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



Applicant/Program: South Louisville Community Ministries		
Executive Summary of Request:		
South Louisville Community Ministries wi Louisville. Revenue generated will be depo assist with programming it provides as wel The agency provides emergency assistance medications.	Il hold a fundraiser in the name of The Taste of South sited directly into the operation account of the agency to I as to offset the expenses incurred in holding the event. to qualifying residents for partial rent, utilities and	
The event is open to the public and is great	exposure for restaurants and vendors in south Louisville.	
Is this program/project a fundraiser? Is this applicant a faith based organization? Does this application include funding for sub-	yes □ No □ Yes □ No □ Yes □ No □ Yes □ No	
within Metro Council guidelines and request a	Development Fund Application and have found it complete and approval of funding in the following amount(s). I have read the be furthered by the funds requested and I agree that the public the disclosure section below, if required.	
District # Primary Sponsor Signature	the 2000	
Primary Sponsor Disclosure List below any personal or business relationsh organization, its volunteers, its employees or relationsh	tip you, your family or your legislative assistant have with this members of its board of directors.	
Approved by:		
Appropriations Committee Chairman	Date	
Clerk's Office Only:		
Request Amount:	Committee Amended Appropriation:	
Original Appropriation:	Council Amended Appropriation:	

Applicant/Program: SOUTH LOUISVILLE COMMUNITY MINISTRIES

"TASTE OF SOUTH LOUISVILLE

# **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.

2,600	2) District #	Council Member Signature	2000 Amount	77744 Date
1,000	District #	Vicki Anbrey Wolch Council Member Signature	#1,000°© Amount	7-17-14 Date
1000	District #	Council Member Signature	Amount	Date
200.	$\frac{3}{\text{District }\#}$	Makes Morke's Council Member Signature	300 95 Amount	7-17-14 Date
560	District #	Council Member Signature	Sou— Amount	$\frac{1/24/14}{Date}$
1,000	District #	Mul Blackwall St. Council Member Signature	\$/100_00 Amount	$\frac{7}{17}$
	District #	Council Member Signature	Amount OF	7/17/14 Date
			•	

2|Page Effective February 2014

NDF NON-PROFIT APPLICATION CHECKLIST	
Legal Name of Applicant Organization: 1004 LOUISUNG COMMUNITY NUN	DINIA
Program Name: 10 1, 0 10th All Request Amount: 4,000	Yes/No/NA
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?	$\Box V$
Request form: Is the funding proposed less than or equal to the request amount?	\forall \tag{ \} \tag{ \tag} \} \tag{ \ta}
Request form: Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?	
Application Page 1: Has prior Metro funds committed/granted been disclosed?	7
Application Page 1: Is the application properly signed and dated by authorized signatory?	<u> </u>
<b>Application Page 3:</b> Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?	
Application Pages 3 – 5: Is the proposed public purpose of the program well-documented?	V
Application 4: Is there adequate documentation of how the proceeds of the fundraiser will be spent?	i V
Application Budget Page 6: Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for "Metro, Non Metro and Total" expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?	Y
Faith Based Organizations: Is the signed Faith Based Form signed and included?	Y
Jefferson County Only: Will all funding be spent in Louisville/Jefferson County?	У.
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?	MIA
<ul> <li>Good Standing: Is the entity in good standing with:</li> <li>Kentucky Secretary of State – include Secretary of State website information on organization</li> <li>Louisville Metro Government – check OMB monthly report filed in Council Financial Reports</li> <li>Internal Revenue Service – most recent Form 990 included</li> </ul>	YD
<b>Separate Taxing Districts:</b> If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?	ha.
Small Cities: Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)	na
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?	VW
IRS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	YU
Operating Budget: Is the organization's current fiscal year operating budget included?	Vis
Ordinance Required: Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.	Yes
Board Members: Is the entity's board member list (with term length/term limits) included?	Nh
Staff: Is a list of the highest paid staff included with their expected annual personnel costs?	
Annual Audit: Is the most recent annual audit (if required by organization) included?	na
Rent Requests: Is a copy of signed lease included?	ho
Articles of Incorporation: Are the Articles of Incorporation of the organization included?	Vi
IRS Form W-9: Is the IRS Form W-9 included?	VPA
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?	NW
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?	na
Prepared by: Date: July (7, 2)	014



SECTION 1 - APPLICANT INFORMATION						
Legal Name of Applicant Organization: South Louisville Community Ministrice						
(as listed on: http://www.sos.kv.gov/business/records)  South Louisville Community Ministries						
Main Office Street & N	Mailing Address: 4	15 1/2 West Asl	nland Ave, Lo	ouisville	, KY 40214	
Website: slcm.org						
Applicant Contact:	J. Gregory Pike		Title:	73.55	Interim Executi	ve Director
Phone:	(502) 361-7763		Email:		pnancygregory	@bellsouth.net
Financial Contact:	Kate Husk		Title:		Deputy Director	-Client Services
Phone:	(502) 361-7763	 	Email:		katehusk@gma	ail.com
Organization's Represe	entative who atte	nded NDF Train	ing: Greg Pik	e and l	Kate Husk	
GEOG	RAPHICAL AREA(S	) WHERE PROGI	RAM ACTIVIT	IES ARE	(WILL BE) PROVIDED	
Program Facility Locat	ion(s): 415 1/2	West Asland	Ave, Louisvi	lle, KY	40214	
Council District(s):	6, 12, 1	3, 15, 21, 25	Zip Cod	e(s):	40208, 40214,	40215
	SECTION 2 - PR	ROGRAM REQUI	ST & FINANC	HAL INF	ORMATION	
PROGRAM/PROJECT N	AME: Taste of S	South Louisville	····			
Total Request: (\$)	\$8000	Total Metro A	ward (this pro	ogram) i	n previous year: (\$)	\$8000
Purpose of Request (cl	heck all that apply	·):				
1	nds (generally can					
Programming	g/services/events f	for direct benefi	t to commun	ity or qu	alified individuals	
Capital Proje	Capital Project of the organization (equipment, furnishing, building, etc)					
The Following are Req	The Following are Required Attachments:					
IRS Exempt Status Determination Letter Signed lease if rent costs are being requested						
Current Year Projected Budget     IRS Form W9     Ist of Board of Directors (include term & term limits     Evaluation forms if used in the proposed program			■ IRS Form W9			
			orogram			
Current financial state		ļ			uired by organization)	•
Most recent IRS Form Articles of Incorporati		***************************************			zation Certification For	m, if required
Cost estimates from p		equest is for	Staff inclu	ıding the	3 highest paid staff	
capital expense						
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: L	ou Metro Formul	a Grant	Amount: (\$)	9	3172,000	
Source: N	IDF Families Hel	ping Families	Amount: (\$)		8000	
Source: N	IDF Taste of Sou	ıth Louisville	Amount: (\$)	51454555	8000	
Has the applicant contacted the BBB Charity Review for participation?						
Has the applicant met t	he BBB Charity Re	view Standards	P ■ Yes 🗌	No		

Page 1 Effective April 2014





#### SECTION 3 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

South Louisville Community Ministries' mission is to enhance the social, health, economic and community development of adults, youth and children by coordinating resources.

South Louisville Community Ministries works with various groups and other community resources to provide emergency financial assistance for rent eviction notices and brown out notices from utility companies. The agency provides emergency financial assistance for medications, prescription eye-glasses, and provides a food pantry for the distribution of USDA commodities, Dare-to-Care food bank food and food donated by churches and other groups.

Our agency operates seven (7) Meals on Wheels routes serving over sixty-five home-bound elderly each day. The SLCM Adult Day Care Program serves over twenty-five mentally and physically challenged adults in a medical-model, activities program. Utilizing interns from local colleges we are able to offer marriage and family counseling to a limited number of client. Recently a volunteer has begun offering Job Coaching/Counseling services to our clients.

In recent years we have averaged assisting over one-thousand families with financial assistance for shelter and utilities, over six-hundred individuals with medication assistance, and over forty-five-hundred families with food. Unfortunately, it is estimated that we are unable to assist in excess of seven-thousand families due to a lack of staff and/or financial resources or due to clients exhausting their allowed number of visits in one year.

The goal of the Ministries is to reduce the number of families that are turned away due to lack of resources. Fund raisers such as The Taste of South Louisville help us to attain that goal.





#### SECTION 4 \* PROGRAM/PROJECT NARRATIVE

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

The Taste of South Louisville is a one-day event, open to the general public, which will be held on August 23, 2014 from 6:00 PM to 8:30 PM at Churchill Downs on Millionaires Row. It is a food tasting event in which patrons pay an admissions fee to receive a sample of various specialty foods from participating South Louisville and Metro Louisville restaurants.

In addition to admissions, revenue is also generated by requesting participating restaurants to donate their food samples to help offset the expenses of the event and to enhance the profitability of the event. Revenues in excess of expenses of the event will produce profit for the event. Funds generated by this event in excess of the NDF Grant dollars (\$8000) will go directly back into the operation of the agency and to the programming it provides.

NDF dollars are requested to offset the general operating expenses that are the major expense in this community event/fund raiser.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s): The \$8000 of NDF dollars requested by this application will be used as follows:

\$3800: will be utilized to provide emergency assistance to qualifying residents residing in the South Louisville area. This assistance may be in the form of partial payments for rent, utilities and/or medications/prescription eye wear.

\$4200: will be used to offset expenses incurred in holding the event, i.e., expenses associated with the venue (Churchill Downs) and miscellaneous costs including decorations, table cloth rental, and the cost of food that will be purchased (which is in addition to the food donated by participating restaurants).

There are no sub-grantees involved in this project.





C: If this request is a fundraiser, please detail how the proceeds will be spent:  The NDF dollars requested are to offset the general operating costs that are the major expenses in fund raising events and to help generate profits for the event.
Funds generated by this event will go directly back into the operation of the agency and to the programming it provides (described on Page 2).
<b>D:</b> For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:
☐ Effective October 24, 2013, reimbursements should not be made unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):  ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.
☐ The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:  ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.
The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.





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: As described on Page 2 of this application, detailed statistics on the numbers of individuals and families that the agency serves are kept. Identifications of all individuals and families are logged into a master data base. Services and dates of services rendered are subsequently entered into that same database. Monthly reports are generated from each of our service areas and presented to the SLCM Board of Directors for review. 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. The South Louisville Community Ministries realizes that to best serve the needy of South Louisville it is essential to build partnerships with other community organizations. We currently have numerous relationships with other organizations that help support and sustain the programming offered by SLCM. A partnership with Dare-to-Care places in excess of \$200,000 worth of food into our pantry for distribution to those in need. A relationship with Jewish hospital Foundation funds two of our seven Meals on Wheels routes and provides funding for financial assistance for medications. SLCM is very proud of the on-going relationships it has built with the PNC Foundation, Kosair Charities and LG&E Foundation. to just name a few.





## SECTION:5 - PROGRAM/PROJECT/BUDGET-SUMMARY

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

	Column .	Column 2 Non-	Golumn (3+2)≢3 Total
Program/Prolect Expenses	Proposed Metro Funds	Metro Funds	Funds
A: Personnel Costs including Benefits			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (Attach Detailed List)	\$3800		\$3800
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (Attach Detail List)	\$4200		\$4200
J: Small Equipment			
K: Capital Equipment			
L: Other Expenses (Attach Detail List)			
*TOTAL PROGRAM/PROJECT FUNDS	\$8000		\$8000
% of Program Budget	100 %	%	100%

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

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	
Fees Collected from Program Participants	\$10,000 (Admission Fees)
Other (please specify)	\$5000 (Silent Auction/Sponsors)
Total Revenue for Columns 2 Expenses **	\$15,000

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

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

# LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION SECTION 5 F. CLIENT ASSISTANCE

\$3800: will be utilized to provide emergency financial assistance to qualifying residents residing in the South Louisville area. This assistance may be in the form of partial payments for rent, utilities and/or medications and prescription eye wear.

Program Exp Category	Proposed Budget	
F. Client Assistance	\$3800	
I. Community Events & Festivals	\$4200	
Total	\$8,000	



# LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION SECTION 5 I. COMMUNITY EVENTS & FESTIVALS

Program Exp Category	Proposed Budget	
F. Client Assistance	\$3800	
I. Community Events & Festivals	\$4200	
Rental Fees: table- cloth, mic/podium (CD)		\$650
Printing and Signage		\$525
Flowers & Decorations		\$200
Purchase of Food		\$2,000
Paper Supplies		\$400
Permit		\$25
Postage		\$150
Insurance		\$100
Guest Srvs (CD)		\$150
		Total: \$4200
Total	\$8,000	





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
Rental of Venue (Churchill Downs)	\$8000	Fair Market Value
Silent Auction Items	\$2500	Fair Market Value
Donated Food (Vendors)	\$5000	Fair Market Value
Volunteers	\$5000	250 HRS @\$20
Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution &Other In Kind)	\$20,500	

* 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: July 1, 2014		
Does your Agency anticipate a significa budget projected for next fiscal year?	nt increase	or decrease in your budget from the current fiscal year to the YES
If YES, please explain:		





#### SECTION 6 – CERTIFICATIONS & ASSURANCES

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

#### Standard Assurances

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

#### Standard Certifications

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

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

#### SECTION 7 - CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:

Legal Signatory: (please print):

Date: July 7, 2014

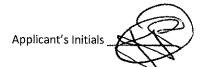
Interim Ex Director

Phone: (502) 361-7763

Extension:

Email: pnancygregory@bellsouth.net

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# SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION REQUIRED ATTACHMENTS

# A) IRS EXEMPT STATUS DETERMINATION LETTER

# **B) CURRENT YEAR PROJECTED BUDGET**

ATTACHED IS CONSOLIDATING BUDGET – UNRESTRICTED FUNDS FOR FISCAL YEAR ENDED JUNE 30, 2014 (FISCAL YEAR 2014-2015 BUDGET TO BE APPROVED AT SLCM BOARD MEETING ON JULY 28, 2014; CURRENTLY OPERATING ON CONTINUATION BUDGET OF FISCAL YEAR 2013-2014)

## C) LIST OF BOARD OF DIRECTORS

# D) CURRENT FINANCIAL STATEMENT

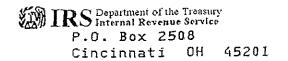
BALANCE SHEET AS OF 5/31/2014, AND INCOME STATEMENT FOR THE 11 PERIODS ENDED 5/31/2014

- **E) ARTICLES OF INCORPORATION**
- F) IRS FORM W9
- **G) ANNUAL AUDIT**

JUNE 30, 2012 AND 2011

H) STAFF (INCLUDING THE 3 HIGHEST PAID)

**EMPLOYEE CENSUS** 



In reply refer to: 0248367569 Mar. 20, 2012 LTR 4168C E0 31-0891259 000000 00

00017552

BODC: TE

SOUTH LOUISVILLE COMMUNITY MINISTRIES INC 4803 SOUTHSIDE DR LOUISVILLE KY 40214-2111



012242

Employer Identification Number: 31-0891259
Person to Contact: Mrs. Black
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Mar. 09, 2012, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in SEPTEMBER 1976.

Our records also indicate that you are not a private foundation within the meaning of section 5.09(a) of the Code because you are described in section(s) 5.09(a)(1) and 1.70(b)(1)(A)(1).

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

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



012242.179825.0062.002 I AB 0.374 532 նվերվիլիիկնակայինկինիկին ներակինի



SOUTH LOUISVILLE COMMUNITY MINISTRIES INC 4803 SOUTHSIDE DR LOUISVILLE KY 40214-2111

012242

CUT OUT AND RETURN THE VOUCHER AT THE BOTTOM OF THIS PAGE IF YOU ARE MAKING A PAYMENT, EVEN IF YOU ALSO HAVE AN INQUIRY.

