PROFESS	IONAL [		LOC	AL RE	SIDEN	ТП	
1.	List each presenter's (Circle the appropriate AB.	te one)	High 5	or the part	nel/works 3	hop. 2 2	Low 1	N/A N/A	
	C			4	3	2	1	N/A	
	D			4	3	2	1		
							_	N/A	
	E			4	3	2	1	N/A	
2.	Rate the quality of thi		el/worksho	p based	on the fol	lowing:			
	A. Knowledge of the	subject matter	5	4	3	2	1	N/A	
	B. Appropriateness		5	4	3	2	1	N/A	
	C. Length		5	4	3	2	1	N/A	
	D. Interest		5	4	3	2	1	N/A	
3.	What future themes w	ould you like to h	ave the co	nference	address?				
4.	Please make other cor	nments and sugge	stions. Th	ank you	very muc	n for you	г соорега	ation!!	_
									-
ann			and the second						

Date: SEP 2 9 2009

2 NOT 1 PATHERHOOD & FAMILIES INC C/O SHAWN GARDNER 1635 PLYMOUTH CT STE 11 LOUISVILLE, KY 40203 Prolower Identification Number:

DLN:

17053237339039 Contact Person: LING YEE

ID# 95201

Contact Telephone Number: (877) 829-5500

Accounting Period Ending:

December 31

Public Charity Status:

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

Form 990 Required:

Yes

Effective Date of Exemption:

February 2, 2007

Contribution Deductibility:

Yes

Addendum Applies:

Ma

#### Dear Applicant:

Service and the service and a service and a

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

e tur turqen kom kitur gingam. Kerimparan irizi di kitutawa muziki di kalin kakemalari kita ini kanifakana

Letter 947 (DO/CG)

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,



Robert Choi Director, Exempt Organizations Rulings and Agreements

Enclosure: Publication 4221-PC

Letter 947 (DO/CG)

## 2NOT1 Operating Budget

## 2014 Projected Annual Budget

Staff	Estimated	Actual
President Salary	\$50,000.00	\$0.00
Administrative Asst	\$18,000.00	\$0.00
VP Programs (part-time)	\$10,000.00	\$0.00
Case Manager (part-time)	\$15,000.00	\$0.00
Total	\$93,000.00	\$0.00

otal	\$0.00	\$0.00

Publicity	Estimated	Lauton
Graphics work	\$2,400.00	\$0.00
Photocopying/Printing	\$1,500.00	\$0.00
Total	\$3,900.00	\$0.00

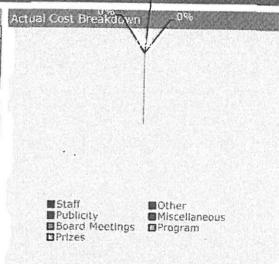
Total	\$7,800.00	\$0.00
Insurance	\$2,400.00	\$0.00
Stationery supplies	\$1,000.00	\$0.00
Transportation	\$2,000.00	\$0.00
Telephone	\$2,400.00	\$0.00
Miscellaneous	Estimated	Actual

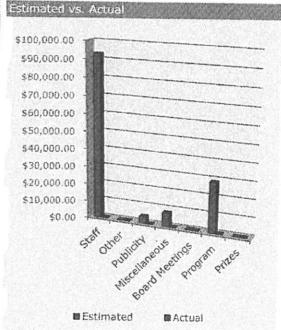
Estimated	Actua
\$300.00	\$0.00
\$0.00	\$0.00
\$300.00	\$0.00
	\$300.00

Program	Estimated	Actua
Conference	\$6,450.00	\$0.00
Mother's Forum	\$3,685.00	\$0.00
Father's Day Picnic	\$3,500.00	\$0.00
TFU	\$15,000.00	\$0.00
Other		
Total	\$28,635.00	\$0.00

