

Applicant/Program:

Louisville Pride Foundation/ Louisville Pride Festival

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

Council Member Signature and Amount

District 1	_____	\$ _____
District 2	_____	\$ _____
District 3	_____	\$ _____
District 4	<i>Barbara Saylor Smith</i>	\$ 500
District 5	_____	\$ _____
District 6	_____	\$ _____
District 7	_____	\$ _____
District 8	_____	\$ _____
District 9	_____	\$ _____
District 10	_____	\$ _____
District 11	_____	\$ _____
District 12	_____	\$ _____
District 13	_____	\$ _____
District 14	_____	\$ _____
District 15	_____	\$ _____

S.

Applicant/Program:

Louisville Pride Foundation/ Louisville Pride Festival

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

District 16 _____ \$ _____

District 17 _____ \$ _____

District 18 _____ \$ _____

District 19 _____ \$ _____

District 20 _____ \$ _____

District 21 Amel George \$ 300

District 22 _____ \$ _____

District 23 _____ \$ _____

District 24 _____ \$ _____

District 25 _____ \$ _____

District 26 _____ \$ _____

**LOUISVILLE METRO COUNCIL
NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

Legal Name of Applicant Organization Louisville Pride Foundation

Program Name and Request Amount Louisville Pride Festival/ ~~700,000~~ \$20,000

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	<input type="checkbox"/> Yes
Is the funding proposed by Council Member(s) less than or equal to the request amount?	<input type="checkbox"/> Yes
Is the proposed public purpose of the program viable and well-documented?	<input type="checkbox"/> Yes
Will all of the funding go to programs specific to Louisville/Jefferson County?	<input type="checkbox"/> Yes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	<input type="checkbox"/> N/A
Has prior Metro Funds committed/granted been disclosed?	<input type="checkbox"/> Yes
Is the application properly signed and dated by authorized signatory?	<input type="checkbox"/> Yes
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	<input type="checkbox"/> Yes
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	<input type="checkbox"/> N/A
Is the entity in good standing with: <ul style="list-style-type: none"> ▶ Kentucky Secretary of State? ▶ Louisville Metro Revenue Commission? ▶ Louisville Metro Government? ▶ Internal Revenue Service? ▶ Louisville Metro Human Relations Commission? 	<input type="checkbox"/> Yes
Is the current Fiscal Year Budget included?	<input type="checkbox"/> Yes
Is the entity's board member list (with term length/term limits) included?	<input type="checkbox"/> Yes
Is recommended funding less than 33% of total agency operating budget?	<input type="checkbox"/> Yes
Does the application budget reflect only the revenue and expenses of the project/program?	<input type="checkbox"/> Yes
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	<input type="checkbox"/> N/A
Is the most recent annual audit (if required by organization) included?	<input type="checkbox"/> N/A
Is a copy of Signed Lease (if rent costs are requested) included?	<input type="checkbox"/> N/A
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	<input type="checkbox"/> N/A
Are the Articles of Incorporation of the Agency included?	<input type="checkbox"/> Yes
Is the IRS Form W-9 included?	<input type="checkbox"/> Yes
Is the IRS Form 990 included?	<input type="checkbox"/> Yes
Are the evaluation forms (if program participants are given evaluation forms) included?	<input type="checkbox"/> N/A
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	<input type="checkbox"/> N/A
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	<input type="checkbox"/> N/A
Prepared by: Jasmine Weatherby	Date: Sep 6, 2019

Louisville Pride Foundation, Inc.

General Information

Organization Number	0898253
Name	Louisville Pride Foundation, Inc.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	9/29/2014 7:49:02 AM
Organization Date	9/29/2014 7:49:02 AM
Last Annual Report	6/26/2019
Principal Office	1205 E WASHINGTON ST SUITE 103 LOUISVILLE, KY 40206
Registered Agent	Matthew F Coogle 401 W Main St Ste 1200 Louisville, KY 40202

Current Officers

President	<u>THOMAS W CARRIER</u>
Vice President	<u>OMICAH HOUSE</u>
Secretary	<u>TODD MERCIER</u>
Treasurer	<u>BRENT TURNER</u>
Director	<u>THOMAS W CARRIER</u>
Director	<u>OMICAH HOUSE</u>
Director	<u>TODD MERCIER</u>
Director	<u>ASHLEIGH DONALDSON</u>
Director	<u>JERAMY HARRIS</u>
Director	<u>JAMES WOLFE</u>
Director	<u>BRENT TURNER</u>
Executive	<u>MIKE SLATON</u>

Individuals / Entities listed at time of formation

Director	<u>KEVIN JAMES BRYAN</u>
Director	<u>TIMOTHY DAVID MATTINGLY</u>
Director	<u>ROWDY WHITWORTH</u>
Incorporator	<u>THOMAS W CARRIER</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.

Annual Report	6/26/2019	1 page	PDF	
Annual Report	7/9/2018	1 page	PDF	
Amendment	5/30/2018	2 pages	tiff	PDF
Principal Office Address Change	6/26/2017 9:50:56 AM	1 page	PDF	
Annual Report	6/26/2017	1 page	PDF	
Annual Report	7/11/2016	1 page	PDF	
Annual Report	8/10/2015	1 page	PDF	
Articles of Incorporation	9/29/2014 7:49:03 AM	1 page	PDF	

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	6/26/2019 10:11:22 AM	6/26/2019 10:11:22 AM	
Annual report	7/9/2018 12:51:32 PM	7/9/2018 12:51:32 PM	
Amendment - Amended and restated articles / CLP	5/30/2018 12:14:28 PM	5/30/2018	
Annual report	6/26/2017 9:55:37 AM	6/26/2017 9:55:37 AM	
Principal office change	6/26/2017 9:50:56 AM	6/26/2017 9:50:56 AM	
Annual report	7/11/2016 6:17:27 PM	7/11/2016 6:17:27 PM	
Annual report	8/10/2015 12:57:54 PM	8/10/2015 12:57:54 PM	
Add	9/29/2014 7:49:02 AM	9/29/2014 7:49:02 AM	

Microfilmed Images

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 - APPLICANT INFORMATION			
Legal Name of Applicant Organization: Louisville Pride Foundation <i>(as listed on: http://www.sos.ky.gov/business/records)</i>			
Main Office Street & Mailing Address: 1205 East Washington Street, Suite 103, Louisville, KY 40206			
Website: www.louisvillepride.com			
Applicant Contact:	Mike Slaton	Title:	Executive Director
Phone:	(502) 224-7529	Email:	mike@louisvillepride.com
Financial Contact:	John Bunker	Title:	Treasurer
Phone:	(502) 365-9876	Email:	jbunker@myfinancingusa.com
Organization's Representative who attended NDF Training: Mike Slaton			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s): Bardstown Rd; Grinstead Drive to the traffic light at the Mid City Mall entrance.			
Council District(s): District 8		Zip Code(s): 40204	
SECTION 2 - PROGRAM REQUESTS - FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: 2019 Louisville Pride Festival			
Total Request: (\$)	\$20,000.00	Total Metro Award (this program) in previous year: (\$)	\$8,500.00
Purpose of Request (check all that apply):			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget)			
<input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals			
<input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current year projected budget <input checked="" type="checkbox"/> Current financial statement <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 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	
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.			
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <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:

The Louisville Pride Foundation's mission is to promote Louisville as one community that celebrates diversity, fosters inclusion for all, and embraces gay, lesbian, bisexual, transgender, and queer people and their allies.