The IRS address must appear in the window. 0248367569

INTERNAL REVENUE SERVICE

Cincinnati OH 45201 Mahhhaddhamdhad

P.O. Box 2508

BODCD-TE

Use for payments

Letter Number: Letter Date : 2012-03-20 Tax Period :

LTR4168C 000000

\*310891259\*

SOUTH LOUISVILLE COMMUNITY MINISTRIES INC 4803 SOUTHSIDE DR LOUISVILLE KY 40214-2111

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2	····				olidating Bud			····			
3					iscal Year Er						
4											
5				Administrative			Meals	Total			
6		ļ			Assistance	Care	On Wheels				L
<del></del>	Income			0.000	2,000	3,000	750	11,750			
	Donations   Church Group Donation	<u></u>		6,000 1,000	2,000	3,000	750	1,000			
	Business Contribution			1,000				1,000			
	Federal Employee Do							0			
	Family Health Centers							0			
13	Metro United Way-EA							0			
	Miscellaneous					3,000		3,000			
-	Christmas Baskets							0			
	Donations-MOW	Cantalbudi		7.000	2,000	6,000	750	0 15,750			
17	Total Donations and	Contribution	DIIS	7,000	2,000	0,000	100	15,750			
	Fundraising Efforts										
	Annual Fund			30,000				30,000			
21	Penny Wars-Public S			1,000				1,000			
	15,000 Matching Gran			0				0			
	10,000 Matching Gran			0				16 000		•	
	Taste of South Louisy	riite		16,000 7,000				16,000 7,000			
	Golf Scramble Kosair Charities Gran	ļ		7,000				7,000			
	Kroger Cards and Ap			500				500			
28	Annual Fund-Families	Helping Fa	milies	14,000				14,000			
	Total Fundraising			68,500				68,500			
30											
	Adult Day Care							AA			L
	Private Pay	1				26,000		26,000			
	KIPDA Medicaid Fees					137,000 130,000		137,000 130,000			
35	ivieuicaiu rees		<b></b>		<u> </u>	130,000		1,00,000			
	Total ADC					293,000		293,000			
37						-,		.,			
38	Grants										
	City of Louisville Eme		L	35,988	76,182			112,170			
	IIIC Meals on Wheels						11,000	11,000			
	Kosair	h Kidla Café	<u> </u>					0			
	Saint Mary & Elizabet Van Grant	II-Niu S Cale	; 					0			
	Sisters of Charity of N	lazareth					2,500	2,500			
	City of Louisville-Dan			16,000				16,000			
46											
	Total Grants			51,988	76,182		13500	141,670			
48	271			<u> </u>							
	Other Denotion										
	Church Donations Miscellaneous		ļ								<b></b>
	Total Other	<del> </del>		1							
53		<del> </del>	<b></b>	1							
54	Total Core Income			127,488	78,182	299,000	14,250	518,920			
55											
	in Kind Contribution	ıs	ļ	30,000	212,340			242,340	ļ		ļ.,
57	7-1-10				200 500	200 000	44.050	764 000			
58 59	Total Revenue		<b> </b>	157,488	290,522	299,000	14,250	761,260			
	Expenses	1									i
61	Personnel	<del> </del>		1							
	Salaries			63,888	50,952	176,040	12,870	303,750			
63	Payroll Taxes			5,111	4,076	14,083	1,030	24,300			
64	Health Insurance			5,075	6,154	29,464	285	40,978			
	Housing Allowance		ļ			0.701		2 701			
	Other Fringes	1	<u> </u>	<del> </del>		2,701	<u> </u>	2,701			
68	Bonus Total Payroll Taxes	and Fringer	<u> </u>	74,074	61,182	222,288	14,185	371,729			
69	TOTAL TAYLOR TAXES	and i miget	<u> </u>	14,014	01,102	222,200	17,100	0.1,120			
	Operating Expenses										
71	Accounting Fee			8,000	0			8,000			
	Contract Labor			0				0			
	Advertising	ļ		100	0.005			100			
74	Audit Fee			1,125	6,375 300		<u> </u>	7,500 350			ļ
75	Bank Service Charge Bingo-Bunco Supplie	·	<del> </del>	50	300	0		350			<b></b>
77	Meals and Entertainn	nent	<del> </del>	1,200		·	<u> </u>	1,200			-
1 1 1	forces and cittertains			1 1,200			L		1		<u> </u>

	_ i	D	E	F	G	н	1	J	к	L	M	N
a neerie	C		<u> </u>	<u> </u>	1,800	- 11	<del>'</del>	-	1,800			
	Postage					250			500			
	Printing				250	250	0.000	100	9.100			
	Program S						9,000	100				
		ood Supplie	S				9,000		9,000			
	Nursing Su	pplies					0		0			
	Outings						2,000		2,000			
	Golf Scram				2,500				2,500			
04	Volunteer (	Gas Cards							0			
05	Rent Exper	rse			5,000		11,400		16,400			
06	Repairs an	d Maintenar	nce-Bldg		1,500	1,500	3,000		6,000			
07	Taste of So	outh Louisvi	le		2,000		0		2,000			
08	Volunteer /	Appreciation	Training						0			
09	Telephone	and Interne	t		1,000	2,000	4,000		7,000			
		age Reimbi			300		10,000	850	11,150			
	Training				0		200		200			
	Utilities				Ö	5,550			5,550			
		is and Main	enance		ō		11000		11,000			
		nd Expense	0.1.0.1.00		2,000				2,000			
		rating Expe	neae		48,708	18,793	71,160	1,300	139.961	*		
		Operating			122,782	79,975	293,448	15,485	511,690			
		cated Expe			122,102	10,010	2001:10					
		Lated Expe	1363				······					
118					30,000	212,340			242,340			
	in Kind Ex	penses			30,000	212,070			212,010			1
120		i			152,782	292,315	293,448	15,485	754,030			
	Total Expe	enses			152,762	252,313	293,440	13,403	734,000			<del> </del>
122		/ <u> </u>			4 700	(4.702)	5,552	(1,235)	7.230			
		ıs (Deficit)			4,706	(1,793)	5,552	(1,233)	1,230			
124					(0.50)				(350)			
	Interest E				(350)				9,000			<del> </del>
	Other Incir	ne	.,		9,000							
127	<u> </u>				8,650				8,650			
128									0			
	Metro Forr	nula Grant				15,230			15,230			<del> </del>
	All other								0			<del> </del>
131	Christmas	Baskets-Re	stricted			4,000			4,000			ļ
132	Total Rest	tricted Pass	Through		8,650	19,230			19,230			-
133		Fund Incor	ne									<b></b>
134	Christmas	Baskets-Re	stricted			(4,000)			(4,000)			ļ
135	Metro Mat	ch Expense										<b>↓</b>
136	Metro Forr	nula Grant				(15,230)			(15,230)			ļ
	Other											<u> </u>
		s through F	unds Expe	nded		(19,230)			(19,230)			
139												
	Net Incom	e (Loss)			13.356	(1,793)	5,552	(1,235)	15,880			
170		<del>;-,</del>		<del></del>		3-7						1
141	1											1

# SOUTH LOUISVILLE COMMUNITY MINISTRIES Board of Directors-Effective July 1, 2014

#### Rob Fohr, President [al]

Presbyterian Mission Agency 1706 Fernwood Ave Louisville KY 40205 262-3270 (cell) 569-5035 (work) Rob.Fohr@pcusa.org

#### Nancy Strapp, Pastor, Vice President [c]

Iroquois Presbyterian Church 970 Palatka Road Louisville, KY 40214 368-1230 church; 548-0991 cell nancy.strapp@my.LPTS.edu

#### Joyce Whalin, Secretary [c]

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#### Craig Oeswein, Treas. Pro-Tem (al)

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## Ollye Clark [c]

Epiphany UMC 321 E. Southside Court Louisville, KY 40214 366-2309 oclark1@bellsouth.net

#### Karen Compton [c]

Lynnhurst UCC 419 Rosewood Ct Louisville KY 40223 245-9245 (H) 794-1280 cell kdc0731@aol.com

#### Donna Harper [c]

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#### Stephan Kirby, Pastor [c]

Ekklesia Christian Life Church 1401 Bluegrass Avenue Louisville, KY 40215 502/594-7681 Ekklesiachristianlife@gmail.com

#### Adam Price [al]

Community At Large 503 Kingston Ave. Louisville, KY 40214 502-424-7871 Adamprice502@gmail.com

#### James (Jim) Thornberry [c]

7310 Arnoldtown Road Louisville, KY 40214 935-8073

#### Debbie Tinker [c]

Our Lady of Mt Carmel 5414 Winding Rd Louisville KY 40214 366-8199 (home) dstink@twc.com

# [al] Member community at large [c] Church related member

G/L Date: 06/17/14

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	Year to Date	Prior Year to Date
Assets		
Current Assets		
Cash - Republic Bank Operating	-469.91	29,363.4
Cash - Emergency Assistance	0.00	17.0
Cash - Emergency Assistanc 769	6,245.24	2,952.5
L&N Federal Credit UnionAct#25	0.00	1,062.5
L&N Federal Credit Union Act#1	0.00	7.0
Cash-Republic-Restricted Funds-0249	23,931.33	22,974.5
Cash-Republic Bank-Emer Assistance	14,992.42	5,886.2
Pelty Cash	50.00	50.0
Petty Cash - ADC	250.00	250.0
Accounts Receivable	0.00	5,000.0
Accts Rec IIIC-Meals on Wheels	2,716.56 170.59	2,481.9
Acct Rec-Gen Acct Rec - ADC - KIPDA	10,353.00	0.0
Acct Rec - ADC - Client Fees	7,490.36	12,984.80 107.00
Acct Rec - ADC - Client rees Acct Rec - ADC - Medicaid	7,450.36 16,551.96	17,301.04
Grants Receivable City of Lou	-13,975,11	-10,587.00
Grant Rec JHSMH Medical Asst	6,481,17	11,611.5
Misc Receivable - IRS	0.00	8,000.00
Health Ins-Dependent	438.88	300.37
Prepaid - Miscellaneous	2,000.00	0.00
Total Current Assets:	77,226.49	109,763.09
Fixed Assets		
Furniture & Fixtures	19,316.92	21,458.95
Accum. Depr Furn & Fixtures	-17,540.31	-16,846.31
Equipment	17,757.07	3,344.37
Accum. Depr Equipment	-1,572.47	-598.47
Vehicles	21,959.60	21,959.60
Accum. Depr Vehicles	-11,768.01	-4,828.72
Leasehold improvements	49,297.07	47,447.07
Accum. Depr Leasehold Imprv	-46,035.61	-42,552.61
CIP - BP	29,256.25	0.00
Total Fixed Assets:	60,670.51	29,383.88
Total Assets:	137,897.00	139,146.97
Liabilities		
Current Liabilities		
Accounts Payable	4,510.82	2,018.90
Month End Accruals	1,476.52	2,410.02
Client Cash - Pass-Thru	1,122.00	140.00
Note Payable - ALLY	501.73	1,796.02
Child Support/Garnishments	20.00	0.00
Total Current Liabilities:	7,631.07	6,364.94
Long-Term Liabilities		
Deferred Revenue	0.00	3,333.36
Total Long-Term Liabilities:	0.00	3,333.36
Total Liabilities:	7,631.07	9,698.30
Equity		
Net Assets - Temp Restricted	35,082.02	7,889.00
Net Assets - Unrestricted	0.00	27,341.56

	Year to Date	Prior Year to Date
Net Assets Retained Earnings-Current Year	102,604.12 -7,420.21	58,011.77 36,206.34
Total Equity:	130,265.93	129,448.67
Total Liabilities & Equity:	137,897.00	139,146.97

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	Period to Date	ORIGINAL PTD Budget	Variance	Var %	Year to Date	ORIGINAL YTD Budget	V	17. 01
Revenue			Validities	V31 75	rear to pate	1 ID Budget	Variance	Var %
Revenue								
Church Group Donation	0.00	0.00	0.00	0.00	332.00	0.00	332.00	0.00
Total Revenue:	0.00	0.00	0.00	0.00	332.00	0.00	332.00	0.00
Donations & Contributions								-,
Federal Employee Donations	60,69	0.00	60.69	0.00	109.64	0.00	109.64	0.00
Donations	1,077.50	500.00	577.50	115.50	14,677.87	5,500,00	9,177.87	166.87
Donations - EA	-140.00	166,67	-306,67	-184.00	1,686.01	1,833,37	-147.36	-8.04
Donations	0.00	250,00	-250.00	-100.00	1,000.00	2,750.00	-1,750.00	-63.64
Donation	0.00	62.50	-62.50	-100.00	0.00	687.50	-687.50	-100.00
Donations - MOW JHSMH	0.00	0.00	0.00	0.00	498.00	0.00	498.00	0.00
Donations - BP Project	0.00	0.00	0.00	0.00	44,965.00	0.00	44,965.00	0.00
Business Contributions	0.00	0,00	0.00	0.00	270.00	0.00	270,00	0.00
Memorials	0.00	0.00	0.00	0.00	25.00	0.00	25.00	0.00
Memorials - MOW	0.00	0.00	0.00	0.00	25.00	0.00	25.00	0.00
Total Donations & Contributions:	998.19	979.17	19.02	1.94	63,256.52	10,770.87	52,485.65	487.29
Fundraising Efforts					,	. 41 41%		707.220
Golf Scramble	0.00	0.00	0.00	0.00	9,011.29	7,000.00	2,011.29	20.70
Annual Fund	0.00	2,500.00	-2,500.00	-100.00	2,039.00	27,500,00	-25,461.00	28.73 -92,59
Annual Fund-Families Helping Families:Gen	0.00	2,333.33	-2,333.33	-100.00	14,080.00	11,666.66	2,413,34	20.69
Kroger Cards:Gen	0,00	41.67	-41.67	-100.00	0.00	458.37	-458.37	-100.00
Kroger Cards	0.00	0.00	0.00	0.00	-662,20	0.00	-662.20	0.00
Volunteer Recognition	0.00	0.00	0.00	0.00	537,80	0.00	537.80	0.00
Penny Wars - Public Schools	0.00	83.33	-83.33	-100.00	0.00	916.63	-916.63	-100.00
Christmas Turkeys/Baskets-Gen	0.00	0.00	0.00	0.00	0.00	4,000.00	-4,000.00	-100.00
Christmas Turkeys/Baskets	0.00	0.00	0.00	0.00	2,328.00	0.00	2,328.00	0.00
Taste of Louisville	0.00	0.00	0.00	0.00	22,788.66	16,000.00	6,788.66	42,43
\$10,000 Matching Challenge	0.00	0.00	0.00	0.00	25.00	0.00	25.00	0.00
Total Fundraising Efforts:	0.00	4,958,33	-4,958,33	-100.00	50,147.55	67,541.66	-17,394.11	-25,75
Adult Day Care						***************************************	7,100 11.1	20., 0
KIPDA Grant - ADC	10,353.60	11,416.67	-1,063.07	-9.31	118,988,20	125,583.37	-6,595.17	5.05
Medicaid Fees - ADC	10,488.00	10,833.33	-345.33	-3,19	90,822.56	119,166.63	·	-5.25
Private Pay - ADC	2,588.40	2,166.67	421.73	19.46	33,300.16	23,833,37	-28,344.07 9,466.79	-23.79 39.72
Total Adult Day Care:	23,430.00	24,416.67	-986.67	-4.04	243,110,92	268,583,37	-25,472,45	-9.48
Grants	,				~	200,000,07	-6J,47 <i>6</i> .40	-9. <del>4</del> 8
Grants - Miscellaneous	2,000.00	0.00	2,000.00	0.00	0.000.00	0.00	0.000.00	
City of Louisville Grant	4,548.08	4,548.08	2,000,00	0.00	9,000.00 50,028.88	0.00 50,028.88	9,000.00	0.00 0.00