Prizes	Estimated	Actual
a constant	\$0.00	\$0.00
Total	\$0.00	\$0,00

Total Expenses	Estimated	Actual
	\$133,635.00	\$0.00





Made in Office 2007 for office 2007.com

## 2NOT1 Operating |

raissians		Annual E				
Estimated	Actual			Equipment	Action	Invaine Companison
10	ol	Adults @	\$10,000.00	****	10.000	
	0	Children @	\$5,000.00	\$100,000.00 \$25,000.00	\$0.00	
1	0	Other @	\$875.00		\$0.00	
2 CO 1897 SO 200 O 180 O 1			4075.00	\$875.00 \$125,875.00	\$0.00	
				\$125,875.00	\$0.00	\$140,000.00
in program Estimated	Manager 1	Company of the second	SECTION AND ADDRESS	Encontect	Att (sel	\$120,000.00
100	Actual	Covers @	222.00.7	The second secon	a continue	The second secon
100	0	Half-pages @	\$20.00	\$2,000.00	\$0.00	\$100,000.00
50	0	Quarter-pages @	\$10.00	\$1,000.00	\$0.00	\$80,000.00
		Sagirei-hades @[	\$5.00	\$250.00	\$0.00	111111111111111111111111111111111111111
Esperature and the second				\$3,250.00	\$0.00	560,000.00
ilutors/sender			Residence of the	Established.	Actual	\$40,000.00
Estimated	Actual	_//		Service of South School of the South	A STATE OF THE PARTY OF THE PAR	
200	0	Large booths @	\$40.00	\$8,000.00	\$0.00	\$20,000.00
200	0	Med. booths @	\$25.00	\$5,000.00	\$0.00	\$0.00
		Small booths @		\$0.00	\$0.00	
				\$13,000.00	\$0.00	Barrel and De State of the Stat
ាតនៅអ្នកទុ/៤១៤	llors	A PRODUCTION OF THE PARTY OF TH		Pathons	NAME OF THE PARTY	kden in prob thereo martin
Estimated	Actual	AND THE PERSON OF THE PERSON O	CHECK STORY		<b>≯</b> Clust	egg, miles, more
45 50	0	Items @	\$100.00	\$4,500.00	\$0.00	Bankland Berger Bankland Bankland Bankland
50	0	Items @	\$30.00	\$1,500.00	\$0.00	EDTO
0	0	Items @	\$25.00	\$1,250.00	\$0.00	
Di .	0	Items @	\$5.00	\$0.00	\$0.00	数 Estimated 数 Actual
				\$7,250.00	\$0.00	
il Income	PANNON			Pitimaled	Autura (	
			i	\$149,375.00	\$0.00	

## 2NOT1 Operating Budget

## 2014 PROFIT/LOSS SUMMARY

Total income	Estimates		
Total expenses	\$149,375.00	\$0.00   Frofit vs. Lausa	
To the second second	\$133,635.00	\$0.00 \$200,000.00	
Total profit (or lo	85)	\$150,000.00	
	\$15,740.00	\$100,000.00	≥ Total income
	the state of the s	\$0.00	

### Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of

0656609 Alison Lundergan Grimes

KY Secretary of State Received and Filed

6/30/2014 6:51:21 PM Fee receipt: \$15.00

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

#### **Annual Report Online Filing**

ARP

NARP

Company:

Company ID:

State of origin: Formation date:

Date filed:

Fee:

2 NOT 1: FATHERHOOD & FAMILIES, INC.

0656609 Kentucky

2/2/2007 12:00:00 AM 6/30/2014 6:51:21 PM

\$15.00

#### **Principal Office**

1626 WEST CHESTNUT STREET ATTN: 2NOT1 1626 W CHESTNUT ST LOUISVILLE, KY 40203

#### Registered Agent Name/Address

SHAWN GARDNER 1635 PLYMOUTH COURT **APT. 11** LOUISVILLE, KY 40203

#### **Current Officers**

Chairman

Georgia Turner

1626 West Chestnut St. Louisville, KY 40203

#### **Directors**

Director Director

Galen Demus Nicole Compton Director Kevin Cosby Director William Samuels

Director Director

Brandon Lawrence Herlon Robinson

#### Signatures

Signature Title

Georgia Turner Chairman

### **Financial Statement**

## 2NOT1: Fatherhood & Families, Inc.

	Historical 2013	Projected 2014
Asset/Income	American Company of the Company of t	<b>4014</b>
Grants	\$ 5,000	
Program Ads	\$ 500	\$ 125,875
Exhibitors/Vendors	\$ 1,300	\$ 3,250
Scholarships/Donations		\$ 13,000
Total Assets		\$ 7,250
	\$ 11,800	\$ 149,375
Liabilities	1	
Staff	\$ 0	¢ 00.000
Publications	\$ 600	\$ 93,000
Telephones	\$ 1,500	\$ 3,900
Transportation	\$ 0	\$ 2,400
Stationery Supplies	\$ 500	\$ 2,000
Board Meetings	\$ 0	\$ 1,000 \$ 300
Conference	\$ 3,200	
Mother's Forum	\$ 2,500	\$ 6,450
Father's Day Picnic		\$ 3,685
FU	1	\$ 3,500
nsurance	1	\$ 15,000
Total Liabilities	\$ 2,000	\$ 2,400
	\$ 13,600	\$ 133,635
otal Assets	\$ 11,800	0.440.075
otal Liabilities	\$ 13,600	\$ 149,375
Year End Balance	\$ (1,800)	\$ 133,635
	Ι Φ (1,000)	\$ 15,740