The Foundation seeks to promote this unity between LGBTQA people and straight allies by engaging in a conversation with the broader community about what makes us one, while celebrating what makes us different. A portion of the proceeds from the festival will benefit two fantastic LGBTQA local youth programs: The Louisville Youth Group and Sweet Evening Breeze homeless shelter.

The Foundation is happy to present a free street festival each year, that is family-friendly and is open to children and adults of all ages and walks of life. The festival features live entertainment, arts and crafts, food and drink, and exhibitors who are proud to celebrate in diversity and who recognize the power of equality in the Louisville community.

This year's festival is incorporating three new and improved features: The Family Zone, The Wellness Zone, and The Job Shop.

The Louisville Youth Group will be organizing our "Family Zone". This will be a special section of the festival that provides fun and games for kids and their parents, as well as planned educational activities. Also in collaboration with this new festival feature will be the Louisville Ballet, Commonwealth Theater, Youth Bulid, The Louisville Nature Center, Young Authors Green House, Kentucky Shakespeare, and the Louisville Free Public Library with an on site book mobile.

Louisville Metro Public Health and Wellness will be coordinating our "Wellness Zone". They will provide the festival goers with LGBTQA health information, resources for mental health wellness, help and resources for substance abuse, information on medical services, information on sexual health and wellness, and much more.

The Job Shop will be a small feature that we plan to expand next year. Hiring reps will be on hand from major sponsors of the festival (Ford, GE, Norton, etc). We hope to add access to career counselors and other resources for festival goers. Unemployment and underemployment are chronic with in the LGBTQ community, especially trans people and people of color.

Again, this event is totally free to attend, which makes it more accessible for young people and poor people within the community.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
James Wolfe	December 31, 2019
Todd Mercier	December 31, 2019
Brent Turner	December 31, 2020
Ashleigh Donaldson	December 31, 2021
Kasen Meek	December 31, 2022
Xian Brooks	December 31, 2022
Erin Smith	December 31, 2022
Brooke Browder	December 31, 2022

Describe the Board term limit policy:

Each board member serves for a three year term and may be re-elected without any term limitation.

Three Highest Paid Staff Names	Annual Salary
Mike Slaton	\$60,000.00

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 2019 Louisville Pride Festival will be held on Bardstown Road on September 21st, from 11 AM - 11 PM. This free event is open to the public and draws a crowd of roughly 20,000+ people. This year there will be over 100 vendors/booths which will showcase nonprofits, local food and drink, healthcare providers, artists, service providers, crafts people, and unique businesses of all kinds.

Events like this festival are crucial in giving necessary visibility to the LGBTQA community and their allies. The Louisville Pride Festival will continue to promote Louisville, KY as a welcoming city by sending an affirmative message that LGBTQA people are welcome, that they are heard, that they are visible, and that they are safe to live their lives as their true selves.

LGBTQA youth remain at a disproportionate risk for homelessness due to rejection by their family, are 3x more likely to be bullied in school by their classmates, are 4x more likely to suffer from substance abuse and addiction, and are 3x more likely to attempt suicide.

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

These NDF funds will be used to cover operational costs directly associated with the festival entertainment. Those costs include hospitality, hotels, travel, production, and the talent/entertainment acts themselves.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

The Louisville Pride Festival is not a fundraiser, but voluntary donations are always welcome. A portion of the proceeds benefit The Louisville Youth Group and Sweet Evening Breeze homeless shelter.

This event is 100% free and completely open to the public. All are welcome and encouraged to attend and to join us in celebrating Louisville's pride.

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.

* Payments to all artists and all production related costs are due no later than the day of the event, on September 21st, 2019.

- 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 Louisville Pride festival is estimated to draw over 20,000+ people with over 100 vendors/booths which will showcase nonprofits, local food and drink, healthcare providers, artists, service providers, crafts people, and various other unique businesses.

Funding will be provided to our beneficiary partners to support their work on behalf of Louisville's LGBTQA youth.

Attendance is based on estimates made by volunteers at the primary entrance who use clickers to track the flow of festival goers as they enter the festival. Aerial photos as well as the quantity of donations and sales are also used to gauge attendance.

Demographic information for the 2019 festival will also be gathered via a survey distributed by our research team.

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.

- Beechmont Community Center: The Louisville Pride Foundation has made this partnership to develop and deliver programming for the community, including a support group for transgender people of color and an LGBTQA book club.
- Wellness Zone Partners: Louisville Metro Public Health and Wellness, Spalding University, UofL, Norton, and VOA private practitioners. (Providing mental health screenings, yoga and zumba demonstrations, HIV/STI testing, and other educational resources)
- Family Zone Partners: The Louisville Youth Group, The Louisville Free Public Library, The Louisville Ballet, Commonwealth Theater, Youth Build, Louisville Nature Center, Young Authors Green House, Kentucky Shakespeare. (Working to make a family friendly event with fun and games, as well as planned educational activities with each specific partner)
- The Transgender Wellness Summit: The Louisville Pride Foundation will provide support at this event in March of 2020 as well as advertise the event at this years festival. The event will have workshops and a vendor market specifically tailored for transgender people in the region.

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.

