

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

Applicant/Program: Louisville Asset Building Coalition, Inc. / Volunteer Income Tax Assistance (VITA) Program

Executive Summary of Request:
 Neighborhood Development Funding will be directed to the Louisville Asset Building Coalition, Inc for expenses associated with the Volunteer Income Tax Assistance program. The VITA program provides free preparation services to low income individuals throughout our community.

Is this program/project a fundraiser?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is this applicant a faith based organization?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does this application include funding for sub-grantee(s)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

I have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I have read the organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required.

<u>14</u>		<u>5,000.01</u>	<u>12/8/2015</u>
District #	Council Member Signature	Amount	Date

Primary Sponsor Disclosure
 List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.
 CW Fowler volunteers for the program.
 District 14 Staff Assistant Cindy Thieneman volunteers for the program.

Approved by:

_____	_____
Appropriations Committee Chairman	Date

Clerk's Office Only:

Request Amount: _____	Committee Amended Appropriation: _____
Original Appropriation: _____	Council Amended Appropriation: _____

Applicant/Program: Louisville Asset Building Coalition, Inc. / Volunteer Income Tax Assistance (VITA) Program

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

_____	_____	_____	_____
District #	Council Member Signature	Amount	Date
_____	_____	_____	_____
District #	Council Member Signature	Amount	Date
_____	_____	_____	_____
District #	Council Member Signature	Amount	Date
_____	_____	_____	_____
District #	Council Member Signature	Amount	Date
_____	_____	_____	_____
District #	Council Member Signature	Amount	Date
_____	_____	_____	_____
District #	Council Member Signature	Amount	Date

**LOUISVILLE METRO COUNCIL
NEIGHBORHOOD DEVELOPMENT FUND APPLICATION CHECKLIST**

Legal Name of Applicant Organization: Louisville Asset Building Coalition, Inc.

Program Name and Request Amount: Volunteer Income Tax Assistance (VITA) Program

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

Prepared by:



Date: 12/8/2015



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization:		Louisville Asset Building Coalition	
<i>(as listed on: http://www.sos.ky.gov/business/records)</i>			
Main Office Street & Mailing Address: 118 W Breckinridge St., Louisville, KY 30203			
Website: labcservices.org			
Applicant Contact:	Ron Hatch	Title:	Executive Director
Phone:	(502) 882-5490	Email:	ron.hatch@labcservices.org
Financial Contact:	Barbara Laskey	Title:	Partner
Phone:	(502) 584-9793	Email:	Blaswkey@ablw-cpas.com
Organization's Representative who attended NDF Training: Ron Hatch			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	118 W Breckinridge St		
Council District(s):	All	Zip Code(s):	All
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: Volunteer Income Tax Assistance (VITA)			
Total Request: (\$)	34,500	Total Metro Award (this program) in previous year: (\$)	\$30,250
Purpose of Request (check all that apply):			
<input checked="" type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current Year Projected Budget <input checked="" type="checkbox"/> List of Board of Directors (include term & term limits) <input checked="" type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense		<input type="checkbox"/> Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 <input type="checkbox"/> Evaluation forms if used in the proposed program <input type="checkbox"/> Annual audit (if required by organization) <input type="checkbox"/> Faith Based Organization Certification Form, if required <input checked="" type="checkbox"/> Staff including the 3 highest paid staff	
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:	External Agency Fund	Amount: (\$)	\$17,500
Source:	NDF	Amount: (\$)	\$15,250
Source:	NDF	Amount: (\$)	\$15,000
Has the applicant contacted the BBB Charity Review for participation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Has the applicant met the BBB Charity Review Standards? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

The Louisville Asset Building Coalition's (LABC's) mission is "to promote financial stability through economic success". Our primary program involves assisting low-moderate income individuals in filing their tax returns and correctly securing tax credits that increase financially stable.

The original partnership that became LABC began in 2002 and included support from United Way, Annie E Casey and the Metro Government. The original programmatic partners included the Center for Women and Families, Louisville Urban League, Louisville Central Community Center, Americana Community Center and Wesley House. MUW was the sponsoring and fiduciary agent until January 2014. LABC incorporated in 2012 and received tax exempt status from the IRS in November 2014.

Free federal and state income tax preparation is the core service provided in conjunction with community partners and volunteers targeting low to moderate income working individuals and families. In addition, we link clients to partners that help them open bank accounts for securing refunds, and provide opportunities for customers to access additional financial counseling and other services through LABC and referrals to other partner organizations like free energy audits provided by LG&E.

Through our relationships with other community organizations and government agencies, we also promote programs designed to assist families. Examples of this is our work with Metro United Way in promoting the 'Ages and Stages' program and soliciting customer survey data regarding the proposed Kentucky earned income tax credit.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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.):

Free tax preparation services for individuals and families earning \$52,000 or less are currently offered year round. During tax season, from January through April 15th, tax preparation services are offered at a variety of locations throughout the county. Our tax sites are selected based on their accessibility by customers in our target markets (see list of current year tax sites, attached). We also assist clients who want to file their own taxes using two free tax preparation software options. Outside of tax season, tax preparation is available in our office on West Breckinridge St., Sun Valley Community Center and the Louisville Urban League.

In 2016 we anticipate assisting more than 10,300 filers and generating close to \$19,000,000 in returns. In addition to the returns, we anticipate referring clients that:

- Do not have a bank account will be referred to Bank of Louisville to establish a banking relationship. Bank of Louisville estimates that individuals without banking relationships will spend more \$40,000 over their life time on check cashing and other fees.
- Own their home will be referred to a free energy audit sponsored by LG&E.
- Have a dependent under six will be referred to MUW's Ages and Stages program to help them get to school ready to succeed.

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

NDF funds will be used to support the operation of free tax sites located throughout Jefferson County that operate from mid-January through mid April as well the preparation of taxes that are prepared from mid-April through mid-October. This will cover approximately of the cost of the 2016 filing season.