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	Period to Date	ORIGINAL PTD Budget	Variance	Var%	Year to Date	ORIGINAL YTD Budget	Variance	Var %
Grants	(Continued)					710 odoget	T CHANGE	70.70
City of Louisville Grant - EA	6,823.08	6,823.08	0.00	0.00	75,053,88	75,053,88	0.00	2.22
Sisters of Charity of Nazareth	0,023.04	208,33	-208.33			•		0.00
Sisters of Chanty of trazarent	0.00	208.33	-208.33	-100.00	0.00	2,291.63	-2,291.63	-100.00
Total Grants:	13,371.16	11,579.49	1,791.67	15.47	134,082.76	127,374.39	6,708.37	5.27
Grants - Meals on Wheels								
Grant IIIC - MOW	2,416.67	2,416.67	0.00	0.00	26,583.37	26,583.37	0.00	0.00
Total Grants - Meals on Wheels:	2,416,67	2,416.67	0,00	0.00	26,583.37	26,583.37	0.00	0.00
Church Contributions								
Church Donations	0.00	83,33	-83.33	-100.00	2,520.68	916.63	1,604.05	174.99
Miscellaneous Income	0.00	0.00	0.00	0.00	130.00	0.00	130.00	0.00
Miscellaneous-ADC	0.00	250.00	-250.00	-100.00	0.00	2,750.00	-2,750.00	-100.00
Total Church Contributions:	0.00	333.33	-333,33	-100.00	2,650,68	3,666,63	-1,015.95	-27.71
In-Kind	****	300.00	000.00	-100.00	2,000.00	0,000.00	-1,010.00	-27.71
in-Kind Food Income	0.00	17,695.00	-17,695,00	-100.00	176,950.00	194,645.00	-17.695.00	-9.09
In-Kind Rent Income	0.00	2,500.00	-2.500.00	-100.00	10,000,00	27,500,00	-17,500.00	-63.64
In-Kind Miscellaneous Income	0.00	0.00	0.00	0.00	1,000.00	0.00	1,000.00	0.00
Total In-Kind:	0.00	20,195.00	-20,195.00	-100.00	187,950.00	222,145.00	-34,195.00	-15.39
Total Revenue:	40,216.02	64,878.66	-24,662.64	-38.01	708,113.80	726,665.29	-18,551.49	-2.55
Gross Profit:	40,216.02	64,878,66	-24,662,64	-38.01	708,113.80	726,665.29	-18,551,49	-2,55
Expenses	•		- ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,	,	(0,001770	2.00
Payroll & Employee Benefits								
Salaries	4,870.66	6,574.00	1,703,34	25.91	58,936.34	72,314.00	13,377,66	18.50
Salaries - Emer Asst	4,705.66	4,679.33	-27.33	-0.58	50,293.26	51,472.63	1,179,37	2.29
Salaries - ADC	13,156.19	14,670.00	1,513.81	10.32	149,247.53	161,370.00	12,122,47	7.51
Salaries - MOW	1,936.00	1,906.67	-29.33	-1.54	21,889.00	20,973.37	-915.63	-4.37
Bonus:	0.00	0.00	0.00	0.00	1,000.00	0.00	-1,000,00	0.00
Payroll Taxes	372.60	425.92	53.32	12.52	4,546.67	4,685.12	138.45	2.96
Payroll Taxes - Emer Asst	360.06	374.33	14,27	3.81	3,875,56	4,117.63	242.07	5.88
Payroli Taxes - ADC	1,003.52	1,173.58	170.06	14.49	11,377,83	12,909.38	1,531,55	11.86
Payroli Taxes - MOW	148.12	152.50	4.38	2.87	1,674.58	1,677.50	2.92	0.17
Insurance - Health/Life/Disab	19.32	422.92	403.60	95.43	1,810.22	4,652,12	2,841.90	61.09
Insurance - Health/Life/Dis EA	513.96	512.83	-1.13	-0.22	5,633.28	5,641.13	7.85	0.14
Insur - Health/Life/Dis - ADC	2,429.57	2,455.33	25.76	1.05	26,805.38	27,008.63	203.25	0.75
Insur - Health/Life/Dis - MOW	479.41	461.75	-17.66	-3.82	4,827.84	5,079.25	251,41	4.95
Other Fringes-ADC	0.00	225.08	225.08	100.00	0.00	2,475.88	2,475.88	100.00

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	Period to Date	ORIGINAL PTD Budget	Variance	Var%	Year to Date	ORIGINAL YTD Budget	Variance	Var%
Total Payroll & Employee Benefits:	29,996.07	34,034.24	4,038.17	11.87	341,917.49	374,376.64	32,459,15	8.67
In-Kind						, , , , , , , , , , , , , , , , , , , ,		0.07
In-Kind Food Expense	0.00	17,695.00	17,695.00	100.00	176,950.00	194,645,00	17,695.00	9,09
In-Kind Rent Expense	0.00	2,500.00	2,500.00	100.00	10,000,00	27,500.00	17,500.00	63.64
In- Kind Miscellaneous Expense	0.00	0.00	0.00	0.00	1,000,00	0.00	-1,000.00	0.00
Total In-Kind:	0.00	20,195.00	20,195.00	100.00	187,950,00	222,145.00	34.195.00	15,39
Operating Expenses					, , , , , , , , , , , , , , , , , , , ,		5 1, 100.00	,0,03
Accounting Service Fee	650.78	666.67	15.89	2.38	7,481,27	7,333.37	147.00	
Advertising	0.00	8.33	8.33	100.00	9.00	91.63	-147.90	-2.02
Audit Fees - Alloc	0.00	93.75	93.75	100,00	1,080.00	1.031.25	91.63	100.00
Audit Fees	0.00	531.25	531.25	100.00	6,120.00	5,843.75	-48.75	-4.73
Bank Service Charges	63,45	4,17	-59.28	-1.421.58	586,31	45.87	-276.25	-4.73
Bank Service Charges	0.00	25.00	25.00	100.00	-11.00	275.00	-540,44 286,00	-1,178.20
Bingo/Bunco Supplies - ADC	160.00	0.00	-160.00	0.00	1,566.49	0.00		104.00
Business Meals & Enter.	0.00	100.00	100.00	100.00	250.56	1,100.00	-1,566,49	0.00
Charitable Contribut-Gen	0.00	0.00	0.00	0.00	60.00	0.00	849.44	77.22
Contract Labor	2,083.33	0.00	-2,083,33	0.00	11,718,73	0.00	-60.00	0.00
Copier Expense - Toshiba	63.80	133,33	69.53	52.15	1,319.67		-11,718.73	0.00
Copier Expense - Toshiba	63,80	133.33	69.53	52.15	732.69	1,466.63 1,466,63	146.96	10.02
Copier Expense - Toshiba	63,79	8.33	-55.46	-665.79	719.66	91.63	733,94	50.04
Depreciation Expense	0.00	550,00	550.00	100.00	5,463.90	6,050.00	-628.03	-685.40
Dues & Subscriptions	219.08	41.67	-177.41	-425.75	3,463.90	6,050.00 458.37	586.10	9.69
Dues & Subscriptions - ADC	0.00	0.00	0.00	0.00	10.00		71.19	15.53
Equipment Repair	0.00	33.33	33.33	100.00	0.00	0.00 366.63	-10.00	0.00
Annual Fund Expense	0.00	166.67	166.67	100.00	00,00		366.63	100.00
Fundraising	0.00	8.33	8.33	100.00	0.00	1,833.37	1,833.37	100.00
Annual Fund-Families Helping Families:Gen	0.00	666,66	666.66	100.00		91.63	91.63	100.00
Golf Scramble Expense	54,76	0.00	-54.76	0.00	3,210.18	3,333.30	123.12	3.69
Insurance - Business	0.00	416.67	416.67	100.00	2,728,14 3,611.84	2,500.00	-228.14	-9.13
Insurance - Adult Day Care	0.00	416.67	416.67	100.00	3,611,84	4,583.37	971.53	21.20
Insurance - Workers Comp	0.00	125.00	125.00	100.00		4,583.37	971.53	21.20
Insurance - Workers Comp	199.80	180.00	-19.80	-11,00	1,063.40	1,375.00	311.60	22.66
Insurance - Workers Comp	133.20	0.00	-133.20	0.00	2,011.20	1,980.00	-31.20	-1.58
Janitorial Expense	0.00	83.33	83.33	100.00	266.40	0.00	-266.40	0.00
Janitorial Expense-EA	0.00	20.83	20.83		44.24	916.63	872.39	95.17
License & Permits	0.00	8.33	20.83 8.33	100.00	31.93	229.13	197.20	86.06
License & Permits	0.00	2.92	8.33 2.92	100.00	135.00	91.63	-43.37	-47.33
License & Permits/Fees - ADC	0.00	2.92 41.67	2.92 41.67	100.00	0.00	32.12	32.12	100.00
Miscellaneous Expense	0.00	20.83	20.83	100.00 100.00	161.00 0.00	458.37 229.13	297.37 229.13	64.88 100.00

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	Period to Date	ORIGINAL PTD Budget	Variance	Var%	Year to Date	ORIGINAL YTD Budget	Variance	Var %
Operating Expenses	(Continued)			70.70	7001100010	Duaget	variance	V Gt. 70
Miscellaneous - Erner Asst	0.00	0.22	0.00	****				
Miscellaneous Exp - ADC	0.00	8.33 8.33	8.33	100.00	0.00	91.63	91.63	100.00
Miscellaneous - MOW	0.00		8.33	100.00	0.00	91.63	91.63	100,00
Office Supplies		4.17	4.17	100.00	0.00	45.87	45.87	100.00
Office Supplies - Emer Asst	13.94 30.02	69.42	55.48	79,92	1,210,27	763.62	-446.65	-58.49
Office Supplies - ADC	0.00	69.42	39.40	56.76	928.40	763.62	-164.78	-21.58
Office Supplies		316.67	316.67	100.00	2,740.15	3,483,37	743,22	21.34
Outings - ADC	120.36	16.67	-103.69	-622.02	452.90	183.37	-269.53	-146.99
Payroll Service Fee	170.43	166.67	-3.76	-2.26	1,150.71	1,833.37	682.66	37.24
Postage	0.00	0.00	0.00	0.00	205.67	0.00	-205.67	0.00
Postage	196.00	150.00	-46.00	-30.67	2,041.71	1,650.00	-391.71	-23.74
Printing Printing	0.00	0.00	0.00	0.00	98.00	0.00	-98.00	0.00
	0.00	20.83	20.83	100.00	0.00	229,13	229.13	100.00
Printing	0.00	20,83	20,83	100.00	0.00	229.13	229.13	100.00
Program Supplies - ADC	100.00	750.00	650.00	86.67	2,222.79	8,250.00	6,027.21	73.06
Program Supplies - MOW	0.00	8.33	8,33	100.00	0.00	91.63	91.63	100.00
Program Food Supplie-Gen	6,88	00.0	-6.88	0.00	6.88	0.00	-6.88	0.00
Program Food Supplies - ADC	1,772.06	750.00	-1,022.06	-136.27	15,041.55	8,250.00	-6,791.55	-82.32
Program Food Supplie-Gen Rent Expense	0.00	0.00	0.00	0.00	11.97	0.00	-11.97	0.00
•	500.00	416.67	-83.33	-20.00	5,500.00	4,583.37	-916.63	-20.00
Rent Expense - ADC	950.00	950.00	0.00	0.00	11,400.00	10,450.00	-950.00	-9.09
Repairs & Maintenance	0.00	125.00	125.00	100.00	3,160.84	1,375.00	-1,785.84	-129.88
Repairs & Maintenance	0.00	125.00	125.00	100.00	833,62	1,375.00	541.38	39.37
Repair & Maint Bldg - ADC	79,99	250,00	170.01	68.00	2,461.46	2,750.00	288.54	10.49
Taste of South Louisville	0.00	0.00	0.00	0.00	3,674.46	2,000.00	-1,674.46	-83.72
Telephone	74.57	83.33	8.76	10.51	843.22	916.63	73.41	8.01
Telephone-Gen	151,40	166.67	15,27	9.16	1,668.15	1,833.37	165.22	9.01
Telephone - ADC	318.23	333.33	15.10	4.53	3,749.14	3,666.63	-82.51	-2.25
Telephone	20.00	0.00	-20.00	0.00	100.00	0.00	-100.00	0.00
Training	0.00	16.67	16.67	100.00	0.00	183.37	183.37	100.00
Travel	0.00	25.00	25.00	100.00	202.84	275.00	72.16	26,24
Travel - ADC	401.28	833.33	432.05	51.85	4,189,24	9,166.63	4,977.39	54.30
Travel - Mileage Reimbursement	62.92	70.83	7.91	11.17	909.00	779.13	-129.87	-16.67
Utilities	. 0.00	0.00	0.00	0.00	-431.09	0.00	431.09	0.00
Utilities	245,23	452.50	217.27	46.98	6,143.14	5,087.50	-1,055.64	-20.75
Utilities-Beechmont Presbyterian:Gen-Gen	0.00	0.00	0.00	0.00	200.00	0.00	-200.00	0.00
Vehicle - Gas & Oil - ADC	898,47	916.67	18.20	1.99	7,376.53	10,083.37	2,706.84	26.84
Vehicle Maintenance - ADC	116.00	0.00	-116.00	0.00	2,123.31	0,00	-2,123,31	0,00
Volunteer Recognition	0.00	0.00	0.00	0.00	1,210,82	0.00	-1,210.82	0.00

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	Period to Date	ORIGINAL PTD Budget	Variance	Var%	Year to Date	ORIGINAL YTD Budget	Variance	Var%
Total Operating Expenses:	9,983.57	11,621.74	1,638.17	14.10	135,786.31	128,339.18	-7,447.13	-5.80
Total Expenses:	39,979.64	65,850.98	25,871.34	39.29	665,653.80	724,860.82	59,207.02	8.17
Net Income from Operations:	236,38	-972.32	1,208,70	124.31	42,460.00	1,804,47	40.655.53	2,253.05
Other Income and Expense						,,	,	_,
Restricted Pass-Through Funds								
Church Donations - Emer Asst	0.00	0.00	0.00	0.00	2.846.34	0.00	2,846,34	0.00
Church Pledges - EA	3,437.34	0.00	3,437,34	0.00	40,250,78	0.00	40,250,78	0.00
Kosair Charities Grant	0.00	0.00	0.00	0.00	5,945.00	0.00	5,945.00	0.00
JHSMH Medial Assistance EA	562.67	0.00	562.67	0.00	17,176,82	0.00	17,176,82	0.00
Metro Formula Grant	3,003.83	3,003.83	0.00	0.00	33,042.13	33,042.13	0.00	
Winterhelp	0.00	0.00	0,00	0.00	32,180.00	0.00	32,180.00	0.00
Donations-Gen	0.00	0.00	0.00	0.00	146.10	0.00	146.10	0.00
Donations - MOW IIIC	0.00	0.00	0.00	0.00	50.00	0.00	50.00	00.0 00.0
Metro Match - Water	0.00	0.00	0.00	0.00	12,102.23	0.00	12,102.23	0.00
Metro Match - LGE	13,667.55	0.00	13,667,55	0.00	30,372.25	0.00	30,372.25	0.00
Total Restricted Pass-Through Funds:	20,671.39	3,003.83	17,667,56	588.17	174,111.65	33,042,13	141,069,52	426,94
Pass-through Funds Expended			•		***************************************	44,4 / 114	1-1,000,02	420.54
PNC Grant-Emer Asst	-1,841,91	0,00	-1.841.91	0.00	-4,448,63	0.00	4 440 00	0.00
Dominican Sisters of Peace	0.00	0.00	0.00	0.00	-1.225.00	0.00	-4,448.63	0.00
Domestic Hunger Grant-EA Expense-Gen	0,00	0.00	0.00	0.00	-1,000.00	0.00	-1,225.00 -1,000.00	0.00
Sisters of Charity of Nazareth Expense	0.00	0.00	0.00	0.00	-393.23	0.00	-1,000.00	0.00
EA Church Pledge Expense	-9,672.00	0.00	-9.672.00	0.00	-98,752,49	0.00	-393.23 -98.752.49	0.00
EA Client Medical Assist	-3,090.99	0.00	-3.090.99	0.00	-33,325,96	0.00	-33,325.96	0.00
Metro Formula Grant	0.00	-3,003.83	3,003.83	100.00	0.00	-33,042.13	-33,325.96 33,042.13	0.00
Christmas Baskets	0.00	0.00	0.00	0.00	0.00	-4,000.00	4,000.00	100.00
Kosaîr Grant Expended	0.00	0.00	0.00	0.00	-5,551,39	0.00	-5,551.39	100.00
Winter Help	-3,928.00	0.00	-3,928.00	0.00	-9,038,00	0.00	-9,038.00	0.00
Metro Match Expenses	0.00	0.00	0.00	0.00	-22,820.00	0.00	-22,820.00	0.00
Metro Match - Water	0.00	0.00	0.00	0.00	-2,834.00	0.00	-22,820.00 -2,834,00	0.00
Metro Match - LGE	-9,892.00	0.00	-9.892,00	0.00	-32,670.00	0.00	-32,670,00	0.00
Metro Neighborhood Dev Grant Exp-Gen	0.00	0.00	0.00	0.00	-4,089.30	0.00	-32,670.00	0.00
NDG-\$12250 Grant	0.00	0.00	0.00	0.00	-7,316.78	0.00	-7,316,78	0.00 0.00
Total Pass-through Funds Expended:	-28,424.90	-3,003.83	-25,421.07	-846,29	-223,464,78	-37,042.13	-186,422,65	-503.27
Other Income & Expense		• • • • • • •		Ţ.J.		المحروب	-100,422.00	-303.27
Interest Expense	-73.61	-29.17	-44.44	-152.35	-527,79	000.00	ene 4-	
Interest Income	0.17	0.00	0.17	0.00	-527.79	-320.87 0.00	-206.92 0.71	-64.49 0.00
							·	2.30

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	Period to Date	ORIGINAL PTD Budget	Variance	Var %	Year to Date	ORIGINAL YTD Budget	Variance	Var %
Other Income & Expense	(Continued)							
Other Income/Expense	-9,367.93	750.00	-10,117.93	-1,349.06	0.00	8,250.00	-8,250.00	-100.00
Total Other Income & Expense:	-9,441.37	720.83	-10,162,20	-1,409.79	-527.08	7,929.13	-8,456.21	-106.65
Total Other Income and Expense:	-17,194.88	720.83	-17,915.71	-2,485.43	-49,880.21	3,929.13	-53,809.34	-1,369.50
Earnings before Income Tax:	-16,958.50	-251,49	-16,707.01	-6,643.21	-7,420.21	5,733.60	-13,153,81	-229.42
Net Income (Loss):	-16,958.50	-251.49	-16,707.01	-6,643.21	-7,420.21	5,733.60	-13,153.81	-229.42

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#### AMENDED AND RESTATED ARTICLES OF INCORPORATION

#### OF

#### SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC.

THE UNDERSIGNED, duly elected secretary of South Louisville Community Ministries, Inc., hereby certifies that said corporation is a non-stock, non-profit corporation incorporated on March 30, 1976, under the laws of the Commonwealth of Kentucky, and, more particularly, Chapter 273 of the Kentucky Revised Statutes.