	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			
D: Telephone			
E: In-town Travel			
F: Client Assistance (See Detailed List on Page 8)			
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (See Detailed List on Page 8)	\$20,000.00	\$94,800.00	\$114,800.00
J: Machinery & Equipment			
K: Capital Project			
L: Other Expenses (See Detailed List on Page 8)			
*TOTAL PROGRAM/PROJECT FUNDS	<i>20,000.00</i>	<i>94,800.00</i>	<i>114,800.00</i>
% of Program Budget	17 %	83 %	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)	\$69,800.00
Fees Collected from Program Participants	
Other (please specify)	\$25,000.00 (Vendor Fees)
<i>Total Revenue for Column 2 Expenses **</i>	\$94,800.00

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

**Must equal or exceed total in column 2.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7 (circle one and use multiple sheets if necessary)	Column 1	Column 2	Column (1 + 2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
Hospitality		\$400.00	\$400.00
Hotels		\$1,600.00	\$1,600.00
Production	\$10,000.00	\$7,600.00	\$17,600.00
Talent	\$10,000.00	\$20,000.00	\$30,000.00
Travel		\$3,400.00	\$3,400.00
VIP Tent		\$2,300.00	\$2,300.00
Electricity		\$2,500.00	\$2,500.00
Equipment Rental		\$16,000.00	\$16,000.00
Security		\$8,300.00	\$8,300.00
Supplies & Materials		\$1,300.00	\$1,300.00
Waste Management		\$1,800.00	\$1,800.00
Tents		\$17,800.00	\$17,800.00
Family & Wellness Programing		\$3,000.00	\$3,000.00
Labor		\$2,500.00	\$2,500.00
Licenses & Permmits		\$6,300.00	\$6,300.00
Total	\$20,000.00	\$94,800.00	\$114,800.00

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
Volunteer Hours 150 volunteers x 4hrs. = 600hrs.	\$12,816.00	Independence Sector \$21.36 an hr. x 600hrs. = \$12,816.00
<i>Total Value of In-Kind</i> <i>(to match Program Budget Line Item.</i> Volunteer Contribution & Other In Kind)	<i>\$12,816.00</i>	

* 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 1st

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

If YES, please explain:

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 7 – CERTIFICATIONS & ASSURANCES

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

Standard Assurances

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

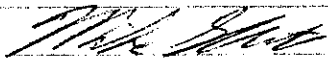
Standard Certifications

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

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

SECTION 8 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:		Date:	9/7/19
Legal Signatory: (please print):	Mike Staron	Title:	Exec. Dir.
Phone:	502-224-7529	Extension:	
Email:	mike@louisvillepr.de.com		

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

DEPARTMENT OF THE TREASURY

Date: **OCT 27 2014**

LOUISVILLE PRIDE FOUNDATION
2010 CHEROKEE PARKWAY SUITE 1
LOUISVILLE, KY 40204-0000

Employer Identification Number:
47-1945331
DLN:
26053690002684
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
September 29, 2014
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

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

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

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

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

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

Letter 5436

LOUISVILLE PRIDE FOUNDATION

Sincerely,

A handwritten signature in black ink that reads "Tamera Ripperda". The signature is written in a cursive, flowing style.

Director, Exempt Organizations

2019 Budget

*Proposed to the Board of Directors on December 6, 2018 by LPF Executive Director Mike Slaton
Approved 12/6/18. Motioned by Brent Turner, Second by Todd Mercier, vote was unanimous.*

The Board of Directors approves the following budget for the Louisville Pride Foundation for January 1, 2019 – December 31, 2019.

Revisions may be made by the Board of Directors at any time, provided that the budget remains balanced.

Revenue	2019 total
Sponsorship	\$143,000.00
Donations	\$35,000.00
Grants	\$15,000.00
Events	\$11,000.00
Vendor Fees	\$25,000.00
Pride 100 Membership	\$6,000.00
Platinum Club	\$10,000.00
Merchandise Sales	\$11,000.00
Grand Total	\$256,000.00

Expense	2019 Expense
Administrative	\$90,000.00
Board of Directors Expenses	\$3,200.00
Board Development	\$1,000.00
Board Meetings	\$1,200.00
Strategic Planning	\$1,000.00
Overhead	\$10,800.00
Dues & Subscriptions	\$600.00

Fees	\$4,400.00
Insurance	\$5,000.00
Office Supplies	\$400.00
Phone & Internet	\$400.00
Personnel Costs	\$76,000.00
Professional Development	\$1,000.00
Salary and benefits	\$75,000.00
Communications & Marketing	\$22,700.00
<hr/>	
Advertising	\$6,800.00
Banners & Signage	\$1,400.00
Billboards	\$ 0.00
Posters and Fliers	\$500.00
Print	\$1,900.00
Radio	\$3,000.00
Communications	\$1,200.00
Newsletter	\$200.00
Photographer and Videographer	\$1,000.00
Digital Advertising	\$6,500.00
Mobile Advertising Targeting	\$2,000.00
Mobile App Advertising	\$500.00
Social Media Advertising	\$4,000.00
Merchandise	\$7,000.00
Event Handouts	\$1,000.00
T-Shirts	\$4,000.00
Wristbands	\$2,000.00

Web	\$1,200.00
Web Presence	\$1,200.00
Community Engagement	\$16,300.00
Charitable Giving	\$10,000.00
Gift allocation	\$10,000.00
Outreach	\$2,000.00
General Outreach	\$2,000.00
Programming	\$2,000.00
General Programming	\$2,000.00
Volunteers	\$2,300.00
Festival Volunteers	\$500.00
Volunteer Appreciation Party	\$500.00
Volunteer Management	\$1,300.00
Development & Membership	\$12,200.00
Benefit Fulfillment	\$4,900.00
Platinum Club	\$900.00
Swag	\$1,000.00
Thunder Suite	\$3,000.00
Fundraising Events & Activities	\$7,300.00
Belle Cruise	\$5,500.00
Pool Party	\$1,800.00
Festival	\$114,800.00
Entertainment	\$53,000.00
Hospitality	\$400.00
Hotels	\$1,600.00

Production	\$17,600.00
Talent	\$30,000.00
Travel	\$3,400.00
Features	\$5,300.00
Other Programming	\$3,000.00
VIP Tent	\$2,300.00
Operations	\$38,700.00
Electricity	\$2,500.00
Equipment Rental	\$16,000.00
Labor	\$2,500.00
Licenses & Permits	\$6,300.00
Security	\$8,300.00
Supplies and Materials	\$1,300.00
Waste Management	\$1,800.00
Vendors	\$17,800.00
Tents	\$17,800.00
Grand Total	\$256,000.00

Louisville Pride Foundation, Inc.