NDF funds will be used for exclusively to support the volunteer tax preparation including: hardware (laptops and printers), office supplies (copy paper, staples, staplers, envelopes, toner, etc.) and regular and seasonal personnel.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

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

Effective October 24, 2013, reimbursements should not be made unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):

- ✓ 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.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Last year, the Coalition completed 10,403 returns benefiting more than 16,000 individuals. This brought back over \$18,500,000 to individuals and families; money that is spent largely in our community. The program served clients from nearly every zip code in Jefferson County and ????? clients from outside of the county. Please see the attached list of clients by zip code served for more detail. More than 98% of our clients had household incomes that were less than \$50,000. Thirty five percent of our clients had incomes below poverty level and 44% had incomes between poverty and less than 200% of poverty level.

Our data is based on information from our tax preparation software, Taxwise and customer surveys requested of every client receiving tax preparation services. The customer survey information is compiled through Taxwise software and/or entered into a database by our staff and volunteers. The program and the Taxwise software is administered under the direction of the Internal Revenue Service.

The following client story is illustrative of the impact that our work has on the lives of the clients we serve: A single mother that was a client of Family Scholar House received a flyer in her 3 year olds Early Childhood backpack and came to one of our sites. She indicated that she had been letting a friend prepare her taxes and decided to let someone else do so. She had a copy of the last two years with her when she arrived at the tax site. The mother's Adjusted Gross Income was \$21,500 and she was a full time student. We were able to prepare the tax return and her refund was \$10,300. It included Earned Income Tax, Child Tax, Additional Child Tax and American Opportunity Credits. She cried and told us that the refund would help her pay tuition, pay a couple of bills and save the rest. The Site Coordinator amended two years' of prior returns and the client received another \$2,000.

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.

LABC is, by nature and necessity, a collaborative venture. It was establish by a collection of funders and community partners that had an interest in strengthening the economic well-being of clients and the broader community. The tax preparation service is currently provided at nine fixed sites (Americana Community Center, Bates Community Development Center, LABC, Louisville Central Community Center, Louisville Urban League, Portland Promise Center, Salt and Light CDC, Sun Valley Community Center and Wesley House) and more than fifteen mobile sites (University of Louisville, Jewish Family Career Services, Daymar College, Family Scholar House, United Crescent Hill Ministries, Neighborhood House, Center for Accessible Living and Amazon). All of these partners provide access to clients as well as space and other resources that assist in the tax preparation.

We also work very closely with other community partners to connect our clients to other existing services including Bank on Louisville (establish banking relationships for the unbanked), LG&E (provides energy audits for homeowners) and Metro United Way (connects clients with young children to programs that help children get to kindergarten ready to succeed).

We have a very small staff (less than 5 FTE's) so our program depends on volunteers that work as greeters and tax preparers. In 2016, we will have close to 150 volunteers that serve in this capacity. We work closely with Metro United Way, Bellarmine and U of L to recruit and place the volunteers. The two universities provide us with access to students pursuing degrees in business, accounting and law.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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.

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
A: Personnel Costs Including Benefits	28,000	217,519	245,519
B: Rent/Utilities	0	24,680	24,680
C: Office Supplies	3,500	3,500	7,000
D: Telephone	0	0	0
E: In-town Travel	0	2,500	2500
F: Client Assistance (Attach Detailed List)	0	0	0
G: Professional Service Contracts	0	16,300	16300
H: Program Materials	0	3,000	3,000
I: Community Events & Festivals (Attach Detail List)	0	0	0
J: Machinery & Equipment	0	0	0
K: Capital Project	3,000	2,000	5,000
L: Other Expenses (Attach Detail List)	0	27,760	27,760
*TOTAL PROGRAM/PROJECT FUNDS	34,500	297,259	331,759
% of Program Budget	10.4 %	89.6 %	100%

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

Other State, Federal or Local Government	84,500
United Way	34,822
Private Contributions (do not include individual donor names)	177,937
Fees Collected from Program Participants	0 Not allowed by IRS
Other (please specify)	
Total Revenue for Columns 2 Expenses **	297,259

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

**Must equal or exceed total in column 2.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Rent, utilities, telephone and internet service provided by Family Scholar House	13,000	Prorated cost based on sq footage/available for six months.
Volunteer Hours	151,732.82	8,775.5 hours times \$17.33
<i>Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)</i>	164,732.82	

*** 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:

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

If YES, please explain:

Currently Family Scholar House provides LABC with free office space including; utilities, telephone and internet services. Family Scholar House has notified us that they will need to use our current space for a program that serves people that are aging out of foster care in 2016. Consequently, we will need to relocate and will most likely incur material additional operating costs. We will begin looking for new space this summer.

We will also review our service data after the completion of the filing season with an eye towards opening a couple of new sites next year.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – CERTIFICATIONS & ASSURANCES

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

Standard Assurances

1. Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
2. 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.
6. Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
7. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end.
8. Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
10. Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
11. Applicant 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.
5. The Agency understands the Americans with Disabilities Act (ADA) and makes reasonable accommodations.

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

SECTION 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:	<i>Ron Hatch</i>	Date:	11-4-2015
Legal Signatory: (please print):	RON HATCH	Title:	Ex. DIRECTOR
Phone:	882-5490	Extension:	
Email:	Ron.Hatch@29ACServices.org		

Louisville Asset Building Coalition
Zip Code Data for Jefferson County KY ~ 2015 Filing Season
VITA Returns Including Prior Year and FSA Returns

Zip Code	Returns
40018	-
40023	-
40025	1
40027	-
40041	-
40059	2
40109	3
40118	47
40177	8
40201	9
40202	75
40203	339
40204	47
40205	120
40206	142
40207	44
40208	212
40209	15
40210	667
40211	1,031
40212	821
40213	162
40214	456
40215	302
40216	799
40217	104
40218	331
40219	400
40220	143
40221	2
40222	47
40223	17
40224	-
40225	-
40228	80
40229	113
40231	-
40232	5
40233	3
40241	44
40242	29

40243	13
40245	32
40250	1
40251	14
40252	1
40253	1
40255	1
40256	8
40257	1
40258	469
40259	1
40261	1
40266	-
40268	10
40269	3
40270	4
40271	-
40272	724
40280	6
40281	-
40282	-
40283	-
40285	1
40287	-
40289	-
40290	-
40291	95
40291	-
40293	-
40294	-
40295	-
40296	-
40297	-
40298	-
40299	41
other	-
unknown	<u>1,487</u>
	9,534