This document was reviewed and approved by the 2NOT1 Boa	rd of Directors on January 23, 2014.
Georgia Turner,	_1/23/14
Mawn Sard in	Date
Shawn Gardner, President and Founder	

## Trey Grayson

AMENDED AND RESTATED ARTICLES OF INCORPOR

Secretary of State Received and Filed 02/07/2008 2:53:55 PM Fee Receipt: \$16.00

2 NOT 1: FATHERHOOD & FAMILIES, INC.

THE UNDERSIGNED, duly elected President of 2 NOT 1: Fatherhood & Families, Inc. hereby certifies that said corporation is a non-profit, non-stock corporation incorporated on February 2, 2007, under the laws of the Commonwealth of Kentucky, and more particularly Chapter 273, Kentucky Revised Statutes (KRS).

I further certify that Articles II through XI incorporate amendments to the Articles of Incorporation and that, except for amendments, the Amended and Restated Articles Incorporation currently corresponding provisions of the Articles of Incorporation as theretofore amended and that these Amended and Restated Articles set forth, of Incorporation together with the designated amendments supersede the original Articles of Incorporation and all amendments thereto.

I further certify that there were no members entitled to vote thereon, that the Board of Directors adopted the following Amended and Restated Articles of Incorporation at a meeting held on July 21, 2007 and that said Amended and Restated Articles of Incorporation received the vote of a majority of the directors in

#### ARTICLE I

The name of the Corporation shall be:

2 NOT 1: FATHERHOOD & FAMILIES, INC.

#### ARTICLE II

The duration of the Corporation shall be perpetual.

#### ARTICLE III

The principal office of the Corporation is located at:

1635 Plymouth Court, Apt.11, Louisville, Kentucky 40203

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

Page 1 of 6

#### ARTICLE IV

The Corporation is organized and shall be operated exclusively for charitable and educational purposes as described within Section 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), including for such purposes the making of distributions to organizations and individuals for the purpose of engaging in activity falling within the purposes of the Corporation and permitted for an organization exempt under said Section 501(c)(3).

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

To promote the safety and wellbeing of children by implementing strategies to keep families together and to encourage the involvement of fathers, with a primary focus on low income communities, through the following:

- Educate low income individuals and communities on the subject of fatherhood and the barriers that impede the successful interaction of father and child;
- Enhance and safeguard the interests of children and to protect and improve their relationships with their fathers and other significant males in their lives, within and outside the family;
- 3. Generate a pool of positive male role models to mentor other youth and fathers that can benefit from the support;
- 4. Serve as an educational and networking vehicle for men's, father's, and children's organizations with a focus on family through an annual conference on fatherhood;
- Serve as a repository and clearinghouse for all information relating to fatherhood issues;
- Engage in other charitable and educational activities consistent with the above purposes.

#### ARTICLE V

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

#### ARTICLE VI

Page 2 of 6

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

- a) No substantial part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing or distribution of statements), any political campaign on behalf of any candidate for public office.
- b) Notwithstanding any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on:
  - 1) by a corporation exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code, or the corresponding provisions of any subsequent Federal tax laws.
  - 2) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws.
- c) If and so long as the Corporation is a private foundation as defined in Section 509(a) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws:
  - 1) The Corporation shall distribute its income for each taxable year at such time and in such manner as not to become subject to the tax on undistributed income imposed by Section 4942 of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws.
  - 2) The Corporation shall not engage in any act of self-dealing as defined in Section 4941(d) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws.
  - 3) The Corporation shall not retain any excess business holdings as defined in Section 4943(c) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws.
  - 4) The Corporation shall not make any investments in such manner as to subject it to tax under Section 4944 of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws.
  - 5) The Corporation shall not make any taxable expenditures as defined in Section 4945(d) of the Internal Revenue

Code, or corresponding provisions of any later Federal tax

#### ARTICLE VII

The Corporation shall be governed by the By-Laws.