PROFIT AND LOSS

January 1 - August 29, 2019

	TOTAL
Income	
100 Club	1,051.08
Backstage Passes / VIP Passes	78.00
Donations	3,148.54
Exhibitors	15,095.40
Festival Sponsorship	76,500.00
Merchandise	4,127.81
Miscellaneous	337.48
Platinum Club	500.00
Sales	1,700.00
Sunday Funday VIP Table	2,037.63
Total Income	\$104,575.94
GROSS PROFIT	\$104,575.94
Expenses	
Administrative Cost Center	
Board of Directors Expenses	
Board Development	195.26
Board Meetings	377.12
Board Supplies & Materials	543.39
Strategic Planning	200.00
Total Board of Directors Expenses	1,315.77
Overhead	
Admin Fees	616.63
Bank Fees	99.95
Dues & Subscriptions	1,445.88
Insurance	3,825.20
Insurance - Liability	1,238.98
Internet	999.87
Merchant Account Fees	1,063.14
Office Expenses	384.92
Sales Tax	61.50
Shipping / Postage	5.19
Shipping, Freight & Delivery	4.44
Telephone	209.09
Total Overhead	9,954.79
Personnel Expenses	
Meals and Entertainment	339.19
Professional Development	398.67
Total Personnel Expenses	737.86
Total Administrative Cost Center	12,008.42
Community Engagement & Volunteers	
General Outreach	895.00
General Programming	250.00

	TOTAL
Volunteer Management	118.00
Total Community Engagement & Volunteers	1,263.00
Development & Membership	
Benefit Fulfillment	
100 Club Expense	828.10
Platinum Club Expense	428.04
Swag	2,607.81
Thunder Suite	3,000.00
Total Benefit Fulfillment	6,863.95
Fundraising Events & Activities	
Belle of Lou Cruise Expense	2,500.00
Pool Party Exp	1,538.00
Sunday Funday Expenses	700.00
Total Fundraising Events & Activities	4,738.00
Total Development & Membership	11,601.95
Festival Planning	
Entertainment	
Talent	16,270.00
Total Entertainment	16,270.00
Operations	
Electricity	2,452.50
Equipment Rental	100.00
Supplies	183.71
Total Operations	2,736.21
Vendor Expenses	
Tents	9,058.08
Total Vendor Expenses	9,058.08
Total Festival Planning	28,064.29
Marketing & Communications	
Advertising (non-digital)	
Posters & Fliers	103.75
Total Advertising (non-digital)	103.75
Digital Advertising	
Social Media Advertising	715.00
Total Digital Advertising	715.00
Merchandise Expenses	
T-Shirts	3,980.62
Wristbands	2,099.99
Total Merchandise Expenses	6,080.61
Web	
Web Presence	62.00
Total Web	62.00
Total Marketing & Communications	6,961.36
Uncategorized Expenditure	577.95
Total Expenses	\$60,476.97
NET OPERATING INCOME	\$44,098.97
NET INCOME	\$44,098.97

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 9.x products and later products, select "None" in the "Page Scaling" selection box in the Adobe "Print" dialog.

CLIENT'S COPY

HICKS & ASSOCIATES CPAS
1795 ALYSHEBA WAY, SUITE 6206
LEXINGTON, KY 40509
859-368-9727

MAY 24, 2018

LOUISVILLE PRIDE FOUNDATION, INC.
1205 E WASHINGTON ST. NO. 103
LOUISVILLE, KY 40206

LOUISVILLE PRIDE FOUNDATION, INC.:

ENCLOSED ARE THE ORIGINAL AND ONE COPY OF THE 2017 EXEMPT
ORGANIZATION RETURN, AS FOLLOWS...

2017 FORM 990

EACH ORIGINAL SHOULD BE DATED, SIGNED AND FILED IN ACCORDANCE
WITH THE FILING INSTRUCTIONS. THE COPY SHOULD BE RETAINED
FOR YOUR FILES.

SINCERELY,

DAVID W. HICKS, CPA, CFF, CFE, CGMA

Filing Instructions

Prepared for:

LOUISVILLE PRIDE FOUNDATION, INC.
1205 E WASHINGTON ST. NO. 103
LOUISVILLE, KY 40206

Prepared by:

HICKS & ASSOCIATES CPAS
1795 ALYSHEBA WAY, STE 6206
LEXINGTON, KY 40509

2017 FORM 990

PLEASE SIGN AND MAIL AS SOON AS POSSIBLE.

MAIL TO - DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201-0027

EXTENDED TO NOVEMBER 15, 2018

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2017 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/Form990 for instructions and the latest information.

Header section A-M containing organization name, address, identification numbers, and tax status.

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include mission statement, governance metrics, revenue, expenses, and net assets.

Part II Signature Block

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

Signature and preparer information section including officer name, preparer name, and address.

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III []

1 Briefly describe the organization's mission:
PROMOTES LOUISVILLE AS ONE COMMUNITY THAT CELEBRATES DIVERSITY,
FOSTERS INCLUSION FOR ALL, AND EMBRACES THE LGBTQA COMMUNITY.

2 Did the organization undertake any significant program services during the year which were not listed on the
prior Form 990 or 990-EZ? [] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 5,000. including grants of \$ 5,000.) (Revenue \$)
CHARITABLE DONATION TO THE LOUISVILLE YOUTH GROUP.

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

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

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 5,000.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		
Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Main form area containing questions 1a through 14b with input fields and Yes/No columns.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	10	
1b	Enter the number of voting members included in line 1a, above, who are independent	10	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **KY**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **JOHN BUNKER - 502-365-9876**
1205 E WASHINGTON ST., STE 103, LOUISVILLE, KY 40206

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

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) THOMAS W CARRIER PRESIDENT	12.00	X		X				0.	0.	0.
(2) OMICAH HOUSE VICE PRESIDENT	12.00	X		X				0.	0.	0.
(3) TODD MERCIER SECRETARY	8.00	X		X				0.	0.	0.
(4) JOHN BUNKER TREASURER	8.00	X		X				0.	0.	0.
(5) MICHAEL ADAMS DIRECTOR	4.00	X						0.	0.	0.
(6) KEVIN BRYAN DIRECTOR	4.00	X						0.	0.	0.
(7) JESSICA BELLAMY DIRECTOR	4.00	X						0.	0.	0.
(8) T. DAVID MATTINGLY DIRECTOR	4.00	X						0.	0.	0.
(9) DOMINIQUE BARBER DIRECTOR	4.00	X						0.	0.	0.
(10) ROWDY WHITWORTH DIRECTOR	4.00	X						0.	0.	0.