NDF OTHER EXPENSES DETAIL LIST

Insurance/Liability & D&O)	6,000
Program Training & Materials	1,000
Payments to Partner Sits for space & materials	18,200
Storage	1,560
Volunteer Recognition	<u>1,000</u>
Total Other Expenses	27,760

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

DEPARTMENT OF THE TREASURY

Date: **AUG 13 2014**

LOUISVILLE ASSET BUILDING COALITION
INC
C/O CHRISTINE N KOENIG
9300 SHELBYVILLE RD STE 1100
LOUISVILLE, KY 40222

Employer Identification Number:

DLN:

17053126301003

Contact Person:

CUSTOMER SERVICE

ID# 31954

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

June 30

Public Charity Status:

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

Form 990 Required:

Yes

Effective Date of Exemption:

February 22, 2012

Contribution Deductibility:

Yes

Addendum Applies:

No

Dear Applicant:

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

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

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

Letter 947

LOUISVILLE ASSET BUILDING COALITION

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

Sincerely,

A handwritten signature in black ink that reads "Tamera Ripperda". The signature is written in a cursive style with a large, prominent initial "T".

Director, Exempt Organizations

NGCDC Revised Budget
July 1, 2015 - June 30, 2016

	Total
IRS	\$ 67,000
Metro United Way	\$ 34,822
Lou/Jeff County NDF	\$ 34,500
Lou/Jeff County External Agency	\$ 17,860
Intuit	\$ 50,000
PNC	\$ 10,000
Brown Forman	\$ 2,500
BBT	\$ 2,500
Fifth Third	\$ 2,500
Republic	\$ 3,500
To Be Raised	\$ 50,000
Other	
Total Income	\$ 275,182
Expenses	
Salaries and Wages	\$ 166,400
Taxes	\$ 22,464
Benefits	\$ 28,280
Total Payroll	\$ 217,144
IT/Site Setup and consult	\$ 2,500
Computer Equipment	\$ 5,000
Travel/mileage	\$ 2,500
Insurance	\$ 6,000
Accountant	\$ 7,800
Office operations*	\$ 5,000
Office supplies	\$ 7,000
Print & advertising	\$ 3,000
Program/Training Materials	\$ 1,000
IT and internet	\$ 1,500
Website Development	\$ 1,000
Storage	\$ 1,560
Food and End of Season	\$ 1,000
Partner stipends	\$ 10,000
Misc	\$ 3,000
Total Expenses	\$ 275,004
Net (Over)/Under Income	\$ 178



Louisville Asset Building Coalition
2014-16
Board Listing

Scott Owens, Board Treasurer
Louisville Kentucky 40202-3445
502-419-2459
sowens@blueandco.com
Terms: Year One of 2nd Three Year Term

Artie Robertson
Louisville Urban League
1535 West Broadway
Louisville Kentucky 40203
(502) 585-4622
arobertson@lul.org
Terms: Year One of 2nd Three Year Term

Peter Wayne, Board Vice Chair
Wyatt Tarrant & Combs LLC
500 West Jefferson Street Suite 2800
Louisville Kentucky 40202
(502) 715-2823
pwayne@wyattfirm.com
Terms: Year One of 2nd Three Year Term

Delquan Dorsey
Governor Office on Minority Empowerment
700 Capitol Avenue, Ste. 132
Frankfort, Avenue 40601
(502) 564-2611
kyome@ky.gov
Terms: Year One of 2nd Three Year Term

Lisa Locke, Board Secretary
Community Development Specialist
Federal Reserve Bank of St. Louis
101 South 5th Street # 1920
Louisville Kentucky 40202
(502) 568-9292
Lisa.locke@stls.frb.org
Terms: Year One of 1st Three Year Term



Dwight Haygood Jr.
Brown Forman Corporation
850 Dixie Hwy
Louisville Kentucky 40210
C- (502) 396-7070 W- (502) 774-6506
dwright_haygood@b-f.com
Terms: Year One of 1st Three Year Term

Jim Blandford
Klump & Blandford PSC
1300 Gardiner Lane Suite 9
Louisville Kentucky 40213
[REDACTED] W- (502) 479-8540
[REDACTED]
Terms: Year One of 1st Three Year Term

Mark Farmer
Wyatt Tarrant & Combs LLC
500 West Jefferson Street Suite 2800
Louisville Kentucky 40202
(502) 562-7352
mfarmer@wyattfirm.com
Terms: Year One of 1st Three Year Term

Micheal Raisor
JCPS Vanhoose Education Center
3332 Newburg Road
Louisville Kentucky 40218
(502) 485-7655
Micheal.raisor@jefferson.kyschools.us
Terms: Year One of 1st Three Year Term

Eric Seto, Board Chair
Blueprint Technologies
(502) 751-1583
[REDACTED]
Terms: Year One of 1st Three Year Term

Financial Statements

Louisville Asset Building Coalition, Inc

September 30, 2015

Anderson, Bryant, Lasky & Winslow, PSC
943 South First Street
Louisville, KY 40203

ACCOUNTANT'S COMPILATION REPORT

Louisville Asset Building Coalition, Inc
118 West Breckinridge
Louisville, KY 40203

We have compiled the accompanying statement of financial position of Louisville Asset Building Coalition, Inc (a not-for-profit organization), as of September 30, 2015, and the related statement of activities for the one month and three months then ended. We have not audited or reviewed the accompanying financial statements and, accordingly, do not express an opinion or provide any assurance about whether the financial statements are in accordance with accounting principles generally accepted in the United States of America.

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America and for designing, implementing, and maintaining internal control relevant to the preparation and fair presentation of the financial statements.

Our responsibility is to conduct the compilation in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The objective of a compilation is to assist management in presenting financial information in the form of financial statements without undertaking to obtain or provide any assurance that there are no material modifications that should be made to the financial statements.

Accounting principles generally accepted in the United States of America require that accounts payable be recognized. The Organization has not recorded accounts payable. The effect of this departure from accounting principles generally accepted in the United States of America on the accompanying financial statements has not been determined.

Management has elected to omit substantially all of the disclosures and the statement of cash flows required by accounting principles generally accepted in the United States of America. If the omitted disclosures and statement of cash flows were included in the financial statements, they might influence the user's conclusions about the Organization's financial position, results of operations, and cash flows. Accordingly, the financial statements are not designed for those who are not informed about such matters.