I further certify that Articles V through X incorporate amendments to the Articles of Incorporation as heretofore amended, and that they supersede said Articles of Incorporation as heretofore amended.

I further certify that the following Amended and Restated Articles of Incorporation were adopted at a meeting of the corporation Board of Directors held on Monday, June 23, 2014, that a quorum was present, and that said Articles received the vote of a majority of the Directors in office.

#### **ARTICLE I**

The name of the Corporation shall be

South Louisville Community Ministries, Inc.

#### **ARTICLE II**

The corporation shall have perpetual existence.

#### <u>ARTICLE III</u>

The Corporation is organized and shall be operated exclusively for charitable and educational purposes as described within Section 501(c)(3) of the Internal Revenue Code of 1954 (or corresponding provisions of any later Federal tax laws), including for such purposes the making of distributions to organizations and individuals for the purpose of engaging in activity falling within the purposes of the Corporation and permitted for an organization exempt under said Section 501(c)(3).

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

The purpose of South Louisville Community Ministries is to coordinate the efforts of the various segments of the community in order to meet the needs of the area.

#### **ARTICLE IV**

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

#### **ARTICLE V**

The principal office of the Corporation is located at:

415 ½ West Ashland Avenue Louisville, KY 40214

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

#### **ARTICLE VI**

In carrying out the corporate purposes described in Article III, the Corporation shall have all the powers granted by the laws of the State of Kentucky, including in particular those listed in Section 273.171 of the Kentucky Revised Statutes, except as follows and as otherwise stated in these Articles:

- a) No substantial part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing or distribution of statements), any political campaign on behalf of any candidate for public office.
- b) Notwithstanding, any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1954 or the corresponding provisions of any subsequent Federal tax laws.

- c) If and so long as the Corporation is a private foundation as defined in Section 509(a) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws:
  - 1) The Corporation shall distribute its income for each taxable year at such time and in such manner as not to become subject to the tax on undistributed income imposed by Section 4942 of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.
  - 2) The Corporation shall not engage in any act of self-dealing as defined in Section 4941(d) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.
  - 3) The Corporation shall not retain any excess business holdings as defined in Section 4943(c) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.
  - 4) The Corporation shall not make any investments in such manner as to subject it to tax under Section 4944 of the Internal Revenue Code of 1954, or corresponding provisions of any later tax laws.
  - 5) The Corporation shall not make any taxable expenditures as defined in Section 4945(d) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

#### **ARTICLE VII**

The Corporation shall be governed by the Bylaws.

Any director may be removed from office by the Board of Directors for reasons set forth in the Bylaws, as they may from time to time be amended. Notice of intent to remove must be sent to the director in question at least fourteen (14) days prior to the meeting at which the action is to be taken. Said notice shall give the reasons for removal. A two-thirds (2/3) vote of the Directors present, in a secret ballot, a quorum being present, shall be required for removal.

## ARTICLE VIII

(1) A director, officer, employee or member of the Corporation shall not be personally liable for the acts or debts of the Corporation, except insofar as the member may become personally liable by reason of his or her own acts or conduct pursuant to KRS 273.187 (or corresponding provision of any later Kentucky statute).

- (2) The Corporation may indemnify any director or officer or former director or officer of the Corporation against any expenses actually and reasonably incurred by him or her in connection with the defense of any action, suit or proceeding, civil or criminal, in which she or he is made a party by reason of being or having been such director or officer, except in relation to matters as to which she or he shall be adjudged in such action, suit or proceeding to be liable for negligence or misconduct in the performance of duty to the Corporation. The Corporation may make any other indemnification permitted by law and authorized by its Articles of Incorporation, or its Bylaws or a resolution adopted after notice to members entitled to vote.
- (3) The Corporation hereby eliminates the personal liability of a director to the Corporation for monetary damages for breach of his or her duties as a director, provided that this provision shall not eliminate the liability of a director in the following circumstances:
  - A. For any transaction in which the director's personal financial interest is in conflict with the financial interests of the Corporation;
  - B. For acts or omissions not in good faith or which involve intentional misconduct or are known to the director to be a violation of law; or
  - C. For any transaction from which the director derived an improper personal benefit.

#### ARTICLE IX

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

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

# ARTICLE X

Amendments to these Articles shall be made pursuant to the provisions of KRS 273.263 (or corresponding provision of any later State statute).

IN TESTIMONY WHEREOF, witness the	signature of the secretary of this
IN TESTIMONY WHEREOF, witness the Corporation this 27 <sup>th</sup> day of	, 2014.
$\chi_{o}$	yoe M. Whaler Whalin, Secretary
Joyce	Whalin, Secretary
OTATE OF REMITTIONS	
STATE OF KENTUCKY )	
COUNTY OF JEFFERSON )	
The foregoing Amended and Restated Artiacknowledged before me this 274 day of Joyce Whalin, Secretary of South Louisville Com of the Corporation.	Tune 2014, by
Witness my signature and seal of office th	is $\frac{27\%}{}$ day of $\frac{\sqrt{2014}}{}$
My Commission Expires: Nov. 40,	40/6
	CARY PUBLIC TE AT LARGE, KENTUCKY

Form W-9
(Rev. August 2013)
Department of the Treasury

# Request for Taxpayer Identification Number and Certification

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

Interna	Il Revenue Service							36		O un	2 II K	J.
	Name (as shown on your income tax return)		******					<u> </u>				
	SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC.											
ge 2.	Business name/disregarded entity name, if different from above										<del></del>	
Print or type Specific Instructions on page	Check appropriate box for federal tax classification:  Individual/sole proprietor  C Corporation  S Corporation  Partnership	] Trust/e	estate		E	xem	nption	ns (sec	instr	ructio	ns):	
g g		-			ΙE	xem	apt pa	yee c	ode (ř	fanv)		
Print or type	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partner	ship) ►			.   ∈	xem		ı from			orting	9
를 는	☐ Other (see instructions) ▶						•	· -				
蓑	Address (number, street, and apt. or suite no.)	Reque	ster's	nam	е алс	i ad	dress	(optic	onal)			
ğ	415 1/2 WEST ASHLAND AVENUE	LOUIS	SVIL	LE I	MET	RO	o Go	OVE	RNN	1EN	ŗ	
See S		611 W						STR	EE"	Γ		
ഗ്		LOUIS	SVIL	LE,	KY	402	202					
	List account number(s) here (optional)									*********		
Par						•••••		******			***************************************	
Enter	your TIN in the appropriate box. The TIN provided must match the name given on the "Name"	' line	So	ial s	ecur	îty r	numb	er				
to avo	old backup withholding. For individuals, this is your social security number (SSN). However, for ent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other	ra							Γ	T	T	
entitie	es, it is your employer identification number (EIN). If you do not have a number, see How to get	t a				_	li	.	-		1	
TIN o	n page 3.						***************************************		_			
Note.	If the account is in more than one name, see the chart on page 4 for guidelines on whose		Em	płoy	er ide	entif	ficati	on nu	mber			]
numb	er to enter.		3	1		0	8	9		, ,	T	]
			]	'		U	°	7	1 2	2 5	9	
Par												
	penalties of perjury, I certify that:											
	e number shown on this form is my correct taxpayer identification number (or I am waiting for											
Se	m not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) rvice (IRS) that I am subject to backup withholding as a result of a failure to report all interest o longer subject to backup withholding, and	) I have or divid	not l ends	been , or (	not (c) th	ified ie IF	d by RS h	the Ir as no	item: tifiec	al Re I me	venu that I	e am
3. I ar	m a U.S. citizen or other U.S. person (defined below), and											
	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	a is cor	rect.									
Certifo becau interes genera	ication instructions. You must cross out item 2 above if you have been notified by the IRS the ise you have failed to report all interest and dividends on your tax return. For real estate transats paid, acquisition or abandonment of secured property, cancellation of debt, contributions to ally, payments other than interest and dividends, you are not required to sign the certification, otions on page 3.	at you actions, an ind	are c item	2 de al re	oes i	not nen	appl	y. For	r moi	rtgag (IRA)	e Sand	1
Sign Here	Signature vi U.S. person	te ►	J.,	-i., \q	ሳ ,	20	— ٥١٠	4			•	
Gen	reral Instructions  withholding tax on foreign  4. Gertify that FATCA	gn partn	ers' s	hare	of eff	ecti	ively o	connec				

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

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

#### **Purpose of Form**

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

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

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

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

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

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

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

# FINANCIAL STATEMENTS AND INDEPENDENT AUDITOR'S REPORT

SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC.

JUNE 30, 2012 AND 2011



Certified Public Accountants

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Founders & Principals John D. Winslow, CPA Barbara A. Lasky, CPA Plargaret H. Anderson, CPA Ellis Bryant, CPA 94) South First Street Louisville, KY 40203-2242 Phone: 502-584.9793 or 1.800.719.9312
Fac: 502.584.9794
Web: www.abhw-cpas.com
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#### INDEPENDENT AUDITOR'S REPORT

To the Board of Directors South Louisville Community Ministries, Inc.

We have audited the accompanying statements of financial position of South Louisville Community Ministries, Inc. (a not-for-profit organization) as of June 30, 2012 and 2011, and the related statements of activities, functional expenses and cash flows for the years then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of South Louisville Community Ministries, Inc. as of June 30, 2012 and 2011, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The schedule of contract activity – adult day care on page 17 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Andrew, Buyet, Luky + Weinbur, P.S.C.

Louisville, Kentucky August 27, 2012

## SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC.

## **General Information**

Name

**Organization Number** 0066952

SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. N - Non-profit

Profit or Non-Profit

Company Type KCO - Kentucky Corporation

Status A - Active Standing G - Good State ΚY File Date 3/30/1976 **Organization Date** 3/30/1976 Last Annual Report 3/1/2013

**Principal Office** 4803 SOUTHSIDE DRIVE

LOUISVILLE, KY 40214-2111

Registered Agent JAMES W. LAMMLE

4803 SOUTHSIDE DR LOUISVILLE, KY 40214

#### **Current Officers**

President Craig Oeswein Vice President Axie Reasor Secretary Teresa Allen Treasurer Rob Fohr Director Debbie Tinker Director Ollve Clark Director Donna Harper

## Individuals / Entities listed at time of formation

Director LOWELL LAWSON Director DONNA M. MAIER Director MICHAEL I. PRICE Director <u>IOSEPHINE NOEL</u> Director PEGGY ANNE KAREM Incorporator LOWELL LAWSON

## Images available online

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

Annual Report	3/1/2013	1 page	<u>tiff</u>	PDF
Registered Agent name/address change	3/20/2012	1 page	<u>tiff</u>	PDF
Annual Report	2/22/2012	1 page	tiff	PDF
Annual Report	6/28/2011	1 page	tiff	PDF

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Annual Report	3/16/2010	1 page	חסר	
Annual Report	6/26/2009	1 page	PDF	
Registered Agent		± hade	PDF	
name/address change	7/2/2008	1 page	<u>tiff</u>	PDF
Annual Report	6/18/2008	1 page	tiff	PDF
<u>Annual Report</u>	3/2/2007	1 page	<u>tiff</u>	
Annual Report	6/1/2006	1 page	<u>tiff</u>	PDF
Annual Report	3/24/2005	1 page		PDF
Annual Report	5/12/2003	=	<u>tiff</u>	PDF
Annual Report	6/10/2002	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	5/1/2001	1 page	<u>tiff</u>	PDF
Annual Report	7/19/1999	1 page	tiff	PDF
Annual Report		2 pages	tiff	<u>PDF</u>
Annual Report	6/25/1998	2 pages	<u>tiff</u>	PDF
	7/1/1997	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1996	2 pages	<u>tiff</u>	PDF
Annual Report	7/1/1995	3 pages	tiff	PDF
Annual Report	7/1/1994	2 pages	tiff	PDF
Statement of Change	11/23/1993	1 page	tiff	PDF
Annual Report	7/1/1993	2 pages	tiff	PDF
Annual Report	7/1/1992	1 page	tiff	
Annual Report	7/1/1991	2 pages	<u>tiff</u>	PDF
Restated Articles	7/18/1989	4 pages		<u>PDF</u>
Annual Report	7/1/1989		<u>tiff</u>	PDF
	-, -, -, 505	2 pages	tiff	PDF

## **Assumed Names**

## **Activity History**

File Date	Effective Date	Org. Referenced
3/1/2013 2:46:21 PM	3/1/2013	
3/20/2012 12:35:16 PM	3/20/2012	
2/22/2012 11:18:26 AM	2/22/2012	
6/28/2011 8:51:57 AM	6/28/2011	
3/16/2010 2:50:34 PM	3/16/2010 2:50:34 PM	
6/26/2009 3:17:28 PM	6/26/2009 3:17:28 PM	
7/2/2008 4:40:57 PM	7/2/2008	
6/18/2008 12:28:05 PM	6/18/2008	
3/2/2007 1:11:55 PM	3/2/2007	
6/1/2006 1:19:07 PM	6/1/2006	
7/18/1989	7/18/1989	
	3/1/2013 2:46:21 PM 3/20/2012 12:35:16 PM 2/22/2012 11:18:26 AM 6/28/2011 8:51:57 AM 3/16/2010 2:50:34 PM 6/26/2009 3:17:28 PM 7/2/2008 4:40:57 PM 6/18/2008 12:28:05 PM 3/2/2007 1:11:55 PM 6/1/2006	3/1/2013 2:46:21 PM 3/1/2013 3/20/2012 12:35:16 PM 3/20/2012 2/22/2012 11:18:26 AM 2/22/2012 6/28/2011 8:51:57 AM 6/28/2011 3/16/2010 3/16/2010 2:50:34 PM 2:50:34 PM 6/26/2009 6/26/2009 3:17:28 PM 3:17:28 PM 7/2/2008 4:40:57 PM 6/18/2008 6/18/2007 1:11:55 PM 3/2/2007 6/1/2006 6/1/2006 6/1/2006

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## **Microfilmed Images**

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

<u> </u>		
Annual Report	2/24/2005	1 page
Annual Report	5/4/2004	1 page
Annual Report	5/12/2003	1 page
Annual Report	6/10/2002	1 page
Annual Report	5/1/2001	1 page
Annual Report	6/9/2000	2 pages
Annual Report	7/19/1999	2 pages
Annual Report	6/25/1998	2 pages
Annual Report	7/1/1997	1 page
Annual Report	7/1/1996	2 pages
Annual Report	7/1/1995	3 pages
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Statement of Change	11/23/1993	1 page
Annual Report	7/1/1993	2 pages
Annual Report	7/1/1992	1 page
Annual Report	7/1/1991	2 pages
Annual Report	7/1/1990	2 pages
Restated Articles	7/18/1989	4 pages
Annual Report	7/1/1989	2 pages
Statement of Change	6/4/1986	2 pages
Statement of Change	7/12/1982	2 pages
Statement of Change	11/8/1979	2 pages
Annual Report	11/7/1979	3 pages
Articles of Incorporation	3/30/1976	5 pages