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	120,438.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			120,438.			
Program Service Revenue	2 a	Business Code					
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)						
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ 120,438. of contributions reported on line 1c). See Part IV, line 18	a		4,810.			
		b Less: direct expenses	b	119,291.			
		c Net income or (loss) from fundraising events			<114,481.>		<114,481.>
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses		b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a		10,111.				
	b Less: cost of goods sold	b	6,928.				
	c Net income or (loss) from sales of inventory			3,183.	3,183.		
Miscellaneous Revenue			Business Code				
11 a	a						
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions.			9,140.	3,183.	0.	<114,481.>	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,000.	5,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	1,165.		1,165.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses	2,416.		2,416.	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	968.		968.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a _____				
b _____				
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	9,549.	5,000.	4,549.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	4,342.	1	13,201.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	349.	4	9,799.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	5,005.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b		10c
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)		4,691.	16	28,005.
Liabilities	17 Accounts payable and accrued expenses	63,685.	17	87,408.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25		63,685.	26
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	<58,994.>	27	<59,403.>
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	<58,994.>	33	<59,403.>	
34 Total liabilities and net assets/fund balances	4,691.	34	28,005.	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,140.
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,549.
3	Revenue less expenses. Subtract line 2 from line 1	3	<409.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<58,994.>
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	<59,403.>

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form 990 (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.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

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						
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 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	%
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 <input type="checkbox"/>		
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 <input type="checkbox"/>		
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 <input type="checkbox"/>		
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 <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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.")		200.	116,010.	139,612.	120,438.	376,260.
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					14,921.	14,921.
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		200.	116,010.	139,612.	135,359.	391,181.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
c Add lines 7a and 7b						0.
8 Public support. (Subtract line 7c from line 6.)						391,181.

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		200.	116,010.	139,612.	135,359.	391,181.
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.)		200.	116,010.	139,612.	135,359.	391,181.

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
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
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)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.		
c 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)? 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.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 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? If "Yes," provide detail in Part VI .		
7 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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a 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))? If "Yes," provide detail in Part VI .		
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? If "Yes," provide detail in Part VI .		
c 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? If "Yes," provide detail in Part VI .		
10a 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)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

	Yes	No
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?	11a	
b A family member of a person described in (a) above?	11b	
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.	11c	

Section B. Type I Supporting Organizations

	Yes	No
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.	1	
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.	2	

Section C. Type II Supporting Organizations

	Yes	No
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).	1	

Section D. All Type III Supporting Organizations

	Yes	No
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?	1	
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).	2	
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.	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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> 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.	2a	
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.	2b	
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.	3a	
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.	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	Adjusted Net Income (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	Total (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	Minimum Asset Amount (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	Distributable Amount. 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).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

Part VI **Supplemental information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Lined area for supplemental information.

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Name of the organization

LOUISVILLE PRIDE FOUNDATION, INC.

Employer identification number

47-1945331

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization LOUISVILLE PRIDE FOUNDATION, INC.	Employer identification number 47-1945331
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NORTON HEALTHCARE 1930 BISHOP LN. LOUISVILLE, KY 40218	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	GE APPLIANCES 4000 BUECHEL BANK RD. LOUISVILLE, KY 40225	\$ 5,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	FORD MOTOR COMPANY 2000 FERN VALLEY RD. LOUISVILLE, KY 40213	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	LOUISVILLE METRO GOVERNMENT 527 W. JEFFERSON ST. LOUISVILLE, KY 40202	\$ 9,050.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LOUISVILLE PRIDE FOUNDATION, INC.	Employer identification number 47-1945331
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization LOUISVILLE PRIDE FOUNDATION, INC.	Employer identification number 47-1945331
--	---

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		PRIDE FESTIVAL (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts	125,248.			125,248.
	2 Less: Contributions	120,438.			120,438.
	3 Gross income (line 1 minus line 2)	4,810.			4,810.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	42,620.			42,620.
	7 Food and beverages	3,690.			3,690.
	8 Entertainment	28,422.			28,422.
	9 Other direct expenses	44,559.			44,559.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				119,291.
11 Net income summary. Subtract line 10 from line 3, column (d)				<114,481.>	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

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

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

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

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

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

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

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

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

LOUISVILLE PRIDE FOUNDATION, INC.

Employer identification number
47-1945331

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

EMBRACES THE LGBTQA COMMUNITY.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PROVIDED TO THE BOARD OF DIRECTORS BEFORE SIGNING AND MAILING. THE BOARD IS GIVEN A ONE-WEEK REVIEW PERIOD TO ASK QUESTIONS OR REQUEST CHANGES. ONCE THE ONE-WEEK REVIEW PERIOD HAS ENDED, THE 990 WILL BE FINALIZED BY THE ACCOUNTING FIRM ASSISTING WITH THE PREPARATION AND DELIVERED TO THE TREASURER TO BE SIGNED AND MAILED BY THE PRESIDENT.

FORM 990, PART VI, SECTION C, LINE 19:

THESE ITEMS ARE AVAILABLE UPON REQUEST.

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

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. LOUISVILLE PRIDE FOUNDATION, INC.	Enter filer's identifying number Employer identification number (EIN) or 47-1945331
	Number, street, and room or suite no. If a P.O. box, see instructions. 1205 E WASHINGTON ST., NO. 103	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOUISVILLE, KY 40206	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

JOHN BUNKER

• The books are in the care of ▶ **1205 E WASHINGTON ST., STE 103 - LOUISVILLE, KY 40206**
Telephone No. ▶ **502-365-9876** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2018**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year **2017** or
- ▶ tax year beginning _____, and ending _____

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

NAOI
0898253.09
Alison Lundergan Grimes
Secretary of State
Received and Filed
9/29/2014 7:49:02 AM
Fee receipt: \$8.00

Alison Lundergan Grimes
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Articles of Incorporation
Non-profit Corporation

NAI

For the purposes of forming a non-profit corporation in Kentucky pursuant to KRS Chapter 273, the undersigned incorporator hereby submits the following Articles of Incorporation to the Office of the Secretary of State for filing:

Article I: The name of the company is

Louisville Pride Foundation, Inc.

Article II: The street address of the company's initial registered office in Kentucky is

401 W Main St, Ste 1200, Louisville, KY 40202

and the name of the initial registered agent at that address is **Matthew F Coogle**

Article III: The mailing address of the company's initial principal office is

2010 Cherokee Parkway, Suite 1, Louisville, KY 40204

Article IV: The name and mailing address of each incorporator is

Thomas W Carrier 2010 Cherokee Parkway, Louisville, Kentucky 40204

Article V: The number of directors constituting the initial board of directors is 3. The name and mailing address of each director is

Kevin James Bryan 1202 Bardstown Road, Louisville, Kentucky 40204

Timothy David Mattingly 1133 Bardstown Road, Louisville, Kentucky 40204

Rowdy Whitworth 1117 Bardstown Road, Louisville, Kentucky 40204

Article VI: The purpose of the company is: **The Louisville Pride Foundation promotes the cooperation and understanding of Louisville as one community comprised of gay, lesbian, bisexual, transgendered, queer and straight individuals as well as businesses and organizations that support and embrace diversity.**

Executed by the Incorporator on Monday, September 29, 2014

Name of Incorporator: **Thomas W Carrier**

Signature of individual signing on behalf of Incorporator:

Thomas W Carrier

I, **Matthew F Coogle**, consent to serve as the Registered Agent on behalf of the corporation.