The supplementary information contained in the schedules of activities is presented for purposes of additional analysis and is not a required part of the basic financial statements. The supplementary information has been compiled from information that is the representation of management. We have not audited or reviewed the supplementary information and, accordingly, do not express an opinion or provide any assurance on such supplementary information.

We are not independent with respect to Louisville Asset Building Coalition, Inc.

Anderson, Bryant, Lasky + Winslow, P.S.C.

Louisville, Kentucky
October 13, 2015

Louisville Asset Building Coalition, Inc
Statement of Financial Position
September 30, 2015

ASSETS

Cash - Republic Bank	\$ 33,196.19
Prepaid expenses	3,604.98
Accounts receivable	6,162.71
Promises to give	120,004.03
Equipment	7,899.91
Furniture (In-kind)	2,500.00
Accumulated depreciation	<u>(1,940.05)</u>

Total assets \$ 171,427.77

LIABILITIES & NET ASSETS

LIABILITIES

SUTA	\$ 69.30
Louisville withholding	425.49
Other payroll withholding	<u>(50.00)</u>

Total liabilities 444.79

NET ASSETS

Net assets	26,131.68
Increase (decrease) in unrestricted net assets - current year	<u>144,851.30</u>

Total net assets 170,982.98

Total liabilities and net assets \$ 171,427.77

Louisville Asset Building Coalition, Inc
Statement of Activities
For the Period Ended September 30, 2015
CONSOLIDATED - ALL DEPARTMENTS

	1 Month Ended	3 Months Ended	
	Sep. 30, 2015	Sep. 30, 2015	Pct
<u>Support and Revenue</u>			
Metro United Way grant	\$ -	\$ 34,822.27	19.48
PNC grant	-	-	-
Intuit Financial Foundation	-	50,000.00	27.97
Donations	-	25.00	0.01
Louisville Metro Government	-	9,087.29	5.08
Louisville Metro Government - External Agency	-	17,800.00	9.96
IRS - VITA	67,000.00	67,000.00	37.48
Interest income	2.21	6.73	-
	<u>67,002.21</u>	<u>178,741.29</u>	<u>100.00</u>
<u>Expenses</u>			
Salaries	\$ 8,517.50	\$ 21,070.76	11.79
Workers compensation insurance	511.00	511.00	0.29
Payroll taxes	651.59	1,681.21	0.94
401(k) match	296.40	760.88	0.43
Audit & accounting fees	121.40	5,484.27	3.07
Other professional services	-	-	-
MUW grant admin fees	-	262.50	0.15
Technology services	-	780.00	0.44
Advertising	-	299.00	0.17
Office supplies	287.92	287.92	0.16
Utilities	268.81	268.81	0.15
Telephone (In-kind)	-	-	-
800 telephone service - 2-1-1	-	-	-
Storage rental	153.00	419.00	0.23
Miscellaneous building services	-	-	-
Office cleaning services	-	-	-
Equipment expense	-	-	-
Depreciation	161.43	484.29	0.27
Equipment repairs and maintenance	-	546.45	0.31
Web/online communications	-	165.00	0.09
General printed materials	-	182.18	0.10
Bank charges	2.95	8.85	-
Promotional supplies & materials	390.00	390.00	0.22
Long distance travel	-	-	-
Conferences & seminars	-	-	-
Volunteer luncheons & meetings	-	-	-
Staff luncheons & meetings	-	-	-
Miscellaneous expenses	-	-	-
Permit & filing fees	230.88	287.87	0.16
	<u>11,592.88</u>	<u>33,889.99</u>	<u>18.96</u>
Total expenses	<u>11,592.88</u>	<u>33,889.99</u>	<u>18.96</u>
Increase (decrease) in unrestricted net assets	<u>\$ 55,409.33</u>	<u>\$ 144,851.30</u>	<u>81.04</u>

See Accountant's Compilation Report

Louisville Asset Building Coalition, Inc
Schedule of Activities
For the Period Ended September 30, 2015

LABC

	1 Month Ended	3 Months Ended	
	Sep. 30, 2015	Sep. 30, 2015	Pct
<u>Support and Revenue</u>			
Metro United Way grant	\$ -	\$ 34,822.27	99.91
Intuit Financial Foundation	-	-	-
Donations	-	25.00	0.07
Interest income	<u>2.21</u>	<u>6.73</u>	<u>0.02</u>
Total support and revenue	<u>2.21</u>	<u>34,854.00</u>	<u>100.00</u>
<u>Expenses</u>			
Salaries	\$ 5,375.23	\$ 13,567.44	38.93
Workers compensation insurance	511.00	511.00	1.47
Payroll taxes	651.59	1,681.21	4.82
401(k) match	296.40	760.88	2.18
Audit & accounting fees	121.40	5,484.27	15.73
Other professional services	-	-	-
MUW grant admin fees	-	262.50	0.75
Technology services	-	780.00	2.24
Advertising	-	299.00	0.86
Office supplies	287.92	287.92	0.83
Utilities	268.81	268.81	0.77
Telephone (In-kind)	-	-	-
800 telephone service - 2-1-1	-	-	-
Storage rental	153.00	419.00	1.20
Miscellaneous building services	-	-	-
Office cleaning services	-	-	-
Depreciation	161.43	484.29	1.39
Equipment repairs and maintenance	-	546.45	1.57
Web/online communications	-	165.00	0.47
General printed materials	-	182.18	0.52
Bank charges	2.95	8.85	0.03
Promotional supplies & materials	390.00	390.00	1.12
Long distance travel	-	-	-
Conferences & seminars	-	-	-
Volunteer luncheons & meetings	-	-	-
Staff luncheons & meetings	-	-	-
Miscellaneous expenses	-	-	-
Permit & filing fees	<u>230.88</u>	<u>287.87</u>	<u>0.83</u>
Total expenses	<u>8,450.61</u>	<u>26,386.67</u>	<u>75.71</u>
Increase (decrease) in unrestricted net assets	<u>\$ (8,448.40)</u>	<u>\$ 8,467.33</u>	<u>4.74</u>