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

#### ARTICLE VIII

- a) The directors, officers, employees and members of this Corporation shall not be held personally liable for any debt or obligation of the Corporation solely because of their position in
- b) Any person serving on the Board of Directors of this Corporation shall not be held personally liable for monetary damages resulting from the breach of his or her duties as a director unless such act, omission or breach:
  - 1) concerned or concerns a transaction in which the director's personal financial interest was or is in conflict with the financial interests of the Corporation;
  - 2) was not in good faith or involved or involves intentional misconduct on the part of the director;
  - was known by the director to be a violation of law;
  - resulted in an improper personal benefit to the director.

#### ARTICLE IX

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

#### ARTICLE X

In the event of dissolution of the Corporation, the Board of

Page 4 of 6

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 exclusively for charitable or educational purposes as shall at the time qualify as an exempt organization under Section 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), or to the Federal government or to a 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 XI

Amendments to these Articles shall be made pursuant to the provisions of KRS 273.263(2) (or corresponding provisions of any

IN TESTIMONY WHEREOF, witness the signature of the President of the Board of Directors of this Corporation, this 5th day of

ANTHONY SMITH PRESIDENT

STATE OF KENTUCKY

COUNTY OF JEFFERSON )

The foregoing Amended and Restated Articles of Incorporation were acknowledged before me this 5th day of February, 2008, by Anthony Smith, President of 2 NOT 1: Fatherhood & Families, Inc.

My Commission Expires: January 8, 2009

PUBLEC STATE AT LARGE, KENTUCKY

Page 5 of 6

## This Document Prepared By:

LISA KILKELLY
Attorney at Law
LEGAL AID SOCIETY, INC.
416 West Muhammad Ali Blvd. Suite 300
Louisville, Kentucky 40202
(502) 584-1254

(Rev. December 2011)

## Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not

Inte	mal Revenue Service	identification	Number and Cert	le	Give Form to th
	Name (as shown on you	ir income tax return	Celt	incation	requester. Do n
	- I - Fatherhoe	d o r			send to the IRS.
9		ded entity name, if different from above			
č	3				
5	Check appropriate box for	or federal tax classification:			
, g	☐ Individual/sole propr	letor I I o o			
Print or type Specific Instructions on pare	J. Piopi	L S Co	rporation Partnership		
or 1	Limited liability com	Dany Enter the A	Partnership	Trust/estate	1
nst.		pany. Enter the tax classification (C=C cor	poration, S=S corporation B		
4 2	Other (see instruction	asi 🏲	Polation, Papartne	ership) >	Exempt payee
ooil	Address (number, street, a	pd ant as audi	Non-Profit		
Spe	3237 Schneiter Aver	IUE	A CHAPTON	T-	1
8	City, state, and ZIP code			Requester's name and address (or	otional
1	Louisville, KY 40215	[4]			
- 1	List account number(s) here	(optional)			
Part	Taxpayer Ide	entification Number (TIN)			
to avoid					
resident	alien, sole propriet	individuals, this is your social	the name given on the "Nome"		
entities,	it is your employer identi	box. The TIN provided must match individuals, this is your social securidisregarded entity, see the Part I institution number (FIN).	ty number (SSN). However, for	line Social security number	
Number t	the account is in more the	an one name posti.	see now to get a	3	
	to enter.	an one name, see the chart on page	4 for guidelines on whose		
Part II		and the second second second			
Under per	Certification				
1. The nu	natties of perjury, I certify	that:			
	HUEF Shriam on at.				
Service	of subject to backup with	holding because (a) I	number (or I am waiting for a n		
no long	er subject to backup with	backup withholding as a result of	m backup withholding, or (b) I b	arriber to be issued to me), and	
3. Jamai	19 54	molding, and	randre to report all interest or d	ividends or (a) the interior	ernal Revenue
merest paid	d, acquisition or abandar	ment of see dividends on your tax n	eturn For seel by the IRS that yo	DU are currently and	
instructions	on page 4	st cross out item 2 above if you have interest and dividends on your tax nament of secured property, cancellating est and dividends, you are not require	on of debt, contributions	ns, item 2 does not apply Face	p withholding
Sign	on page 4.	are not require	ed to sign the certification but	ndividual retirement arrangement	ortgage
Here	U.S. person	interest and dividends on your tax nament of secured property, cancellatiest and dividends, you are not require		must provide your correct T	IN. See the
		VICX a Las	duey/ para		
General	Instructions	U Tan	Date	2/19/14	
Doted	ences are to the Internal	Revenue Code unless otherwise	Note. If a requester gives	you a form other than Form W-9 requester's form if it is substan	
D.		code unless otherwise	your TIN, you must use the	ou a form other than Form W-9 requester's form if it is substan	to request
rurpose	of Form		. ulis rorm W-9.	Title substan	tially similar