Signature of Registered Agent or individual signing on behalf of the company serving as Registered Agent:

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

NAOI
0898253.09
Alison Lundergan Grimes
Secretary of State
Received and Filed
9/29/2014 7:49:02 AM
Fee receipt: \$8.00

Alison Lundergan Grimes
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Articles of Incorporation
Non-profit Corporation

NAI

Matthew F Coogle

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Louisville Pride Foundation

2 Business name/disregarded entity name, if different from above
Louisville Pride Festival

3 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.

Individual/sole proprietor or single-member LLC C Corporation S Corporation Partnership Trust/estate

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

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.

Other (see instructions) ▶ **501 (c) 3**

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
Exempt payee code (if any) _____
Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
PO Box 4341

6 City, state, and ZIP code
Louisville, KY 40204

7 List account number(s) here (optional)

Print or type.
See Specific Instructions on page 3.

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.

Social security number									
-				-					
or									
Employer identification number									
4	7	-	1	9	4	5	3	3	1

Part II Certification

Under penalties of perjury, I certify that:

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

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶ July 29, 2019
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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.

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.

**BYLAWS
OF
LOUISVILLE PRIDE FOUNDATION, INC.**

1. GENERAL PROVISIONS

- 1.1. **NAME.** The name of The Corporation shall be Louisville Pride Foundation, Inc..
- 1.2. **ORGANIZATION.** The Corporation is organized in accordance with the Kentucky Revised Statutes, Title XXIII, Chapter 273, as amended.
- 1.3. **NONPROFIT PURPOSES.** The Corporation has not been formed for the making of any profit, or personal financial gain. The assets and income of The Corporation shall not be distributable to, or benefit the trustees, directors, or officers or other individuals. The assets and income shall only be used to promote corporate purposes as described below. Nothing contained herein, however, shall be deemed to prohibit the payment of reasonable compensation to employees and independent contractors for services provided for the benefit of The Corporation. This organization shall not carry on any other activities not permitted to be carried on by an organization exempt from federal income tax. The Corporation shall not endorse, contribute to, work for, or otherwise support (or oppose) a candidate for public office. The Corporation is organized exclusively for purposes subsequent to section 501(c)(3) of the Internal Revenue Code.
- 1.4. **MISSION.** The mission of the Louisville Pride Foundation is to promote Louisville as one community that celebrates diversity, fosters inclusion for all, and embraces gay, lesbian, bisexual, transgender and queer people, their culture and their allies.
- 1.5. **PRINCIPAL OFFICE.** The principal business office of The Corporation shall be at 2010 Cherokee Parkway, Suite 1, Louisville, Kentucky 40204. The Corporation may also have offices at such other places within or without the Commonwealth of Kentucky as the business of The Corporation may require.
- 1.6. **FISCAL YEAR.** The fiscal year of The Corporation shall be the calendar year.

2. MEETINGS

- 2.1. **ANNUAL MEETING.** An meeting shall be held once each calendar year for the purpose of electing directors and for the transaction of such other businesses as may properly come before the meeting. The meeting shall be held at the time and place designated by the Board of Directors.

- 2.2. SPECIAL MEETING. Special meetings may be requested by the President or the Board of Directors.
- 2.3. NOTICE. Written notice of all meetings shall be provided under this section or as otherwise required by law. The Notice shall state the place, date, and hour of meeting, and if for a special meeting, the purpose of the meeting. Such notice shall be mailed or emailed to all directors of record at the address shown on the corporate books, at least 5 days prior to the meeting.
- 2.4. PLACE of MEETING. Meetings shall be held at The Corporation's principal place of business unless otherwise stated in the notice.
- 2.5. QUORUM. A majority of the directors shall constitute a quorum at a meeting. In the absence of a quorum, a majority of the directors may adjourn the meeting to another time without further notice. If a quorum is represented at an adjourned meeting, any business may be transacted that might have been transacted at the meeting as originally scheduled. The directors present at a meeting represented by a quorum may continue to transact business until adjournment, even if the withdrawal of some directors results in representation of less than a quorum.
- 2.6. INFORMAL ACTION. Any action required to be taken, or which may be taken, at a meeting, may be taken without a meeting and without prior notice if a consent in writing, setting forth the action so taken, is signed by all members of the Board with respect to the subject matter of the vote. The action and the written consents thereto by the members of the Board or such committee shall be filed with the Secretary of the Corporation along with the minutes of the proceedings of the Board or of such committee.
- 2.7. MEETINGS by PHONE. The Board of Directors may participate in any regular or special meeting of the Board of Directors or of a committee of the Board of Directors by means of conference telephone or similar communications equipment by means of which all persons participating in the meeting can communicate with each other. Participation in a meeting in this manner by a Director will be considered to be attendance in person for all purposes under these Bylaws.
- 2.8. MEETING MINUTES. The minutes of the meetings of the Board of Directors and all relevant committees shall contain the following:
 - 2.8.1. The names of the persons who attended the meeting.
 - 2.8.2. The subject matter of the meeting.
 - 2.8.3. Any actions taken during the meeting.
 - 2.8.4. The names of persons who have a financial interest in connection with an actual or possible conflict of interest, and the nature of the financial interest.