See Accountant's Compilation Report

Louisville Asset Building Coalition, Inc
Schedule of Activities
For the Period Ended September 30, 2015

Walmart

	1 Month Ended Sep. 30, 2015	3 Months Ended Sep. 30, 2015	Pct
<u>Support and Revenue</u>			
<u>Expenses</u>			

See Accountant's Compilation Report

Louisville Asset Building Coalition, Inc
Schedule of Activities
For the Period Ended September 30, 2015

NCTC - FAFSA

	1 Month Ended Sep. 30, 2015	3 Months Ended Sep. 30, 2015	Pct
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Support and Revenue

Expenses

See Accountant's Compilation Report

Louisville Asset Building Coalition, Inc
Schedule of Activities
For the Period Ended September 30, 2015

Louisville Metro Government - Neighborhood Development

	1 Month Ended Sep. 30, 2015	3 Months Ended Sep. 30, 2015	Pct
<u>Support and Revenue</u>			
Louisville Metro Government	\$ -	\$ 9,087.29	100.00
Total support and revenue	<u>-</u>	<u>9,087.29</u>	<u>100.00</u>
<u>Expenses</u>			
Salaries	\$ 3,142.27	\$ 7,503.32	82.57
Total expenses	<u>3,142.27</u>	<u>7,503.32</u>	<u>82.57</u>
Increase (decrease) in unrestricted net assets	<u>\$ (3,142.27)</u>	<u>\$ 1,583.97</u>	<u>17.43</u>

See Accountant's Compilation Report

Louisville Asset Building Coalition, Inc
Schedule of Activities
For the Period Ended September 30, 2015

Louisville Metro Government - External Agency

	1 Month Ended Sep. 30, 2015	3 Months Ended Sep. 30, 2015	Pct
<u>Support and Revenue</u>			
Louisville Metro Government - External Agency	\$ <u> -</u>	\$ <u> 17,800.00</u>	<u>100.00</u>
Total support and revenue	<u> -</u>	<u> 17,800.00</u>	<u>100.00</u>
<u>Expenses</u>			
Increase (decrease) in unrestricted net assets	<u> -</u>	<u> 17,800.00</u>	<u>100.00</u>

See Accountant's Compilation Report

Louisville Asset Building Coalition, Inc
Schedule of Activities
For the Period Ended September 30, 2015

IRS - Volunteer Income Tax Assistance (VITA)

	1 Month Ended Sep. 30, 2015	3 Months Ended Sep. 30, 2015	Pct
<u>Support and Revenue</u>			
IRS - VITA	<u>\$ 67,000.00</u>	<u>\$ 67,000.00</u>	<u>100.00</u>
Total support and revenue	<u>67,000.00</u>	<u>67,000.00</u>	<u>100.00</u>
<u>Expenses</u>			
Equipment expense	\$ -	\$ -	-
Web/online communications	<u>-</u>	<u>-</u>	<u>-</u>
Total expenses	<u>-</u>	<u>-</u>	<u>-</u>
Increase (decrease) in unrestricted net assets	<u>\$ 67,000.00</u>	<u>\$ 67,000.00</u>	<u>100.00</u>

See Accountant's Compilation Report

Louisville Asset Building Coalition, Inc
Schedule of Activities
For the Period Ended September 30, 2015

PNC

	1 Month Ended Sep. 30, 2015	3 Months Ended Sep. 30, 2015	Pct
<u>Support and Revenue</u>			
<u>Expenses</u>			
Equipment expense	\$ -	\$ -	-
Web/online communications	-	-	-
	-	-	-
Total expenses	-	-	-
	-	-	-
Increase (decrease) in unrestricted net assets	\$ -	\$ -	-

See Accountant's Compilation Report

Date	Reference T	Description	Beginning Balance	Current Amount	YTD Balance
		11000 Cash - Republic Bank	45,438.84		
09/30/15	1	Cash Disbursements		(2,298.89)	
09/03/15	2	To record payroll 9/3/2015		(4,421.53)	
09/17/15	3	To record payroll 9/17/15		(4,549.56)	
09/30/15	4	To record MUW Monthly grant payment		2,901.86	
09/30/15	5	To record bank charges and interest		(0.74)	
09/30/15	6 R	To record prepayment of 10/1/2015 payroll		(3,604.98)	
09/30/15	1a	Cash Disbursements		(268.81)	
				<u>(12,242.65)</u>	<u>33,196.19</u>
		11200 Prepaid expenses	0.00		
09/30/15	6 R	To record prepayment of 10/1/2015 payroll		3,604.98	
				<u>3,604.98</u>	<u>3,604.98</u>
		11300 Accounts receivable	6,162.71		
				<u>0.00</u>	<u>6,162.71</u>
		11400 Promises to give	55,905.89		
09/30/15	4	To record MUW Monthly grant payment		(2,901.86)	
09/30/15	7	To record VITA PTG		67,000.00	
				<u>64,098.14</u>	<u>120,004.03</u>
		11500 Equipment	7,899.91		
				<u>0.00</u>	<u>7,899.91</u>
		11550 Furniture (In-kind)	2,500.00		
				<u>0.00</u>	<u>2,500.00</u>
		11600 Accumulated depreciation	(1,778.62)		
09/30/15	11 S	To record depreciation expense		(161.43)	
				<u>(161.43)</u>	<u>(1,940.05)</u>
		12230 State withholding	(278.64)		
09/03/15	2	To record payroll 9/3/2015		(173.16)	
09/17/15	3	To record payroll 9/17/15		(174.29)	
08/31/15	322 V	Kentucky State Treasurer 0801-08312015		278.64	
09/28/15	329 V	Kentucky State Treasurer 0901-09302015		347.45	
				<u>278.64</u>	<u>0.00</u>
		12235 SUTA	(69.30)		
				<u>0.00</u>	<u>(69.30)</u>
		12240 Louisville withholding	(257.14)		
09/03/15	2	To record payroll 9/3/2015		(83.96)	
09/17/15	3	To record payroll 9/17/15		(84.39)	
				<u>(168.35)</u>	<u>(425.49)</u>
		12250 Other payroll withholding	50.00		
09/03/15	2	To record payroll 9/3/2015		(50.00)	
09/17/15	3	To record payroll 9/17/15		(50.00)	