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# EMPLOYEE CENSUS 7/7/2014

NAME	JOB TITLE	HRS/WK	MONTHLY			
Daugherty, Richard	Program Assistant	40	\$1,820.00			
Callender, Laura	Program Assistant	40	\$1,560.00			
Helm, Robert	Director, ADC	40	\$2,950.00			
Whalin, Dana	Nurse	40	\$2,774.00			
Dupin, Rhonda	Program Assistant	40	\$1,560.00			
Thurston, Denise	Program Assistant	40	\$1,734.00			
Adult Day Care - 4100	Southern Pky		. ,			
Pike, J. Gregory	Executive Director	40	\$4,167.00			
Husk, Kate	Deputy Director, Client Srvcs	40	\$2,950.00			
Williams, Ginny	Program Assistant	40	\$1,910.00			
Vacant	Program Assistant	40	\$1,734.00			
Vacant	Bookkeeper	16				
Dunn, Patricia	Custodian	20	\$690.00			
Admin, Emergency Assistance and MOW - 415 1/2 West Ashland Ave						

# STATEMENTS OF FINANCIAL POSITION SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. JUNE 30, 2012 AND 2011

	<u>2012</u>	<u>2011</u>
ASSETS		
Cash	\$ 53,037	\$ 22,376
Accounts receivable	1,395	3,285
Grants receivable	39,974	23,546
Property and equipment, net	28,305	37,860
Other assets	283	-
Total assets	<u>\$ 122,994</u>	\$ 87,067
LIABILITIES AND NET ASSETS		
LIABILITIES	\$ 10,407	\$ 14,055
Accounts payable	6,376	5,409
Accrued vacation	5,733	14,423
Line of credit	10,234	12,901
Note payable	10,234	
Total liabilities	32,750	46,788
NET ASSETS		
Unrestricted	75,637	32,390
Temporarily restricted	14,607	7,889
Total net assets	90,244	40,279
Total liabilities and net assets	\$ 122,994	\$ 87,067

## STATEMENTS OF ACTIVITIES SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

		2012		2011				
		Temporarily	,	Temporarily				
_	<u>Unrestricted</u>	Restricted	<u>Total</u>	Unrestricted	Restricted	<u>Total</u>		
Revenue and support:						20442		
Contributions and grants	\$ 611,992	\$ 14,607	\$ 626,599	\$ 645,861	\$ 2.089	ft (47.050		
Program revenue	265,651		265,651		\$ 2,089	\$ 647,950		
Special events	22,076	_	203,031	246,146	-	246,146		
Miscellaneous income	8,059	-	•	7,339	-	7,339		
Interest income	•		8,059					
	9		9	17		17		
Total revenue and support	907,787	14,607	922,394	899,363	2,089	901,452		
Net assets released from restrictions:			•	,	,,,,,	701,432		
Restrictions satisfied by payments								
restrictions satisfied by payments	7,889	(7,889)				_		
Total revenue, support and reclassifications	915,676	6,718	922,394	899,363	2,089	901,452		
Expenses:				<u></u>		<u></u>		
4								
Program services	771,870	-	771,870	800,003	_	800,003		
Management and general	83,261	-	83,261	72,312	_	72,312		
Fund raising	17,298		17,298	8,918	_	8,918		
Total								
Total expenses	872,429		872,429	881,233		881,233		
Increase in net assets	43,247	6710	40.065			•		
Net assets at beginning of year	•	6,718	49,965	18,130	2,089	20,219		
Prior period adjustment	32,390	7,889	40,279	(104,156)	124,216	20,060		
rator portou aujustinetti	-			118,416	(118,416)			
Net assets at end of year	\$ 75,637	\$ 14,607	\$ 90,244	\$ 32,390	\$ 7,889	F 40.270		
	#		- 70,277	Ψ 22,270	φ /,889	\$ 40,279		

## STATEMENTS OF FUNCTIONAL EXPENSES SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

	2012				)12			
			Program					
	Adult Day <u>Care</u>	Emergency Assistance	Meals on Wheels	Youth Services	Total Program	Management and <u>General</u>	Fund <u>Raising</u>	<u>Total</u>
Salaries and wages	\$ 151,895	\$ 40,317	\$ 11,088	\$ 27,381	\$ 230,681	\$ 52,224	\$ 13,056	\$ 295,961
Employee benefits and payroll taxes	40,186	9,720	931	1,701	52,538	1,139	99	53,776
Assistance to individuals	-	314,396	-	· -	314,396	-	_	314,396
Other program expense	39,250	6,711	2,684	6,962	55,607	_	-	55,607
Professional fees and contract services	3,616	1,120	448	1,056	6,240	8,813	64	15,117
Supplies	7,712	1,335	263	620	9,930	432	38	10,400
Telephone	5,369	606	242	572	6,789	399	35	7,223
Utilities	1,894	587	235	553	3,269	386	34	3,689
Postage	825	256	102	241	1,424	168	• 15	1.607
Occupancy	11,650	13,083	5,231	12,335	42,299	8,599	748	51,646
Repair and maintenance	6,250	599	239	1,611	8,699	394	34	9,127
Printing, publications and advertising	301	93	37	88	519	61	5	585
Travel, training and conferences	18,761	161	64	152	19,138	106	9	19,253
Insurance	4,916	720	504	679	6,819	6,837	41	13,697
Bank fees	142	44	18	42	246	29	3	278
Dues and subscriptions	228	70	28	66	392	46	4	442
Meals and entertainment	2,859	138	55	130	3,182	91	8	3,281
License and permits	458	3	1	3	465	2	-	467
Interest expense	-	-	-	-	-	2,459	-	2,459
Special event expense	-	•	-	-	-	-	3,011	3,011
Miscellaneous	495	117	47	110	769	77	7	853
Total expenses before depreciation	296,807	390,076	22,217	54,302	763,402	82,262	17,211	862,875
Depreciation	4,907	1,520	608	1,433	8,468	999	87	9,554
Total expenses	\$ 301,714	\$ 391,596	\$ 22,825	\$ 55,735	\$ 771,870	\$ 83,261	\$ 17,298	\$ 872,429

				20	011			
			Program			-		
	Adult Day <u>Care</u>	Emergency Assistance	Meals on Wheels	Youth Services	Total <u>Program</u>	Management and <u>General</u>	Fund <u>Raising</u>	<u>Total</u>
Salaries and wages	\$ 141,407	\$ 37,457	\$ 22,743	\$ 34,205	\$ 235,812	\$ 37,079	\$ 7,117	\$ 280,008
Employee benefits and payroli taxes	47,249	12,497	2,190	2,365	64,301	828	35	65,164
Assistance to individuals	-,	367,464	-,.,,	2,205	367,464	0.0	-	367,464
Other program expense	_		•	_	207,701	_	_	307,404
Professional fees and contract services	5,521	1,710	684	1,613	9,528	8,784	99	18,411
Supplies	21,131	322	130	2,443	24,026	339	10	24,375
Telephone	4,192	450	180	490	5,312	541	26	5,879
Utilities	2,543	788	315	743	4,389	517	46	4,952
Postage	1,013	314	125	296	1,748	206	. 18	1,972
Occupancy	9,300	13,061	5,223	12,314	39,898	8,585	747	49,230
Repair and maintenance	2,421	242	97	1,540	4,300	709	14	5,023
Printing, publications and advertising	589	182	73	172	1,016	1,079	11	2,106
Travel, training and conferences	17,481	87	508	82	18,158	122	5	18,285
Insurance	7,004	1,904	761	1,795	11,464	3,997	110	15,571
Bank fees		360	_		360	106	-	466
Dues and subscriptions	590	183	73	247	1,093	720	11	1,824
Meals and entertainment	-	-		-	-	400		400
License and permits	142	16	-	I	159			159
Interest expense	-	-	-	_	_	3,166	-	3,166
Special event expense	-	_	_	-	_	· -	556	556
Miscellaneous	1,772	533	213	515	3,033	4,198	31	7,262
Total expenses before depreciation	262,355	437,570	33,315	58,821	792,061	71,376	8,836	872,273
Depreciation	4,602	1,426	570	1,344	7,942	936	82	8,960
Total expenses	\$ 266,957	\$ 438,996	\$ 33,885	\$ 60,165	\$ 800,003	\$ 72,312	\$ 8,918	\$ 881,233

## STATEMENTS OF CASH FLOWS SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

		<u>2012</u>		<u>2011</u>
CASH FLOWS FROM OPERATING ACTIVITIES:		40.065	•	
Change in net assets	\$	49,965	\$	20,219
Adjustments to reconcile change in net cash				
from operating activities:				
Depreciation		9,554		8,960
Loss on asset scrapped		-		2,906
(Increase) decrease in operating assets:				
Accounts receivable		1,890		3,125
Grants receivable		(16,428)		5,267
Other assets		(283)		-
Prepaid expenses		-		2,746
Increase (decrease) in operating liabilities:				
Accounts payable		(3,648)		(11,545)
Accrued vacation		967		(9,068)
Net cash provided by operating activities		42,017	_	22,610
CASH FLOWS FROM INVESTING ACTIVITIES:				
Purchase of property and equipment	•		_	(23,810)
Net cash used by investing activities			_	(23,810)
CASH FLOWS FROM FINANCING ACTIVITIES:				
Payments on line of credit		(8,690)		(295)
Proceeds from long term debt		-		13,860
Payments on long term debt		(2,666)		(959)
Net cash provided (used) by financing activities		(11,356)		12,606
Net increase in cash		30,661		11,406
Cash at beginning of year		22,376	_	10,970
Cash at end of year	<u>\$</u>	53,037	<u>\$</u>	22,376
SUPPLEMENTAL DISCLOSURES:				
Interest paid	\$	2,459	\$	3,166

## NOTES TO FINANCIAL STATEMENTS SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. JUNE 30, 2012 AND 2011

## NOTE 1. NATURE OF THE BUSINESS AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

South Louisville Community Ministries, Inc. (SLCM), located in Louisville, Kentucky, is a not-for-profit organization founded in 1976. The purpose of SLCM is to be an interfaith organization of representatives of churches, established to coordinate the efforts of the various segments of the community in order to enhance the religious, educational, social, health, economic, and community development of children, youth, and adults, and thus improve their quality of life.

SLCM's program services include:

Services for the Elderly: These services include an adult day care center, and various recreational, wellness, meals, and social activities for senior citizens in the areas served by the organization. Also, over 70 homebound seniors are provided one hot meal per day, five days per week, delivered by the Meals on Wheels Program operated by SLCM.

<u>Assistance</u>: These emergency assistance services include payments for rent, utilities, and prescriptions, and managing a Dare to Care Food Pantry for qualified low-income residents in the areas served by the organization.

Youth Services: These services provide hot meals for at-risk youth in the areas served by the organization.

## **Basis of Accounting**

The financial statements of SLCM have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables and other liabilities.

#### **Basis of Presentation**

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) with regards to financial statements of not-for-profit organizations. Under this guidance, SLCM is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. A description of the three net asset categories follows:

Unrestricted Net Assets: include the portion of expendable funds that are not subject to donor-imposed stipulations.

Temporarily Restricted Net Assets: include gifts for which donor imposed restrictions have not been met.

Permanently Restricted Net Assets: include amounts which the donor has stipulated that the corpus be invested in perpetuity and only the income be made available for program operations in accordance with donor restrictions.

#### Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

#### Cash

Cash consists solely of cash on deposit. Cash received with donor-imposed restrictions limiting its use to long-term purposes is not considered cash for purposes of the statements of cash flows.

## Accounts Receivable

Accounts receivable consists primarily of amounts billed for services performed. It is SLCM's policy to charge off uncollectible accounts receivable when management determines the receivable will not be collected. All accounts are deemed to be fully collectible.

#### Grants Receivable

Grants receivable consists primarily of amounts that SLCM has requested for reimbursement of expenses from various grantors for the current year but did not receive by year end.

## Property and Equipment

SLCM capitalizes all expenditures for property and equipment in excess of \$500. Purchased property and equipment are carried at cost. Donated property and equipment are recorded as support at their estimated fair value. Such donations are reported as unrestricted support unless the donor has restricted the donated asset to a specific purpose. Property and equipment are depreciated using the straight-line method over the estimated useful life of the respective assets (4-20 years). Depreciation of leasehold improvements is provided over the shorter of the useful life or the remaining term of the related lease on a straight-line basis.

#### Contributions

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence and/or nature of any donor restrictions.

SLCM treats temporarily donor restricted contributions whose restrictions are met in the same reporting period as unrestricted support. All other donor-restricted support is reported as an increase in temporarily or permanently restricted net assets, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statements of activities as net assets released from restrictions.

## In-kind Materials, Equipment, Services and Space

No amounts have been reflected in the financial statements for donated services. SLCM pays for most services requiring specific expertise. However, many individuals volunteer their time and perform a variety of tasks that assist SLCM with programs, solicitations and various committee assignments.

In-kind materials, equipment and space are reflected as contributions and assets or expense in the accompanying statements at their estimated fair values on the date of contribution. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used for a specific purpose are reported as temporarily restricted contributions.

## **Expense Allocation**

Expenses are allocated based on estimated time spent devoted to programs and supporting services.

#### **Income Tax Status**

SLCM is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. SLCM qualified for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization that is not a private foundation under Section 509(a)(2).

Management has concluded that any tax positions that would not meet the more-likely-than-not criterion of FASB ASC 740-10 would be immaterial to the financial statements taken as a whole. Accordingly, the accompanying financial statements do not include any provision for uncertain tax positions, and no related interest or penalties have been recorded in the statements of activities or accrued in the statements of financial position. Federal and state tax returns of the entity are generally open to examination by the relevant taxing authorities for a period of three years from the date the returns are filed.

#### **Subsequent Events**

Management has evaluated subsequent events for recognition or disclosure in the financial statements through August 27, 2012, which was the date at which the financial statements were available to be issued.

## NOTE 2. PROPERTY AND EQUIPMENT

Depreciation is provided in amounts sufficient to relate the cost of depreciable assets to operations over the estimated useful lives on a straight-line basis. At June 30, 2012 and 2011 the cost and accumulated depreciation of such assets were as follows:

	<u>2012</u>	<u>2011</u>
Vehicles Equipment Furniture & fixtures Leasehold improvements	\$ 21,960 1,494 17,367 49,297	\$ 21,960 1,494 17,367 49,297
Less accumulated depreciation	90,118 (61,813)	90,118 (52,258)
Property and equipment, net	\$ 28,305	\$ 37,860
Depreciation expense	<u>\$ 9,554</u>	\$ 8,960

## NOTE 3. LINE OF CREDIT

SLCM has a \$35,000 unsecured bank line of credit available that expires in February 2013. The line of credit bears interest at prime plus 1.0%, minimum of 4.5% (the prime rate was 3.25% at June 30, 2012). At June 30, 2012, SLCM had \$5,733 outstanding against the line.

## NOTE 4. NOTE PAYABLE

Note payable consists of a vehicle loan, due February 13, 2016, secured by a vehicle with a book value of \$20,000 at June 30, 2012. Payments are \$280 monthly at 7.70% interest. Following are the maturities of long-term debt for each of the next four years:

6/30/13		\$ 2,385
6/30/14 6/30/15		2,854 3,083
6/30/16	•	 1,912
Total		\$ 10,234

## NOTE 5. RESTRICTIONS ON NET ASSETS

Temporarily restricted net assets are available for the following purposes:

		<u>2012</u>		
Renovations	\$	-	\$	5,800
Meals on wheels	6,877			-
Emergency assistance	warmin	7,730		2,089
Total	<u>\$</u>	14,607	\$	7,889

## NOTE 6. LEASES

The Organization leases the facility used by the Adult Day Care Center. The term of the lease is for two years and expires June 2013. Future minimum payments under the lease are as follows:

6/30/13 \$ 11,400

Rent expense under this lease was \$11,650 for the year ended June 30, 2012. SLCM also leases office space located at 4803 Southside Drive from Americana Community Center, Inc. for \$1 per year through August 2013. The fair market value of the lease is \$39,996 per year and is recorded as contributions and occupancy expense in the statements of activities.

#### NOTE 7. IN-KIND DONATIONS

SLCM records various types of in-kind support, including food, materials and other tangible assets. Contributed in-kind support is recognized in accordance with the Statement of Financial Accounting Standards in its Accounting Standards Codification 958-605-25, which governs the presentation of financial statements of not-for-profit organizations. This pronouncement requires recognition of professional services received if those services (a) create or enhance long-lived assets or (b) require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation.

Most of the services received by SLCM do not meet these criteria. In 2012, no amounts were recognized, although volunteers provided countless hours of assistance.