3. DIRECTORS

- 3.1. NUMBER of DIRECTORS. The Corporation shall be managed by a Board of Directors consisting of no more than twelve (12) directors.
- 3.2. ELECTION and TERM of OFFICE. One-third (1/3) of the sitting directors shall be elected at the annual meeting every calendar year. Each director shall serve for a term of 3 years. Each newly elected director's term begins from the time of his election. Each director shall serve until the director's term expires, and thereafter until his successor is duly elected, or until his death or resignation.
- 3.3. TERM LIMITS. Directors may be re-elected to the Board of Directors without limitation.
- 3.4. QUORUM. A majority of directors shall constitute a quorum.
- 3.5. ADVERSE INTEREST. In the determination of a quorum of the directors, or in voting, the disclosed adverse interest of a director shall not disqualify or invalidate his or her vote.
- 3.6. REGULAR MEETING. The Board of Directors shall meet immediately after the election for the purpose of electing its new officers, appoint new committee chairpersons and for transaction such other business as may be deemed appropriate. The Board of Directors may provide, by resolution, for additional regular meetings without notice other than the notice provided by the resolution.
- 3.7. SPECIAL MEETING. Special meetings may be requested by the President, Vice President, Secretary, or any two directors by providing five days' written notice by email or ordinary United States mail, effective when mailed or emailed. Minutes of the meeting shall be sent to the Board of Directors within two weeks after the meeting.
- 3.8. PROCEDURES. The vote of a majority of the directors present at a properly called meeting at which a quorum is present shall be the act of the Board of Directors, unless the vote of a greater number is required by law or by these bylaws for a particular resolution. A director of The Corporation who is present at a meeting of the Board of Directors at which action on any corporate matter is taken shall be presumed to have assented to the action taken unless their dissent shall be entered in the minutes of the meeting. The Board shall keep written minutes of its proceedings in its permanent records.
- 3.9. INFORMAL ACTION. Any action required to be taken at a meeting of directors, or any action which may be taken at a meeting of directors or of a committee of directors, may be taken without a meeting if consent in writing setting forth the action so taken is signed by all of the directors or all of the members of the committee of directors.

- 3.10. REMOVAL and VACANCIES. A director shall be subject to removal with or without cause, at a meeting called for that purpose with a two-thirds (2/3) vote of the entire Board of Directors. Any vacancy that occurs on the Board of Directors, whether by death, resignation, removal or any other cause, may be filled by the remaining directors. A director elected to fill a vacancy shall serve the remaining term of his or her predecessor, or until a successor has been elected and qualified.
- 3.11. COMPENSATION. Directors as such shall not receive any salaries for their services, but by resolution of the Board of Directors, a reasonable fixed sum and reasonable expenses of attendance, if any, may be allowed for attendance at each regular or special meeting of the Board; provided, however that nothing herein contained shall be construed to preclude any Director from serving The Corporation in any other capacity and receiving compensation therefor.
- 3.12. EMERITUS DIRECTORS. The board may appoint "Emeritus Directors" of The Corporation at any meeting or by informal action. Emeritus Directors are key members of The Corporation have moved The Corporation to new heights. Emeritus Directors may not vote or make any official action at meetings or execute any informal action of The Corporation unless also elected to the Board of Directors.
- 3.13. FOUNDING DIRECTORS. The Founding Directors are recognized by The Corporation as perpetual Emeritus Directors who were responsible for the creation of The Corporation and are as follows:
- Thomas W Carrier
 - Omicah House
 - John Bunker
 - Maggie Cassaro
 - T. David Mattingly
 - Kevin Bryan
 - Rowdy Whitworth

4. OFFICERS

- 4.1. NUMBER of OFFICERS. The executive officers of The Corporation shall be a President, Vice President, Treasurer, and Secretary. Two or more offices may be held by one person. The President may not serve concurrently as a Vice President. The Board of Directors may appoint additional officers, assistant officers, agents, employees and independent contractors. The Board of Directors and or the President may employ such other agents, employees and independent contractors as he may deem advisable for the prompt and orderly transaction of the business of The Corporation and may prescribe their duties and the conditions of their employment, fix their compensation and dismiss them at any time without prejudice to their contract rights.

- 4.1.1. **President/Chairman.** The President shall be the chief executive officer and shall in general supervise and control all affairs of The Corporation. The President shall preside at all meetings of the Board of Directors and its Executive Committee, if such a committee is created by the Board.
 - 4.1.2. **Vice President/Vice Chairman.** The Vice President shall perform the duties of the President in the absence of the President and shall assist that office in the discharge of its leadership duties.
 - 4.1.3. **Secretary.** The Secretary shall give notice of all meetings of the Board of Directors and Executive Committee, shall keep an accurate list of directors, and shall have the authority to certify any records, or copies of records, as the official records of The Corporation. The Secretary shall maintain the minutes of the Board of Directors' meetings and all committee meetings. The Secretary shall assist the Treasurer in the discharge of that office.
 - 4.1.4. **Treasurer.** The Treasurer shall be the chief financial officer and responsible for conducting the financial affairs of The Corporation as directed and authorized by the Board of Directors and Executive Committee, if any, and shall make reports of corporate finances as required, but no less often than at each annual meeting of the Board of Directors and Executive Committee or upon request of the President or the Board of Directors.
- 4.2. **ELECTION and TERM of OFFICE.** The officers shall be elected each even numbered calendar year by the Board of Directors at the Annual Meeting following the election of the Board of Directors. Each officer shall serve a 2 year term or until a successor has been elected and qualified. If an officer is a Director, the officer's term as director automatically extends to the end of the officer's term as officer.
 - 4.3. **TERM LIMITS.** Officers may serve in an office consecutively up to three terms. There is no limit to the overall number of terms an officer may serve.
 - 4.4. **REMOVAL or VACANCY.** The Board of Directors shall have the power to remove an officer of The Corporation before the end of the officer's term with a two-thirds (2/3) vote of the entire Board of Directors. Any vacancy that occurs for any reason may be filled by the Board of Directors.

5. COMMITTEES

- 5.1. **COMMITTEES.** To the extent permitted by law, the Board of Directors may appoint from its members a committee or committees, temporary or permanent, and designate the duties, powers and authorities of such committees from time. Each committee must include at least one (1) member of the Board of Directors. Committees may also include members that are not members of the Board of Directors. The Board may designate one or more Directors as alternate members of any committee.

- 5.2. ABSENCE of DIRECTORS. In the absence of a Director at any meeting of a committee, committee members present and not disqualified from voting, whether or not a quorum exists, may unanimously appoint an Acting Director to act at the meeting in place of the absent Director.
- 5.3. STANDING COMMITTEES. The Board may adopt standing committees in accordance with these Bylaws.
- 5.4. QUORUM and ACTIONS. At all meetings of a committee, the presence of at least a majority of the members of such committee shall be necessary and sufficient to constitute a quorum for the transaction of business. Resolutions of a committee shall be adopted, and any action of the committee upon any matter shall be valid and effective, with the affirmative vote of a majority of the members of the committee present at a meeting duly convened and at which a quorum is present.
- 5.5. AUTHORITY of BOARD. Any action taken by any committee shall be subject to alteration or revocation by the Board of Directors; provided, however, that third parties shall not be prejudiced by such alteration or revocation.