Date	Reference T	Description	Beginning Balance	Current Amount	YTD Balance
		12250 Other payroll withholding (cont.)			
09/14/15	327 V	Metro United Way* RON HATCH		50.00	
09/28/15	328 V	Metro United Way* 20151001		50.00	
				<u>0.00</u>	<u>50.00</u>
		13000 Net assets	(26,131.68)	<u>0.00</u>	<u>(26,131.68)</u>
		14000 Metro United Way grant	(34,822.27)	<u>0.00</u>	<u>(34,822.27)</u>
		14092 Donations	(25.00)	<u>0.00</u>	<u>(25.00)</u>
		15600 Interest income	(4.52)		
09/30/15	5	To record bank charges and interest		(2.21)	
				<u>(2.21)</u>	<u>(6.73)</u>
		17010 Salaries	8,192.21		
09/03/15	2	To record payroll 9/3/2015		2,697.46	
09/17/15	3	To record payroll 9/17/15		2,677.77	
				<u>5,375.23</u>	<u>13,567.44</u>
		17203 Workers compensation insurance	0.00		
09/10/15	323 V	Hartford Group 14222690 WC		511.00	
				<u>511.00</u>	<u>511.00</u>
		17204 Payroll taxes	1,029.62		
09/03/15	2	To record payroll 9/3/2015		325.05	
09/17/15	3	To record payroll 9/17/15		326.54	
				<u>651.59</u>	<u>1,681.21</u>
		17205 401(k) match	464.48		
09/03/15	2	To record payroll 9/3/2015		148.20	
09/17/15	3	To record payroll 9/17/15		148.20	
				<u>296.40</u>	<u>760.88</u>
		18008 Payroll processing & accounting fees	5,362.87		
09/03/15	2	To record payroll 9/3/2015		6.40	
09/17/15	3	To record payroll 9/17/15		115.00	
				<u>121.40</u>	<u>5,484.27</u>
		18016 MUW grant admin fees	262.50	<u>0.00</u>	<u>262.50</u>
		18017 Technology services	780.00	<u>0.00</u>	<u>780.00</u>

Louisville Asset Building Coalition, Inc
General Ledger

Date	Reference T	Description	Beginning Balance	Current Amount	YTD Balance
	18032	Advertising	299.00	<u>0.00</u>	<u>299.00</u>
09/10/15	18106 309	Office supplies Stapels	0.00	<u>287.92</u>	<u>287.92</u>
09/30/15	18201 310	Utilities Time Warner Cable	0.00	<u>268.81</u>	<u>268.81</u>
09/25/15	18414 311 V	Storage rental Stor All Downtown	266.00	<u>153.00</u>	<u>419.00</u>
09/30/15	18460 11 S	Depreciation To record depreciation expense	322.86	<u>161.43</u>	<u>484.29</u>
	18470	Equipment repairs and maintenance	546.45	<u>0.00</u>	<u>546.45</u>
	18507	Web/online communications	165.00	<u>0.00</u>	<u>165.00</u>
	18607	General printed materials	182.18	<u>0.00</u>	<u>182.18</u>
09/30/15	18610 5	Bank charges To record bank charges and interest	5.90	<u>2.95</u>	<u>8.85</u>
09/10/15	18630 309	Promotional supplies & materials Stapels	0.00	<u>390.00</u>	<u>390.00</u>
09/10/15	19413 324 V	Permit & filing fees Kentucky State Treasurer NOTICE 107873520	56.99	174.15	
09/10/15	325 V	Kentucky State Treasurer NOTICE 107873521		36.34	
09/10/15	326 V	Kentucky State Treasurer NOTICE 107873522		20.39	
				<u>230.88</u>	<u>287.87</u>
	34050	Intuit Financial Foundation	(50,000.00)	<u>0.00</u>	<u>(50,000.00)</u>
	55000	Louisville Metro Government	(9,087.29)	<u>0.00</u>	<u>(9,087.29)</u>

Louisville Asset Building Coalition, Inc
General Ledger

Date	Reference T	Description	Beginning Balance	Current Amount	YTD Balance
	57010	Salaries	4,361.05		
09/03/15	2	To record payroll 9/3/2015		1,551.54	
09/17/15	3	To record payroll 9/17/15		1,590.73	
				<u>3,142.27</u>	<u>7,503.32</u>
	65005	Louisville Metro Government - External Agency	(17,800.00)		
				<u>0.00</u>	<u>(17,800.00)</u>
	75040	IRS - VITA	0.00		
09/30/15	7	To record VITA PTG		(67,000.00)	
				<u>(67,000.00)</u>	<u>(67,000.00)</u>
Current Profit/(Loss)		<u>55,409.33</u>	YTD Profit/(Loss)		<u>144,851.30</u>
Number of Transactions		43	The General Ledger is in balance		<u>0.00</u>

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2013

Open to Public Inspection

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990

A For the 2013 calendar year, or tax year beginning **JUL 1, 2013** and ending **JUN 30, 2014**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization LOUISVILLE ASSET BUILDING COALITION		D Employer identification number
	Doing Business As		E Telephone number 502-882-5490
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	118 WEST BRECKINRIDGE STREET		300
City or town, state or province, country, and ZIP or foreign postal code LOUISVILLE, KY 40202		G Gross receipts \$ 201,436.	
F Name and address of principal officer: RONALD HATCH SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
J Website: WWW.LABC SERVICES.ORG		H(c) Group exemption number ▶	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 2014 M State of legal domicile: KY	

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROMOTE FINANCIAL STABILITY THROUGH ECONOMIC SUCCESS.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	10
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	373
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)		201,417.
	9 Program service revenue (Part VIII, line 2g)		0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		19.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		201,436.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,800.
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		86,822.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,928.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		20,539.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		109,161.	
19 Revenue less expenses. Subtract line 18 from line 12		92,275.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year 95,421.
	21 Total liabilities (Part X, line 26)		3,146.
	22 Net assets or fund balances. Subtract line 21 from line 20		92,275.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer RONALD HATCH, EXECUTIVE DIRECTOR	Date			
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name BARBARA A. LASKY	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name ▶ ANDERSON, BRYANT, LASKY & WINSLOW, PSC	Firm's EIN ▶	Phone no. (502) 584-9793		
	Firm's address ▶ 943 SOUTH FIRST STREET LOUISVILLE, KY 40203				

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



Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO PROMOTE FINANCIAL STABILITY THROUGH ECONOMIC SUCCESS.