### Purpose of Form

A person who is required to file an information return with the IRS must A person who is required to the an information return with the INS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA

Use Form W-9 only if you are a U.S. person (including a resident allen), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding ousness in the United States are generally required to pay a withhold tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a and pay the withholding tax. Therefore, it you are a 0.5, person that i partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.



## Evaluation Form

2NOT1: Fatherhood and Families Mother's Forum

	Workshop #/ P Please check a						
DA DENIM -	SEX: F M						
	COUNSELOR			ADMINISTRATOR □			
	PROFESSIONA	FESSIONAL		LOCAL RESIDENT			
List each presenter's name     (Circle the appropriate one)	and rate the delivery	for the p					
A				-	Low		
В	5	4	3	2	I	N/A	
C.	5	4	3	2	1	N/A	
C	5	4	3	2	1	N/A	
D	5	4	3	2	1	N/A	
E	5	4	3	2	1	N/A	
are quality of this sympo	sium/panel/worksho	p based o	on the fol	llowing:		IVA	
and allow ledge of the subject n	natter 5	4	3	2	1		
B. Appropriateness	5	4	3	2		N/A	
C. Length	5	4	3		1	N/A	
D. Interest	5	4 .		2	1	N/A	
. What future themes would you			3	2	1	N/A	
·	to have the conf	erence ac	ldress?				
				-			
Please make wi							
Please make other comments and	suggestions. Thank	you very	much fo	or your co	operation	11	
					-		

Year: 2013 N-066 ATHERHOOD & FAMILIES

Submission ID

e-File Postmark: 7/16/2014 12:29:15 PM

Accepted Date: 7/16/2014

The IRS has accepted the e-Postcard described above. Please save this receipt for your records.

Thank you for filing.

email:ePostcard@urban.org Phone: 866-255-0654 (toll free) e-Postcard technical support

Louisville, KY 40203 1626 W Chestnut Street 2NOT1 FATHERHOOD & FAMILIES

No virus found in this message.

Checked by AVG - www.avg.com

Version: 2014.0.4716 / Virus Database: 3986/7857 - Release Date: 07/15/14

## 2 NOT 1: FATHERHOOD & FAMILIES, INC.

## **General Information**

**Organization Number** 

0656609

Name

2 NOT 1: FATHERHOOD & FAMILIES, INC.

**Profit or Non-Profit** 

N - Non-profit

**Company Type** 

KCO - Kentucky Corporation

Status

A - Active

Standing

G - Good

State

KY

File Date

2/2/2007 3:15:43 PM

**Organization Date** 

2/2/2007

**Last Annual Report** 

6/30/2014

**Principal Office** 

1626 WEST CHESTNUT STREET

ATTN: 2NOT1

1626 W CHESTNUT ST LOUISVILLE, KY 40203

**Registered Agent** 

SHAWN GARDNER

1635 PLYMOUTH COURT

APT. 11

LOUISVILLE, KY 40203

#### **Current Officers**

Chairman

Director

Brandon Lawrence
Herlon Robinson

## Individuals / Entities listed at time of formation

Director ANTHONY SMITH

Director

Director

NIKKI GARDNER

Incorporator SHAWN GARDNER

## 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

Annual Report 6/30/2014 1 page PDF
Annual Report Amendment 10/14/2013 1 page PDF
Annual Report 6/27/2013 1 page PDF

### Hughes, Susan

From:

Hughes, Susan

Sent: To:

Thursday, October 09, 2014 11:18 AM

King, Keidra

Subject:

2Not1

Keidra, Councilwoman Butler will sign for \$250 for the 2Not1 NDF request. Please note this contribution may not be

Thanks, Susan

Susan W. Hughes

Legislative Assistant to Councilwoman Marianne Butler District 15

502-574-1115

1