Contributions of tangible assets are recognized at fair market value when received. The amounts reflected in the accompanying financial statements as in-kind support are offset by like amounts included in expenses or assets. In 2012, \$212,340 of food donation and \$39,996 of rent was recognized.

## NOTE 8. PRIOR PERIOD ADJUSTMENT

During the fiscal year ended June 30, 2011, SLCM performed additional analysis and identified and reclassified \$118,416 of unrestricted net assets that had been previously reported as temporarily restricted net assets. The correction had no effect on total net assets at June 30, 2011 or on total change in net assets for the year then ended. However, the effect of the correction on change in unrestricted net assets was an increase of \$118,416 for the year ended June 30, 2011, with a corresponding decrease in temporarily restricted net assets.

SUPPLEMENTAL INFORMATION

# SCHEDULE OF CONTRACT ACTIVITY -- ADULT DAY CARE SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. FOR THE YEAR ENDED JUNE 30, 2012

State Grantor:

Commonwealth of Kentucky, Cabinet for Health Services

Pass-through Grantor:

KIPDA .

Program Title:

Adult Day Care

Pass-through Contract Number:

M-06156729-(SOU)

Period of Contract:

July 1, 2011 to June 30, 2012

DENTENTA			Actual
REVENUES			
State funds			\$ 138,834
Fees/donations			
Total revenues			\$ 138,834
	Actual Units		Amount
	Provided	Rate	<b>Provided</b>
UNITS OF SERVICE -			
Adult Day Health Care	27,301 \$	3.6	\$ 98,284
Alzheimer's Respite in Day Care	11,148		
Case Management	11,140	3.6	40,133
Adult Day Health Care	70	• •	
Alzheimer's Respite	78	3.6	281
rusionner's respite	38	3.6	136
Total Day Care	38,565		138,834
Payments from KIPDA as of June 30, 2012			124,049
Due from KIPDA at June 30, 2012			\$ 14,785

# LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND SUPPLEMENTAL DISCLOSURE REQUIRED FOR REQUESTS BY CHURCHES, RELIGIOUS OR FAITH-BASED ORGANIZATIONS

It is the policy of the Louisville/Jefferson County Metro Council that no appropriation to a Church, to a religious or faith-based organization, or to any organization whose activities support a Church or religious or faith-based organization will be approved unless the prospective grantee clearly demonstrates, in writing, that it is committed to compliance with each of the following conditions and requirements.

faith-based organization will be approved unless the prospective grant it is committed to compliance with each of the following conditions and	ee clearly demonstrates, in writing, that requirements.				
Legal Name of Applicant Organization: South Louisville Comm	nunity Ministries, Inc.				
As in the case of all legislative enactments, the appropriation must be for a appropriation must have a secular legislative purpose to support a program been, or could be undertaken by the government.	public purpose. In other words, the which benefits the public, and which has				
The appropriation must be totally and demonstrably earmarked for the beneficiary activity or program with no tangible or significantly intangible benefit inuring to the organization. Specifically, the appropriation may not fund equipment used by the organization, nor may it be used for improvements to real or personal property owned by the grantee church or organization.					
The beneficiary activity or program must be open to the public as opposed members or affiliates.	to being restricted to church or organization				
The grantee church or organization may not use public funds in any way the religious practice.	at involves worship, religious instruction, or				
Public funds involved in the grant may not be used to support a school or argrantee church or organization, or in its name.	ny program of instruction operated by the				
The grantee organization may not use public funds in any way that involves organization.	proselytization or self-promotion of the				
The grantee church or organization must establish and maintain a system of completely documents its use of the public funds involved in the grant	recordkeeping which clearly and				
SIGNATURE					
I agree under the penalty of law to comply with all the items in this disclobe eligible for funding if investigation at any time shows falsification. If fapproved, any allocations already received and expended are subject to be authorized to sign this disclosure for the applying organization.	alsification is shown after funding has been				
Signature of Legal Signatory	Date: July 8, 2014				
Legal Signatory (please print): J. Gregory Pike	Title: Interim Executive Director				
Phone: (502) 361-7763 Extension:	Email: pnancygregory@bellsouth.net				
	1				

Form 990-T  Department of the Treasury Internal Revenue Service	Exempt Organization Bu	der so	ection 6033(e))			2012	
	For celendar year 2012 or other tax year beginning JUL	$\frac{1}{2}$	2012 , and ending	JUN 30, 20	013	Open to Public Inspection for 501(c)(3) Organizations Only	
A Check box if address changed	_	Name of organization ( Check box if name changed and see instructions.)  Demployer identification number (Employees' trust, eee instructions.)					
B Exempt under section	Print SOUTH LOUISVILLE COMMI	rinu	Y MINISTRIE	ES, I	3	31-0891259	
X 501(C)(3)	Type 4.9.0.2 COMMITTEE TO THE TOTAL	x, see i	nstructions.		E Unre	plated business activity codes Instructions)	
408(e) 220(e)	4003 SOUTHSIDE DRIVE				(See	tistinceousl	
408A 530(a)					7		
529(a)	LOUISVILLE, KY 40214				900	099	
C Book value of all assets	Book value of all assets   F Group exemption number (see instructions)						
at end of year	Other trust						
H Describe the organization	n's primary unrelated business activity. > FILING	FOR	HEALTH CAP	E CREDIT	ONI	Ϋ́	
I During the tax year, was	the corporation a subsidiary in an affiliated group or a pare	nt-subs	idlary controlled group?	<b>&gt;</b>	Y		
If "Yes," enter the name :	and Identifying number of the parent corporation.	_				· · · · · · · · · · · · · · · · · · ·	
	▶ ORGANIZATION		Telepi	none number			
	d Trade or Business Income		(A) Income	(B) Expense	<u> </u>	(C) Nat	
1a Gross receipts or sale							
b Less returns and allow		18					
2 Cost of goods sold (S	Schedule A, line 7)	2					
3 Gross profit. Subtract	l line 2 from line 1c	3					
4 a Capital gain net incon	ne (attach Schedule D)	48					
b Net gain (loss) (Form	4797, Part II, line 17) (attach Form 4797)	4b				***************************************	
e Capital loss deduction	n for trusts	40					
5 lecome (loss) from p	artnerships and S corporations (attach statement)	5					
6 Rent Income (Schedu	ile C)	6			*******		
7 Unrelated debt-finance	ed income (Schedule E)	7					
8 Interest, annuities, ro	yalties, and rents from controlled organizations (Sch. F)	8					
9 Investment income of	a section 501(c)(7), (9), or (17) organization						
		g			•		
10 Exploited exempt activ	vity Income (Schedule I)	10					
11 Advartising income (S	Schedule J)	11					
12 Other income (see ins	tructions; attach statement)	12					
13 Total. Combine lines	3 through 12	13	0.		*********		
Part II Deductio	ns Not Taken Elsewhere (see instructions for	r limita	tions on deductions)	··········	1		
(except for c	contributions, deductions must be directly connected	d with t	he unrelated busines:	s income)			
14 Compensation of offi	icers, directors, and trustees (Schedule K)				14		
15 Salaries and wages	***************************************		******************************	•	15		
16 Repairs and mainten	ance				16		
17 Bad debts			4	*******	17	· · · · · · · · · · · · · · · · · · ·	
18 Interest (attach state)	ment)	*******		*********	18		
19 Taxes and licenses					19		
20 Charitable contribution	ons (see instructions for limitation rules)		************************	***************************************	20		
21 Depreciation (attach)	Form 4562)		21				
22 Less depreciation cia	imed on Schedule A and elsewhere on return	······	22a		22b		
23 Depletion		·····	·····	*******	23		
24 Contributions to defe	rred compensation plans	•••••••	***!*********		24		
25 Employee benefit pro	grams	•••••	*****************************		25		
26 Excess exempt exper	nses (Schedule I)	*******	*********************		26		
21 Excess leadership co	sts (Schedule J)				27		
28 Other deductions (att	ach statement)			i	28		
29 Total deductions.	Add lines 14 through 28				29	0.	
30 Unrelated business ta	exable income before net operating loss deduction. Subtract	line 29	from line 13		30	0.	
31 Net operating loss de	duction (limited to the amount on line 30)				31		
32 Unrelated business ta	exable income before specific deduction. Subtract line 31 fro	om line :	30		32	0.	
33 Specific deduction (g	enerally \$1,000, but see instructions for exceptions)				33	1,000.	
34 Unrelated busines	ss taxable income. Subtract line 33 from line 32, if line 3	13 is gre	ater than line 32, enter t	he smaller			
223701 LHA For Pape	purel Bedralla Bel Nella				34	0.	
UI-11-13 LEIA FUEPAPE	erwork Reduction Act Notice, see instructions.	_				Form 990-T (2012)	

	(12) SOUTH LOUISVILLE COMMUNITY MINISTRIES,	I	31-0891259	Paga 2
	Tax Computation			
	Organizations taxable as corporations (see instructions for tax computation).			
J. S.	Controlled group members (sections 1561 and 1563) check here	i:		
å a	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order			•
	(1) \$ (2) \$ (3) \$			
e b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)			
•	(2) Additional 3% tax (not more than \$100,000)			
C	Income tax on the amount on line 34		► 35c	<u> </u>
36	Trusts taxable at trust rates (see instructions for tax computation). Income tax on the amount or	tine 34 from:		
	Tax rate schedule or Schedule D (Form 1041)			
37	Proxy tax (see instructions)			
38	Alternative minimum tax		38	
39	Total. Add lines 37 and 38 to line 35c or 36, whichever applies			0.
	Y Tax and Payments	·		
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)			
	Other credits (see instructions)			
E	General business credit, Attach Form 3800	40c		
	Credit for prior year minimum tax (attach Form 8801 or 8827)			
6	Total credits. Add lines 40a through 40d		1	0.
41	Subtract line 40e from line 39		41	<u> </u>
42	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 88			0.
43	Total tax, Add lines 41 and 42		43	V •
	Payments: A 2011 overpayment credited to 2012			
	2012 estimated tax payments			
	C Tax deposited with Form 8868	44c		
	d Foreign organizations: Tax paid or withheld at source (see instructions)	448		
	B Backup withholding (see instructions)  Credit for small employer health insurance premiums (Attach Form 8941)		8,070.	
		- 141		
•	Other credits and payments: Form 2439 Total ▶	44g		
45	Total payments. Add lines 44a through 44g			8,070.
46	Estimated tax penalty (see instructions). Check if Form 2220 is attached		46	,,,,,
47	Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed		▶ 47	
48	Overpayment, If line 45 is larger than the total of lines 43 and 46, enter amount overpaid		▶ 48	8,070.
49	Enter the amount of line 48 you want: Credited to 2013 estimated tax	Ref	unded > 49	8,070.
Part		on (see Instruc	tions)	
1 At	any time during the 2012 calendar year, did the organization have an interest in or a signature or o	ther authority ove	er a financial account (bank,	Yes No
S#1	curilies, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.	1, Report of Forei	gn Bank and Financial	
Ac	counts. If "Yes," enter the name of the foreign country here			X
2 Du	counts. If "Yes," enter the name of the foreign country here ring the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign in Yes," see instructions for other forms the organization may have to file.	natt	***************************************	X
3 En	ter the amount of tax-exempt interest received or accrued during the tax year 🕨 \$		······································	
Sche	dule A - Cost of Goods Sold. Enter method of inventory valuation ► N/A			
1 inv	ventory at beginning of year 1 6 Inventory at end of ye		18888863	
2 Pu	richases 2 7 Cost of goods sold. S			•
3 Co	ost of labor	•		
	iditional section 263A costs (alt. statement) 42 8 Do the rules of section			Yes No
	her costs (attach statement) 4b property produced or	acquired for resa	(e) apply to	220000000000000000000000000000000000000
5 To		statements and to t		it is true.
Sign	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and correct, and complete. Declaration of prepayer (other than taxpayer) is based on all information of which prepa	ver has any knowled	99/)	
Here	Jane hands 60 17/18/2018 > EV	CUTIVE	May the IRS discus	
110.0	Signature of officer Date Title	. (30, 770 0	instructions)? X	
		ate	Check If PTIN	7 100   100
			self- employed	
Pald	BADRADA A TASKY 1/ ). X. X. X. X. X. X.	-17-13		15280
•	parer NAMPERCON BRYANT LASKY WWINST			227965
Use	Only 943 SOUTH FIRST STREET			
	Firm's address > LOUISVILLE, KY 40203		Phone no. (502)5	84-9793
223711	01-11-19			n <b>990-T</b> (2012)

	yon of property											ty)(see instructions)
	Hon or Pro-							<del></del>	-			
1				•								
										··-		<u></u>
 									<del>,</del>			
			, Rent receive						3(a) Deducti	ons directh	/ conn	ected with the Income in
(2	From personal property ( rent for personal property 10% but not more to	y is more th	ntage of an	(b) Fn of	om real and rent for paid the rent	d personal property receal property exc is based on profit o	(if the percented seds 50% or r income)	ntage If	colu	mns 2(a) en	d 2(b)	(attach statement)
	<u>,</u>											
					<del> · · ·</del>							
	-	······					<del></del>	. <del> </del>		····	<del></del>	
et			0.	Total				0.				
	icoma. Add totals of co	human Ole							(b) Total dedi	ictions.		
	in page 1, Part I, line 6.							0.	Enter here and o Part I, line 6, col	ຄ page 1, ມາກາດ (B)	<b>*</b>	
hedi	le E - Unrelate	d Debt	Financed	Incom	s (see in	etructions)	···		<del> </del>	<del> </del>		
.,	TO BE VINUIUIU				7.77	_		T	3. Deductions	directly cor	mecte	d with or allocable
					-	2. Gross inco or allocable		(2)	to Straight tine dept	debt-finan	cea pr	(b) Other deductions
	1. Description of	of debt-finan	ced property			financed p		10)	(attach etatem	ent)		(altach atatament)
						<del></del>					_	
											+	
		<u> </u>									- -	
)											+	
4. A	mount of average acquisition of allocable to debt-finant toperty (attach statement)	n ced	ਰੂੰ Average of or al debt-finar dettech	edjusted bas locable to ced propert statement)	ils Y	6. Column 4 by colum			7. Gross income (correportable (column (correction 0)		8, Allocable deductio (column 6 x total of colu 3(a) and 3(b))	
)							%					
)							%					<u> </u>
)				<del> </del>			%					
}							%	<del>-  </del>			_ -	
									inter here and on p Part I, line 7, colur			Enter here and on page Part I, line 7, column (8
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itals				•				<b>-</b>	·····		-	
tal div	ldends-received deducture F - Interest,	tions incl	los Boyat	loe an	d Don	te From Co	ntrolle	d Orga	nizations	ísee los	truct	ions)
nea	ule r - mieresi,	Amuun	Tes, noyal	105, 01		t Controlled O			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(000 010		,
1.	Name of controlled organize	ation	2. Employer ide numb	ntification er	Nel un	3. related income see instructions)	Total c	4. of specified ents made	5. Part of included in organization	column 4 ti the contro t's gross in	iling	6. Deductions direct connected with incomin column 5
	· · · · · · · · · · · · · · · · · · ·											
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9)		<del></del>										
)	npt Controlled Organ	lyationa	<u> </u>		L							\
	npt Controlled Organ . Taxable income	1	et unrelated incom	a Bosal	Q To	tat of specified pay	ments	10. Parto	column 9 that is	Included		Deductions directly conn
,	, texante incolle	9. 11	enottourismises)		<b>J</b> . 10	made		in the co	ntrolling organizations gross income	ion's		vith income in column 10
)			····	·~~~								
2)												
3)												
1)												
									columns 5 and 16 re and on page 1,		Ent	Add columns 6 and 11, or here and on page 1, Pa

223731

(3)

(4)

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%

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Total. Enter here and on page 1, Part II, line 14 .....

# shown on return

## **Credit for Small Employer Health Insurance Premiums**

Attach to your tax return.

Information about Form 8941 and its separate instructions is at www.ire.gov/torms8941.