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 86,830. including grants of \$ 1,800.) (Revenue \$) OVER THE PAST THIRTEEN YEARS, LABC HAS PROVIDED FREE INCOME TAX PREPARATION TO OVER 86,000 INDIVIDUALS, SAVED INDIVIDUALS OVER \$19 MILLION DOLLARS IN TAX PREPARATION FEES AND GENERATED OVER \$118 MILLION DOLLARS IN TOTAL FEDERAL AND STATE REFUNDS.

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

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

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

4e Total program service expenses 86,830.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for line numbers (1a-14b), descriptions of questions, and Yes/No columns. Includes questions about Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 4947(a)(1), and Form 720.



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

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **► KY**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website
 Another's website
 Upon request
 Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **►**
ANDERSON BRYANT LASKY & WINSLOW, PSC - 502-584-9793
943 S FIRST STREET, LOUISVILLE, KY 40203



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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SCOTT OWENS TREASURER	1.00	X		X				0.	0.	0.
(2) PETER WAYNE VICE CHAIR	1.00	X		X				0.	0.	0.
(3) DELQUAN DORSEY SECRETARY	1.00	X		X				0.	0.	0.
(4) ERIC SETO BOARD CHAIR	1.00	X		X				0.	0.	0.
(5) ARTIE ROBERTSON BOARD MEMBER	1.00	X						0.	0.	0.
(6) DWIGHT HAYGOOD JR. BOARD MEMBER	1.00	X						0.	0.	0.
(7) JIM BLANDFORD BOARD MEMBER	1.00	X						0.	0.	0.
(8) MARK FARMER BOARD MEMBER	1.00	X						0.	0.	0.
(9) MICHEAL RAISOR BOARD MEMBER	1.00	X						0.	0.	0.
(10) LISA LOCKE BOARD MEMBER	1.00	X						0.	0.	0.
(11) NEDRA YOUNG EXECUTIVE DIRECTOR	40.00			X				0.	0.	0.



Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes sub-totals for lines 1b, 1c, and 1d.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

Table with 3 columns: Question number, Question text, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a 'NONE' entry in the first row.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	86,990.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	114,427.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f		201,417.				
Program Service Revenue	2 a	Business Code					
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		19.			19.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a	a						
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions.			201,436.	0.	0.	19.	



Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,800.	1,800.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	19,462.	15,375.	2,335.	1,752.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	59,445.	55,503.	3,942.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	7,915.	7,110.	629.	176.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	445.		445.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	11,426.	1,823.	7,603.	2,000.
12 Advertising and promotion				
13 Office expenses	3,307.	1,298.	2,009.	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	27.		27.	
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a VOLUNTEER EXPENSES	1,566.	1,566.		
b CONFERENCES/SEMINARS	1,190.	1,190.		
c MAINTENANCE	1,000.		1,000.	
d STORAGE RENTAL	705.	705.		
e All other expenses	873.	460.	413.	
25 Total functional expenses. Add lines 1 through 24e	109,161.	86,830.	18,403.	3,928.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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



Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year		
Assets	1	Cash - non-interest-bearing	0.	1	0.	
	2	Savings and temporary cash investments		2	49,811.	
	3	Pledges and grants receivable, net	0.	3	45,097.	
	4	Accounts receivable, net	0.	4		
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	540.		
	b	Less: accumulated depreciation	10b	27.	10c	513.
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, line 11		12		
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		15		
16	Total assets. Add lines 1 through 15 (must equal line 34)		0.	16	95,421.	
Liabilities	17	Accounts payable and accrued expenses	0.	17	3,146.	
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable to unrelated third parties		24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
	26	Total liabilities. Add lines 17 through 25		0.	26	3,146.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		27	57,453.	
	28	Temporarily restricted net assets		28	34,822.	
	29	Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds		30		
	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
	32	Retained earnings, endowment, accumulated income, or other funds		32		
33	Total net assets or fund balances		0.	33	92,275.	
34	Total liabilities and net assets/fund balances		0.	34	95,421.	



Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	201,436.
2	Total expenses (must equal Part IX, column (A), line 25)	2	109,161.
3	Revenue less expenses. Subtract line 2 from line 1	3	92,275.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	0.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	92,275.

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization **LOUISVILLE ASSET BUILDING COALITION** Employer identification number 

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III - Functionally integrated
 - d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					201,417.	201,417.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge					19.	19.
4 Total. Add lines 1 through 3					201,436.	201,436.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						45,971.
6 Public support. Subtract line 5 from line 4.						155,465.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4					201,436.	201,436.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						201,436.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input checked="" type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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



Part IV

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

Lined area for supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Name of the organization

LOUISVILLE ASSET BUILDING COALITION

Employer identification number



Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

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

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

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

LOUISVILLE ASSET BUILDING COALITION

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	INTUIT 601 PENNSYLVANIA AVE NW, N BUILDING, SUITE 200 WASHINGTON, DC 20004	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>
2	INTERNAL REVENUE SERVICE 401 W. PEACHTREE ST, STOP 420D ATLANTA, GA 30308	\$ 61,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>
3	WALMART FOUNDATION 701 N. FAIRFAX ST ALEXANDRIA, VA 22314	\$ 9,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>
4	METRO GOVERNMENT 810 BARRET AVE, ROOM 233 LOUISVILLE, KY 40204	\$ 25,550.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>
5	METRO UNITED WAY 334 E BROADWAY LOUISVILLE, KY 40204	\$ 34,822.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>

Name of organization

Employer identification number

LOUISVILLE ASSET BUILDING COALITION



Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization LOUISVILLE ASSET BUILDING COALITION	Employer identification number <div style="background-color: red; width: 100px; height: 20px;"></div>
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Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

OMB No. 1545-0047

2013
Open to Public Inspection

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

Name of the organization **LOUISVILLE ASSET BUILDING COALITION** Employer identification number XXXXXXXXXX

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply):

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____



Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply):

- a Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

b If "Yes," explain the arrangement in Part XIII and complete the following table:

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance.