6. CORPORATE SEAL, EXECUTION OF INSTRUMENTS

- 6.1. The Board of Directors may prescribe the form of a suitable corporate seal, which shall contain the full name of The Corporation and the year and state of incorporation. All instruments that are executed on behalf of The Corporation which are acknowledged and which affect an interest in real estate shall be executed by the President or Secretary. All other instruments executed by The Corporation, including a release of mortgage or lien, may be executed by the President or any Vice President. Notwithstanding the preceding provisions of this section, any written instrument may be executed by any officer(s) or agent(s) that are specifically designated by the resolution of the Board of Directors.

7. AMENDMENT TO BYLAWS

- 7.1. The bylaws may be amended, altered, or repealed by the Board of Directors by a two-thirds majority of a quorum of a quorum vote at any regular or special meeting. The text of the proposed change shall be distributed to all board members at least ten (10) days before the meeting.

8. INDEMNIFICATION

- 8.1. **RIGHT to INDEMNIFICATION.** Any director or officer who is involved in litigation by reason of his or her position as a director or officer of this organization shall be indemnified and held harmless by The Corporation to the fullest extent authorized by law as it now exists or may subsequently be amended (but, in the case of any such amendment, only to the extent that such amendment permits The Corporation to provide broader indemnification rights).
- 8.2. **FUNDING and INSURANCE.** The Corporation may create a trust fund, grant security interest, cause a letter of credit to be issued or use other means (whether or not similar to the foregoing) to ensure the payment of all sums required to be paid by The Corporation to effect indemnification as provided in this Article. The Corporation may purchase and maintain insurance to protect itself and any indemnitee against any expenses or liability incurred by the indemnitee in connection with any Action, whether or not The Corporation would have the power to indemnify the indemnitee against the expenses or liability by law or under the provisions of this Article.

9. CONFLICTS OF INTEREST

- 9.1. **DISCLOSURE.** In connection with any actual or possible conflict of interest, an interested person must disclose the existence and nature of his or her financial interest to the Directors and any relevant committee members. For the purpose, an interested person shall include any Director, officer, or member of a committee of The Corporation or an entity affiliated with The Corporation who has a direct or indirect financial interest in a proposed transaction or arrangement. A Director or member of a committee shall not be deemed to have a possible conflict of interest solely by reason of serving, or having served, on the Board of Directors of any corporation affiliated with The Corporation.
- 9.2. **RECUSAL and INVESTIGATION.** After disclosure of the financial interest, the interested person shall leave the Board or committee meeting while the financial interest is discussed and voted upon. The remaining Directors or committee members shall decide if a conflict of interest exists. If a conflict exists, the following procedures shall be followed:
- 9.2.1. The President shall, if appropriate, appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement;
- 9.2.2. After exercising due diligence, the Directors or committee shall determine whether The Corporation could obtain a more advantageous transaction or arrangement with reasonable efforts from a person or entity that would not give rise to a conflict of interest;
- 9.2.3. If a more advantageous transaction or arrangement is not reasonably attainable, the Directors or committee shall determine by a majority vote of the disinterested

directors whether to enter into the transaction or arrangement.

- 9.3. **FAILURE to DISCLOSE.** If a Director or committee member has reasonable cause to believe that an interested person has failed to disclose actual or possible conflicts of interest, he shall inform the interested person of the basis of such belief and afford the interested person an opportunity to explain the alleged failure to disclose. If after hearing the response of the member and making such further investigation, the Directors or committee determine that the interested person has in fact failed to disclose an actual or possible conflict of interest, the Directors shall take steps to protect The Corporation.

10. DISSOLUTION

- 10.1. The Corporation may be dissolved only with authorization of its Board of Directors at a special meeting called for that purpose, and with the subsequent approval by no less than two-thirds (2/3) vote of entire Board of Directors. In the event of the dissolution of The Corporation, the assets shall be applied and distributed as follows:

All liabilities and obligations shall be paid, satisfied and discharged, or adequate provision shall be made therefore. Assets not held upon a condition requiring return, transfer, or conveyance to any other organization or individual shall be distributed, transferred, or conveyed, in trust or otherwise, to charitable and educational organizations, organized under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, of a similar or like nature to this organization, as determined by the Board of Directors.

I certify that the foregoing is a true and correct copy of the bylaws of the above named organization , duly adopted by the initial Board of Directors on the date stated below.

Exhibits

Updated 1/3/2018

A. Schedule of Director Term Elections

- a.
- b. 2019 Directors Positions Up For Election
 - i. Omicah House
 - ii. Todd Mercier
 - iii. James Wolfe
- c. 2020 Directors Positions Up For Election
 - i. Michael Adams
 - ii. Brent Turner
- d. 2021 Directors Positions Up For Election
 - i. Thomas W Carrier
 - ii. Ashleigh Donaldson
 - iii. Jeramy Harris

B. Schedule of Officer Elections (Every Even Calendar Year)

- a. 2018 Officers Up For Election
 - i. President - Thomas W Carrier
 - ii. Vice President - Omicah House
 - iii. Treasurer - Open
 - iv. Secretary - Open

LOUISVILLE

PRIDE FESTIVAL

HOST SPONSORS



GE APPLIANCES

SEPTEMBER 21 2019 | 11 AM - 11 PM

THE HIGHLANDS

GRINSTEAD DR & BARDSTOWN RD

DONATIONS ACCEPTED AT ALL GATES

HEADLINERS

TODRICK HALL | ALLY BROOKE

ULTRA NATÉ

FEATURED HIGHLIGHTS

DANCE DOME | FAMILY ZONE | WELLNESS ZONE

LIVE PERFORMANCES

ROBBIE BARTLETT | DRAG SHOW | DJ SYIMONE
 MAMA SAID STRING BAND | KENTUCKY BEATNIKS
 THE ADRIAN TAYLOR BAND | VOICES OF KENTUCKIANA
 LOUISVILLE GAY MEN'S CHORUS | PANDORA PRODUCTIONS
 LAVON FISHER-WILSON & THE QUEENS OF FUNK & SOUL
 LOUISVILLE SILENT DISCO

DRAG ENTERTAINERS

ROMAN HEART | ZSA ZSA GABORTION | ADONIS CASANOVA
 VANESSA DEMORNAY | ROCKY VALENTINO | UMI NAUGHTY
 ANYA ANDROVNA | NICOLE VALENTINO | COURTNEY CARSON

FEATURED DJs

DJ SLEEPY T | DJ DALE | DERBY CITY SOUL | COGNATE SOUL
 WITH FEATURED MCs - SYIMONE & LEAH HALSTON

ADDITIONAL SPONSORS



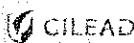
Tito's



BIG BFA



Lite



LOUISVILLE amazon