OMB No. 1545-2198

Identifying number SOUTH LOUISVILLE COMMUNITY MINISTRIES, I 31-0891259 1a Enter the number of individuals you employed during the tax year who are considered employees for 17 purposes of this credit (see instructions) 1b Enter the employer identification number (EIN) used to report employment taxes for individuals included 31-0891259 on line 1a (see instructions) 1b 2 Enter the number of full-time equivalent employees you had for the tax year (see Instructions), if you entered 11 25 or more, skip lines 3 through 11 and enter ·0· on line 12 2 3 Average annual wages you paid for the tax year (see instructions), If you entered \$50,000 or more, skip lines 4 through 11 and enter -0- on line 12 27,000. 3 Premiums you paid during the tax year for employees included on line 1a for health insurance coverage under a qualifying arrangement (see Instructions) 37,831. 5 Premiums you would have entered on line 4 if the total premium for each employee equaled the average 41,940. premium for the small group market in which you offered health insurance coverage (see instructions) 6 Enter the smaller of line 4 or line 5 37.831. 6 7 Multiply line 6 by the applicable percentage: Tax-exempt small employers, multiply line 6 by 25% (.25) All other small employers, multiply line 6 by 35% (.35) 9,458. 7 8,827. 8 If line 2 is 10 or less, enter the amount from line 7. Otherwise, see instructions 8,070. If line 3 is \$25,000 or less, enter the amount from line 8. Otherwise, see instructions 9 10 Enter the total amount of any state premium subsidies paid and any state tax credits available to you for premiums included on line 4 (see instructions) 10 37,831. 11 Subtract line 10 from line 4. If zero or less, enter -0-11 8,070. 12 Enter the smaller of line 9 or line 11 12 13 If line 12 is zero, skip lines 13 and 14 and go to line 15. Otherwise, enter the number of employees included on line 1a for whom you paid premiums during the tax year for health insurance coverage under a qualifying arrangement (see instructions) 13 14 Enter the number of full-time equivalent employees you would have entered on line 2 if you only included 8 employees included on line 13 14 15 Credit for small employer health insurance premiums from partnerships, S corporations, cooperatives, estates, and trusts (see instructions) 16 Add lines 12 and 15. Cooperatives, estates, and trusts, go to line 17. Tax exempt small employers, skip lines 17 and 18 and go to line 19. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, stop here and report this amount on Form 3800, line 4h 8,070. 16 17 Amount allocated to patrons of the cooperative or beneficiaries of the estate or trust (see instructions) 17 Cooperatives, estates, and trusts, subtract line 17 from line 16. Stop here and report this amount on Form 3800, line 4h 18 19 Enter the amount you paid in 2012 for taxes considered payroll taxes for purposes of this credit (see 22,731. Instructions) 19 20 Tax-exempt small employers, enter the smaller of line 16 or line 19 here and on Form 990-T, 8,070. 20 line 44f ...... LHA

For Paperwork Reduction Act Notice, see separate instructions.

Form 8941 (2012)

Information Needed to Complete Lines 1-3

(a) Individuals Considered Employees	(b) Employee Hours of Service	(c) Employee Wages Paid
RONNIE BISHOP	2,080.	16,646.
RICHARD DAUGHERTY	2,080.	24,789.
WICHAEL GEORGE	729.	9,384.
BETTY GREER	2,080.	18,240.
ROBERT HELM	2,080.	34,231.
KATE HUSK	2,080.	32,800.
GENNY WILLIAMS	836.	8,778.
TERESA KNIGHT	725.	8,158.
CAROLYN SHELTON	2,080.	27,533.
CAROLYN SHEPHERD	1,044.	7,831.
THELMA MURRAY	561.	5,047.
JAMES LAEMMLE .	2,080.	46,000.
ANNA HUDSON	1,260.	11,587.
CHARLES WOODEN	260.	2,730.
BETHANY WALDEN	1,948.	29,220.
DENISE THURSTON	1,350.	10,801.
SHERRY COGBURN	386.	3,363.
	•	
Total	23,659.	297,138.
Full-Time Equivalent Employees (FTEs)  1. Enter the total employee hours of service from column (b) above  2. Hours of service per FTE		23,659. 2,080

Enter the total employee hours of service from column (b) above	23,659.
2. Hours of service per FTE	2,080 11
3. Full-time equivalent employees. Divide line 1 by line 2	11
Average Annual Wages	
Enter the total employee wages paid from column (c) above	297,138.
2. Enter FTEs from line 3 above	11
3. Average wages. Divide line 1 by line 2	27,000.

Additional	Information	Needed to	Complete	I ina-	
		1100000 10	CALIFIATOR		4-14
1-1					

(a)		7	
(a) Entolled individuals Considered Employees	(b) Employer Premiums Paid	(c) Employer State Average Premiums	(d) Enrolled Employe Hours of Service
RONNIE BISHOP	3,460.	4,660.	HOURS OF SHIVICE
RICHARD DAUGHERTY	2,866.	4,660.	
BETTY GREER	3,407.		2,080.
ROBERT HELM	5,653.	4,660.	2,080.
KATE HUSK	4,597.	4,660.	2,080.
CAROLYN SHELTON	5,748.	4,660.	2,080.
JAMES LAEMMLE	5,748.	4,660.	2,080.
BETHANY WALDEN		4,660.	2,080.
DENISE THURSTON	4,789.	4,660.	1,948.
	1,563.	4,660.	1,350.
Total	37,831.	41 040	12 050
	0170311	41,940.	17,858.

## FTE Limitation

· · · · · · · · ·	
1. Enter the amount from Form 8941, line 7	
Enter the amount from Form 8941, line 7     Enter the amount from Form 8941, line 2	9,458.
2. Enter the amount from Form 8941, line 2 3. Subtract 10 from line 2 (if line 2 is 10 or less, skip to line 6)	11
4. Divide line 3 by 15	1.
5. Multiply line 1 by line 4	.067
6. Subtract line 5 from line 1. Reported this amount on Form 8941, line 8	631.
The state of the s	8,827.
Average Annual Woods Limited	•

		–
Average Annual Wages Limitation		
1. Enter the amount from Form 8941 line 8		
2. Enter the amount from Form 8941, line 7	*****************	8,827.
2. Enter the amount from Form 8941, line 7 3. Enter the amount from Form 8941, line 3	***************************************	9,458.
4. Subtract 25,000 form line 3		27,000.
5. Divide line 4 by 26,000	11*	2,000.
5. Divide line 4 by 25,000 6. Multiply line 2 by line 5	******	.080
Multiply line 2 by line 5     Subtract line 6 from line 1. Reported this amount on Form 8941, line 9	*********	757.
The second of the amount of Form 8947, line 9	***************************************	8,070.
FTEs Enrolled in Coverage		, . , . ,
1 F / W		

Enter the total enrolled employee hours of service from column (d) above	
4. Flours of service per FTF	17,858.
3. Divide line 1 by line 2. Report this amount on Form 8941, line 14	2,080
	8

	•		
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Providing timely, accurate, useful information to decision makers

July 8, 2014

To the Board of Directors
South Louisville Community Ministries, Inc.
415-1/2 West Ashland Ave.
Louisville, KY 40201

Ladies and Gentlemen:

We are pleased to confirm our understanding of the services we are to provide for South Louisville Community Ministries, Inc. for the year ended June 30, 2014.

We will audit the financial statements of South Louisville Community Ministries, Inc. (a not-for-profit organization), which comprise the statement of financial position as of June 30, 2014, the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements. Also, the following supplementary information accompanying the financial statements will be subjected to the auditing procedures applied in our audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, in accordance with auditing standards generally accepted in the United States of America, and we will provide an opinion on it in relation to the financial statements as a whole in a report combined with our auditor's report on the financial statements:

## 1. Schedule of Contract Activity - Adult Day Care

We will prepare the financial statements, related notes and supplementary information. We will also prepare the Organization's federal annual information return for the year ended June 30, 2014.

## Audit Objective

The objective of our audit is the expression of an opinion about whether your financial statements are fairly presented, in all material respects, in conformity with U.S. generally accepted accounting principles. Our audit will be conducted in accordance with auditing standards generally accepted in the United States of America and will include tests of your accounting records and other procedures we consider necessary to enable us to express such an opinion. We will issue a written report upon completion of our audit of your financial statements. Our report will be addressed to the Board of Directors of South Louisville Community Ministries, Inc. We cannot provide assurance that an unmodified opinion will be

expressed. Circumstances may arise in which it is necessary for us to modify our opinion or add an emphasis-of-matter or other-matter paragraph. If our opinion is other than unmodified, we will discuss the reasons with you in advance. If, for any reason, we are unable to complete the audit or are unable to form or have not formed an opinion, we may decline to express an opinion or to issue a report as a result of this engagement.

#### **Audit Procedures**

Our procedures will include tests of documentary evidence supporting the transactions recorded in the accounts, and direct confirmation of receivables and certain assets and liabilities by correspondence with selected individuals, funding sources, creditors, and financial institutions. We may also request written representations from the Organization's attorneys as part of the engagement, and they may bill you for responding to this inquiry. At the conclusion of our audit, we will require certain written representations from you about the financial statements and related matters.

An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements; therefore, our audit will involve judgment about the number of transactions to be examined and the areas to be tested. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We will plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement, whether from (1) errors, (2) fraudulent financial reporting, (3) misappropriation of assets, or (4) violations of laws or governmental regulations that are attributable to the Organization or to acts by management or employees acting on behalf of the Organization.

Because of the inherent limitations of an audit, combined with the inherent limitations of internal control, and because we will not perform a detailed examination of all transactions, there is a risk that material misstatements may exist and not be detected by us, even though the audit is properly planned and performed in accordance with U.S. generally accepted auditing standards. In addition, an audit is not designed to detect immaterial misstatements or violations of laws or governmental regulations that do not have a direct and material effect on the financial statements. However, we will inform the appropriate level of management of any material errors, fraudulent financial reporting, or misappropriation of assets that comes to our attention. We will also inform the appropriate level of management of any violations of laws or governmental regulations that come to our attention, unless clearly inconsequential. Our responsibility as auditors is limited to the period covered by our audit and does not extend to any later periods for which we are not engaged as auditors.

Our audit will include obtaining an understanding of the Organization and its environment, including internal control, sufficient to assess the risks of material misstatement of the financial statements and to design the nature, timing, and extent of further audit procedures. An audit is not designed to provide assurance on internal control or to identify deficiencies in internal control. However, during the audit, we will communicate to you and those charged with

governance internal control related matters that are required to be communicated under professional standards.

## Management Responsibilities

You agree to assume all management responsibilities for the tax services, financial statement preparation and any other nonattest services we provide; oversee the services by designating an individual, preferably from senior management, with suitable skill, knowledge, or experience; evaluate the adequacy and results of the services; and accept responsibility for them. We may advise you about appropriate accounting principles and their application and will assist in the preparation of your financial statements, but the responsibility for the financial statements remains with you. We will also advise you with regard to tax positions taken in the preparation of the tax returns, but the responsibility for the tax returns with you.

You are responsible for establishing and maintaining internal controls, including monitoring ongoing activities; for the selection and application of accounting principles; and for the preparation and fair presentation of the financial statements in conformity with U.S. generally accepted accounting principles. You are also responsible for making all financial records and related information available to us and for the accuracy and completeness of that information. You are also responsible for providing us with (1) access to all information of which you are aware that is relevant to the preparation and fair presentation of the financial statements, (2) additional information that we may request for the purpose of the audit, and (3) unrestricted access to persons within the organization from whom we determine it necessary to obtain audit evidence.

Your responsibilities include adjusting the financial statements to correct material misstatements and confirming to us in the management representation letter that the effects of any uncorrected misstatements aggregated by us during the current engagement and pertaining to the latest period presented are immaterial, both individually and in the aggregate, to the financial statements taken as a whole.

You are responsible for the design and implementation of programs and controls to prevent and detect fraud, and for informing us about all known or suspected fraud affecting the Organization involving (1) management, (2) employees who have significant roles in internal control, and (3) others where the fraud could have a material effect on the financial statements. Your responsibilities include informing us of your knowledge of any allegations of fraud or suspected fraud affecting the Organization received in communications from employees, former employees, grantors, regulators, or others. In addition, you are responsible for identifying and ensuring the Organization complies with applicable laws and regulations.

You are responsible for the preparation of any supplementary information in conformity with U.S. generally accepted accounting principles. You agree to include our report on the supplementary information in any document that contains, and indicates that we have reported on, the supplementary information. You also agree to include the audited financial statements with any presentation of the supplementary information that includes our report thereon.

With regard to the electronic dissemination of audited financial statements, including financial statements publishing electronically on your Internet website, you understand that electronic sites are a means of distributing information and, therefore, we are not required to read the information contained in those sites or to consider the consistency of other information in the electronic site with the original document.

## Audit Administration, Fees, and Other

If we elect to terminate our services for nonpayment, or for any other reason provided for in this letter, our engagement will be deemed to have been completed upon written notification of termination, even if we have not completed our report. You will be obligated to compensate us for all time expended, and to reimburse us for all of our out-of-pocket costs, through the date of termination.

It is our policy to retain engagement documentation for a period of seven years, after which time we will commence the process of destroying the contents of our engagement files. To the extent we accumulate any of your original records during the engagement, those documents will be returned to you promptly upon completion of the engagement. The balance of our engagement file, other than the prepared financial statement, which we will provide to you at the conclusion of the engagement, is our property, and we will provide copies of such documents at our discretion and if compensated for any time and costs associated with the effort.

In the event we are required to respond to a subpoena, court order or other legal process for the production of documents and/or testimony relative to information we obtained and/or prepared during the course of this engagement, you agree to compensate us at our hourly rates, for the time we expend in connection with such response, and to reimburse us for all of our out-of-pocket costs incurred in that regard.

In the event that we are or may be obligated to pay any cost, settlement, judgment, fine, penalty, or similar award or sanction as a result of a claim, investigation, or other proceeding instituted by any third party, then to the extent that such obligation is or may be a direct or indirect result of your intentional or knowing misrepresentation or provision to us of inaccurate or incomplete information in connection with this engagement, and not any failure on our part to comply with professional standards, you agree to indemnify us, defend us, and hold us harmless as against such obligations.

You agree that any dispute (other than our efforts to collect an outstanding invoice) that may arise regarding the meaning, performance or enforcement of this engagement or any prior engagement that we have performed for you, will, prior to resorting to litigation, be submitted to mediation, and that the parties will engage in the mediation process in good faith once a written request to mediate has been given by any party to the engagement. Any mediation initiated as a result of this engagement shall be administered within the Jefferson County, Kentucky by a mediation organization of our mutual choice, according to its mediation rules, and any ensuing litigation shall be conducted within said county, according to Kentucky law. The results of any such mediation shall be binding only upon agreement of each party to be bound. The costs of any mediation proceeding shall be shared equally by the participating parties.

Any litigation arising out of this engagement, except actions by us to enforce payment of our professional invoices, must be filed within one year from the completion of the engagement, notwithstanding any statutory provision to the contrary. In the event of litigation brought against us, any judgment you obtain shall be limited in amount, and shall not exceed the amount of the fee charged by us, and paid by you, for the services set forth in this engagement letter.

This engagement letter is contractual in nature, and includes all of the relevant terms that will govern the engagement for which it has been prepared. The terms of this letter supersede any prior oral or written representations or commitments by or between the parties. Any material changes or additions to the terms set forth in this letter will only become effective if evidenced by a written amendment to this letter, signed by all of the parties.

We understand that your employees will assist in preparing all cash, accounts receivable, and other confirmations and schedules we request and will locate any documents selected by us for testing.

Barbara Lasky is the engagement partner and is responsible for supervising the engagement and signing the report or authorizing another individual to sign it.

We estimate our fees for these services will be \$7,200. The fee estimate is based on anticipated cooperation from your personnel and the assumption that unexpected circumstances will not be encountered during the audit. If significant additional time is necessary, we will discuss it with you and arrive at a new fee estimate before we incur the additional costs. A service charge of 1.5% per month will be added to unpaid accounts 30 days after the original billing date.

We appreciate the opportunity to be of service to you and believe this letter accurately summarizes the significant terms of our engagement. If you have any questions, please let us know. If, after full consideration and consultation with counsel if so desired, you agree with the terms of our engagement as described in this letter, please sign the enclosed copy and return it to us, keeping a fully-executed copy for your records.

Very truly yours,

Anderson, Bujud. Ludy . Window . C.S.C.

ANDERSON, BRYANT, LASKY & WINSLOW, P.S.C.

RESPONSE:

This letter correctly sets forth the understanding of South Louisville Community Ministries, Inc.

Officer signature:

Title:

Date:

. 16, 2014

Q: ABLW Clients South Louisville Community Ministries, Ind 2014 Reports & Letters Audit Engagement Letter - NPO. docr

## FINANCIAL STATEMENTS AND INDEPENDENT AUDITOR'S REPORT

## SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC.

**JUNE 30, 2013 AND 2012** 

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Providing timely, accurate, useful information to decision makers

## INDEPENDENT AUDITOR'S REPORT

The Board of Directors
South Louisville Community Ministries, Inc.
Louisville, Kentucky

We have audited the accompanying financial statements of the South Louisville Community Ministries, Inc., (a not-for-profit organization) which comprise the statements of financial position as of June 30, 2013 and 2012, and the related statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the financial statements.

## Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

## Auditor's Responsibility

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

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

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

#### Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the South Louisville Community Ministries, Inc. as of June 30, 2013 and 2012, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

# Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedule of contract activity – adult day care is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Ardren, Brynt, Luky + Winter, P.s.c.

Louisville, Kentucky September 24, 2013

### STATEMENTS OF FINANCIAL POSITION SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. JUNE 30, 2013 AND 2012

	<u>2013</u>	<u>2012</u>
ASSETS		
Cash	\$ 59,033	\$ 53,037
Accounts receivable	10,723	9,164
Grants receivable	50,535	32,488
Promises to give	10,000	-
Property and equipment, net	23,775	28,305
Total assets	\$ 154,066	\$ 122,994
LIABILITIES AND NET ASSETS LIABILITIES		
Accounts payable and other liabilities	\$ 6,705	\$ 16,783
Line of credit	Ψ 0,700	5,733
Note payable	1,675	10,234
Total liabilities	8,380	32,750
NET ASSETS		
Unrestricted	110,604	75,637
Temporarily restricted	35,082	14,607
Total net assets	145,686	90,244
Total liabilities and net assets	<u>\$ 154,066</u>	\$ 122,994

# STATEMENTS OF ACTIVITIES SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. FOR THE YEARS ENDED JUNE 30, 2013 AND 2012

		2013		2012				
		Temporarily		Temporarily				
	Unrestricted	Restricted	<u>Total</u>	Unrestricted	Restricted	<u>Total</u>		
Revenue and support:								
Contributions and grants	\$ 544,052	\$ 45,800	\$ 589,852	\$ 611,992 -	\$ 14,607	\$ 626,599		
Program revenue	324,083	-	324,083	265,651	1000	265,651		
Special events	29,704	P**	29,704	22,076 -	<b>PR</b>	22,076		
Special events expense	(4,380)	-	(4,380)	(3,011)		(3,011)		
Miscellaneous income	8,070		8,070	8,068 ·		8,068		
Total revenue and support	901,529	45,800	947,329	904,776	14,607	919,383		
Net assets released from restrictions:								
Restrictions satisfied by payments	25,325	(25,325)	-	7,889	(7,889)			
Total revenue, support and reclassifications	926,854	20,475	947,329	912,665	6,718	919,383		
Expenses:								
Program services	796,306	-	796,306	771,870	-	771,870		
Management and general	77,090	-	77,090	83,261	-	83,261		
Fund raising	18,491		18,491	14,287		14,287		
Total expenses	891,887	***	891,887	869,418		869,418		
Increase in net assets	34,967	20,475	55,442	43,247	6,718	49,965		
Net assets at beginning of year	75,637	14,607	90,244	32,390	7,889	40,279		
Net assets at end of year	\$ 110,604	\$ 35,082	\$ 145,686	<u>\$ 75,637</u>	\$ 14,607	\$ 90,244		

								20	012							
					F	logiam								·-···		
,	A	dult Day Care		nergency ssistance		leals on Wheels	<u>\$</u>	Youth Services		Total Program		anagement and <u>General</u>	]	Fund Raising		<u>Total</u>
Salaries and wages	\$	151,895	\$	40,317	\$	11,088	\$	27,381	S	230,681	\$	52,224	\$	12.000	•	225 251
Employee benefits and payroll taxes		40,186	•	9,720	_	931	Ψ.	1,701	Ψ	.52,538	Φ	1,139	4	13,056	\$	295,961
Assistance to individuals		-		314,396		-				314,396		1,139		99		53,776
Other program expense		39,250		6,711		2,684		6,962		55,607		•		-		314,396
Professional fees and contract services		3,616		1,120		448		1,056		6,240		9 012		-		55,607
Supplies		7,712		1,335		263		620		9,930		8,813		64		15,117
Telephone		5,369		606		242		572		6,789		432		. 38		10,400
Utilities		1,894		587		235		553		3,269		399		35		7,223
Postage		825		256		102		241		-		386		34		3,689
Occupancy		11,650		13,083		5,231		12,335		1,424		168		15		1,607
Repair and maintenance		6,250		599		239				42,299		8,599		748		51,646
Printing, publications and advertising		301		93		37		1,611 88		8,699		394		34		9,127
Travel, training and conferences		18,761		161		64				519		61		5		585
Insurance		4,916		720		504		152 679		19,138		106		9		19,253
Bank fees		142		44		304 18				6,819		6,837		41		13,697
Dues and subscriptions		228		70		-		42		246		29		3		278
Meals and entertainment		2,859		138		28		66		392		46		4		442
License and permits		458		3		55		130		3,182		91		8		3,281
Interest expense						1		3		465		2		-		467
Miscellaneous		- 495		* * * * * * * * * * * * * * * * * * * *		- 45				-		2,459		-		2,459
	*	493		117	<u> </u>	47		110		769		77		7		853
Total expenses before depreciation		296,807		390,076		22,217		54,302		763,402		82,262		14,200		859,864
Depreciation		4,907		1,520		608	-	1,433		8,468		999		87		9,554
Total expenses	\$	301,714	\$	391,596	\$	22,825	\$	55,735	\$	771,870	<u>\$</u>	83,261	\$	14,287	\$	869,418



# STATEMENTS OF CASH FLOWS SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. FOR THE YEARS ENDED JUNE 30, 2013 AND 2012

CARLEY ORIGINAL OPEN AND AND AND AND AND AND AND AND AND AN		<u>2013</u>		<u>2012</u>
CASH FLOWS FROM OPERATING ACTIVITIES:				
Change in net assets	\$	55,442	\$	49,965
Adjustments to reconcile change in net cash				
from operating activities:				
Depreciation		9,641		9,554
(Increase) decrease in operating assets:				
Accounts receivable		(1,559)		1,607
Grants receivable		(18,047)		(16,428)
Promises to give		(10,000)		
Increase (decrease) in operating liabilities:				
Accounts payable and liabilities		(10,078)	<del></del>	(2,681)
Net cash provided (used) by operating activities		25,399	<del></del> -	42,017
CASH FLOWS FROM INVESTING ACTIVITIES:				
Purchase of property and equipment		(5,111)		-
Net cash provided (used) by investing activities	******	(5,111)		**
CASH FLOWS FROM FINANCING ACTIVITIES:				
Payments on line of credit		(5,733)		(8,690)
Payments on long term debt		(8,559)		(2,666)
Net cash provided (used) by financing activities	<del></del>	(14,292)	<del></del>	(11,356)
Net increase (decrease) in cash		5,996		30,661
Cash at beginning of year		53,037		22,376
Cash at end of year	\$	59,033	\$	53,037
SUPPLEMENTAL DISCLOSURES:				
Interest paid	\$	980	\$	2,459

## NOTES TO FINANCIAL STATEMENTS SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. JUNE 30, 2013 AND 2012

# NOTE 1. NATURE OF THE BUSINESS AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

South Louisville Community Ministries, Inc. (SLCM), located in Louisville, Kentucky, is a not-for-profit organization founded in 1976. The purpose of SLCM is to be an interfaith organization of representatives of churches, established to coordinate the efforts of the various segments of the community in order to enhance the religious, educational, social, health, economic, and community development of children, youth, and adults, and thus improve their quality of life.

SLCM's program services include:

Services for the Elderly: These services include an adult day care center, and various recreational, wellness, meals, and social activities for senior citizens in the areas served by the organization. Also, over 75 homebound seniors are provided one hot meal per day, five days per week, delivered by the Meals on Wheels Program operated by SLCM.

<u>Assistance</u>: These emergency assistance services include payments for rent, utilities, and prescriptions, and managing a Dare to Care Food Pantry for qualified low-income residents in the areas served by the organization.

#### Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

#### Basis of Accounting

The financial statements of SLCM have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables and other liabilities.

#### Basis of Presentation

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) with regards to financial statements of not-for-profit organizations. Under this guidance, SLCM is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. A description of the three net asset categories follows:

<u>Unrestricted Net Assets</u>: include the portion of expendable funds that are not subject to donor-imposed stipulations.

<u>Temporarily Restricted Net Assets</u>: include gifts for which donor imposed restrictions have not been met.

<u>Permanently Restricted Net Assets</u>: include amounts which the donor has stipulated that the corpus be invested in perpetuity and only the income be made available for program operations in accordance with donor restrictions.

#### Cash

Cash consists solely of cash on deposit. Cash received with donor-imposed restrictions limiting its use to long-term purposes is not considered cash for purposes of the statements of cash flows.

#### Accounts Receivable

Accounts receivable consists primarily of amounts billed for services performed. It is SLCM's policy to charge off uncollectible accounts receivable when management determines the receivable will not be collected. All accounts are deemed to be fully collectible.

#### Grants Receivable

Grants receivable consists primarily of amounts that SLCM has requested for reimbursement of grant-related expenses. All accounts are deemed to be fully collectible.

#### Promises to Give

Unconditional promises to give are recognized when the donor makes a promise to give to SLCM that is, in substance, unconditional. Unconditional pledges receivable becoming due in the next year are recorded at net realizable value. Unconditional pledges receivable due in subsequent years are reported at the present value of their net realizable value, using risk-free interest rates applicable to the years in which the promises are received. Conditional promises to give are recognized when the conditions on which they depend are substantially met.

#### **Property and Equipment**

SLCM capitalizes all expenditures for property and equipment in excess of \$500. Purchased property and equipment are carried at cost. Donated property and equipment are recorded as support at their estimated fair value. Such donations are reported as unrestricted support unless the donor has restricted the donated asset to a specific purpose. Property and equipment are depreciated using the straight-line method over the estimated useful life of the respective assets (4-20 years). Depreciation of leasehold improvements is provided over the shorter of the useful life or the remaining term of the related lease on a straight-line basis.

#### Contributions

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence and/or nature of any donor restrictions.

SLCM treats temporarily donor restricted contributions whose restrictions are met in the same reporting period as unrestricted support. All other donor-restricted support is reported as an increase in temporarily or permanently restricted net assets, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statements of activities as net assets released from restrictions.

#### In-kind Materials, Equipment, Services and Space

No amounts have been reflected in the financial statements for donated services. SLCM pays for most services requiring specific expertise. However, many individuals volunteer their time and perform a variety of tasks that assist SLCM with programs, solicitations and various committee assignments.

In-kind materials, equipment and space are reflected as contributions and assets or expense in the accompanying statements at their estimated fair values on the date of contribution. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used for a specific purpose are reported as temporarily restricted contributions.

#### **Expense Allocation**

Expenses are allocated based on estimated time spent devoted to programs and supporting services.

#### **Income Tax Status**

SLCM is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. SLCM qualified for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization that is not a private foundation under Section 509(a)(2).

SLCM is exempt from filing Form 990, Return of Organization Exempt from Income Tax because SLCM is affiliated with a church.

#### **Subsequent Events**

Management has evaluated subsequent events for recognition or disclosure in the financial statements through September 24, 2013, which was the date at which the financial statements were available to be issued.

#### NOTE 2. CONCENTRATIONS OF CREDIT RISK

Concentration of Revenue – SLCM receives twenty percent of its revenue from the Commonwealth of Kentucky, Cabinet for Health Services through KIPDA for its Adult Day Care program. This funding source is subject to periodic budget approvals and is subject to change.

#### NOTE 3. PROMISES TO GIVE

Unconditional promises to give are all current and consist of the following:

Sisters of Charity - renovations

\$ 10,000

#### NOTE 4. PROPERTY AND EQUIPMENT

Depreciation is provided in amounts sufficient to relate the cost of depreciable assets to operations over the estimated useful lives on a straight-line basis. At June 30, 2013 and 2012 the cost and accumulated depreciation of such assets were as follows:

	<u>2013</u>	<u>2012</u>
Vehicles	\$ 21,960	\$ 21,960
Equipment	4,654	1,494
Furniture & fixtures	19,317	17,367
Leasehold improvements	49,297	49,297
	95,228	90,118
Less accumulated depreciation	(71,453)	(61,813)
Property and equipment, net	<u>\$ 23,775</u>	<u>\$ 28,305</u>
Depreciation expense	\$ 9,641	\$ 9,554

#### NOTE 5. LINE OF CREDIT

SLCM has a \$35,000 bank line of credit available that expires in February 2014, secured by general business assets. The line of credit bears interest at prime plus 1.0%, minimum of 4.5% (the prime rate was 3.25% at June 30, 2013). At June 30, 2013, SLCM had no outstanding balance against the line.

#### NOTE 6. NOTE PAYABLE

Note payable consists of a vehicle loan, due February 13, 2016, secured by a vehicle with a book value of approximately \$11,000 at June 30, 2013. Payments are \$280 monthly at 7.70% interest. SLCM has been making additional principal payments and will pay the loan off in 2013. Future minimum payments under the note are as follows:

6/30/14

\$ 1,675

# NOTE 7. RESTRICTIONS ON NET ASSETS

Temporarily restricted net assets are available for the following purposes:

	<u>2013</u>	2012
Medications Meals on wheels Emergency assistance	\$ 10,000 25,082	\$ - 6,877 7,730
Total	\$ 35,082	\$ 14,607

#### NOTE 8. LEASES

The Organization leases the facility used by the Adult Day Care Center. The term of the lease is for four years at \$950 per month and expires June 2017. SLCM has also signed a new office lease beginning August 1, 2013 through July 31, 2020 for \$500 per month. Future minimum payments under the leases are as follows:

6/30/14	\$ 16,9	00
6/30/15	17,4	
6/30/16	18,0	
6/30/17	18,3	30
6/30/18	6,3	
Thereafter	13,3	<u>70</u>
Total	\$ 90,36	<u> 50</u>

Rent expense was \$11,100 and \$11,650 for the years ended June 30, 2013 and 2012, respectively. SLCM also leases office space located at 4803 Southside Drive from Americana Community Center, Inc. for \$1 per year through August 2013. The fair market value of the lease is \$30,000 and \$39,996 for the years ended June 30, 2013 and 2012, respectively, and is recorded as contributions and occupancy expense in the statements of activities.

#### NOTE 9. IN-KIND DONATIONS

SLCM records various types of in-kind support, including food, materials and other tangible assets. Contributed in-kind support is recognized in accordance with the Statement of Financial Accounting Standards in its Accounting Standards Codification 958-605-25, which governs the presentation of financial statements of not-for-profit organizations. This pronouncement requires recognition of professional services received if those services (a) create or enhance long-lived assets or (b) require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation.

Most of the services received by SLCM do not meet these criteria. In 2013, no amounts were recognized, although volunteers provided countless hours of assistance.

Contributions of tangible assets are recognized at fair market value when received. The amounts reflected in the accompanying financial statements as inkind support are offset by like amounts included in expenses or assets. Food donations of \$189,844 and \$212,340 and rent of \$30,000 and \$39,996 was recognized for the years ended June 30, 2013 and 2012, respectively.

# SUPPLEMENTAL INFORMATION

# SCHEDULE OF CONTRACT ACTIVITY – ADULT DAY CARE SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. FOR THE YEAR ENDED JUNE 30, 2013

State Grantor:

Commonwealth of Kentucky, Cabinet for Health Services

Pass-through Grantor:

KIPDA

Program Title:

Adult Day Care

Pass-through Contract Number:

M-06156729-(SOU)

Period of Contract:

July 1, 2012 to June 30, 2013

• •			
			<u>Actual</u>
REVENUES			
State funds			\$ 186,950
Fees/donations			1,126
Total revenues			
			\$ 188,076
	Actual Units		Amount
	<u>Provided</u>	Rate	<b>Provided</b>
UNITS OF SERVICE			
Adult Day Health Care			
Adult Day Health Care	30,864	\$ 4.00	\$ 123,456
Title 3-B	1,251	8.00	10,008
Alzheimer's Respite in Day Care	13,521	4.00	54,084
Case Management	•		- 1,001
Adult Day Health Care	98	4.00	392
Alzheimer's Respite	44	4.00	136
Total Day Care	45,778		188,076
Less:			
Fees			1,126
Payments from KIPDA as of June 30, 2013			173,590
			173,390
Due from KIPDA at June 30, 2013			\$ 13,360