2a Did the organization include an amount on Form 990, Part X, line 21?

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 1a-1g Balance and expense categories.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %, b Permanent endowment %, c Temporarily restricted endowment %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations, (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)



Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include Financial derivatives, Closely-held equity interests, and Other (A-H).

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows numbered 1 through 9.

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value. Rows numbered 1 through 9.

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 includes Federal income taxes. Rows numbered 1 through 9.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

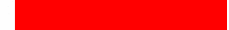
2013

Open to Public
Inspection

Name of the organization

LOUISVILLE ASSET BUILDING COALITION

Employer identification number



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

EXPLANATION: THE 990 TAX RETURN IS PREPARED BY A CPA FIRM. BEFORE THE
RETURN IS FILED, A DRAFT OF THE RETURN IS REVIEWED BY THE BOARD.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: THE POLICY IS REVIEWED ANNUALLY BY THE BOARD.

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

EXPLANATION: GOVERNING DOCUMENTS AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OTHER PROFESSIONAL FEES:

PROGRAM SERVICE EXPENSES	1,823.
MANAGEMENT AND GENERAL EXPENSES	7,603.
FUNDRAISING EXPENSES	2,000.
TOTAL EXPENSES	11,426.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	11,426.

Depreciation and Amortization 990
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return: **LOUISVILLE ASSET BUILDING COALITION**
 Business or activity to which this form relates: **FORM 990 PAGE 10**
 Identifying number: 

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2012 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

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

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2013	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2013 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property		540.	5 YRS.	MQ	200DB	27.
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property	/		27.5 yrs.	MM	S/L	
		/		27.5 yrs.	MM	S/L	
i	Nonresidential real property	/		39 yrs.	MM	S/L	
		/			MM	S/L	

Section C - Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	27.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	



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

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

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

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

Section B - Information on Use of Vehicles

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

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

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

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs (b) Date amortization begins (c) Amortizable amount (d) Code section (e) Amortization period or percentage (f) Amortization for this year 42 Amortization of costs that begins during your 2013 tax year: 43 Amortization of costs that began before your 2013 tax year 44 Total. Add amounts in column (f). See the instructions for where to report

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

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

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

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

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. LOUISVILLE ASSET BUILDING COALITION	Employer identification number (EIN) or
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 118 WEST BRECKINRIDGE STREET, NO. 300	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOUISVILLE, KY 40202	

Enter the Return code for the return that this application is for (file a separate application for each return) 01

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

ANDERSON BRYANT LASKY & WINSLOW, PSC

• The books are in the care of ▶ **943 S FIRST STREET - LOUISVILLE, KY 40203**
Telephone No. ▶ **502-584-9793** Fax No. ▶ _____

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

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2015**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year _____ or
▶ tax year beginning **JUL 1, 2013**, and ending **JUN 30, 2014**.

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

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

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

0822309.09

bschell
ADD

Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
2/22/2012 10:18 AM
Fee Receipt: \$8.00

ARTICLES OF INCORPORATION
OF
LOUISVILLE ASSET BUILDING COALITION, INC.

WE THE UNDERSIGNED, for purposes of forming a non-profit, non-stock corporation, under and pursuant to the laws of the Commonwealth of Kentucky, and more particularly Chapter 273, Kentucky Revised Statutes (KRS), hereby certify as follows:

ARTICLE I

The name of the Corporation shall be Louisville Asset Building Coalition, Inc.

ARTICLE II

The duration of the Corporation shall be perpetual.

ARTICLE III

The address of the registered office of the corporation is:

334 East Broadway
Louisville, KY 40203

The name of the initial registered agent for service of process, located at such address is:

Nedra Young

The principal office of the Corporation is located at:

334 East Broadway
Louisville, KY 40203

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

ARTICLE IV

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

More specifically, the purposes of the Corporation shall be as follows:

1. To assist low income individuals and families to attain economic success and financial stability through programs of information, education and direct service.
2. To develop asset-building opportunities for low income individuals and families, and to educate such individuals and families about existing asset-building opportunities.
3. To educate low and moderate income individuals about state and federal income tax laws, including through assisting them to prepare their income tax returns.
4. To engage in other educational and charitable activities consistent with these purposes.

ARTICLE V

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

ARTICLE VI

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

- A. No substantial part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation

shall not participate in, or intervene in (including the publishing or distribution of statements), any political campaign on behalf of any candidate for public office.

B. Notwithstanding any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on by (1) a corporation exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code, or the corresponding provisions of any subsequent Federal tax laws, or (2) a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws.

C. If and so long as the Corporation is a private foundation as defined in Section 509(a) of the Internal Revenue Code, or corresponding provisions of any later Federal tax laws:

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

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

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

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

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

ARTICLE VII

The names and addresses of the incorporators are:

Peter H. Wayne, IV
500 West Jefferson St., Ste. 2800
Louisville, KY 40205

Francesca Curry
2002 Manning Pl.
La Grange, KY 40031

Rebecca Brady
2000 Meidinger Tower
462 S. 4th St.
Louisville, KY 40202

Scott Owens
2000 Meidinger Tower
462 S. 4th St.
Louisville, KY 40202

Delquan Dorsey
700 Capitol Ave., Ste 138
Frankfort, KY 40601

Artie Robertson
1535 West Broadway
Louisville, KY 40203

Marita Willis
500 W. Jefferson St.
Louisville, KY 40202

ARTICLE VIII

The initial Board of Directors shall consist of seven (7) Directors. The names and addresses of the members of the initial Board of Directors are:

Peter H. Wayne, IV
500 West Jefferson St., Ste. 2800
Louisville, KY 40205

Francesca Curry
2002 Manning Pl.
La Grange, KY 40031

Rebecca Brady
2000 Meidinger Tower
462 S. 4th St.
Louisville, KY 40202

Scott Owens
2000 Meidinger Tower
462 S. 4th St.
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Delquan Dorsey
700 Capitol Ave., Ste 138
Frankfort, KY 40601

Artie Robertson
1535 West Broadway
Louisville, KY 40203

Marita Willis
500 W. Jefferson St.
Louisville, KY 40202

ARTICLE IX

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

Any director may be removed from office by the Board of Directors whenever in the Board's judgment the best interests of the corporation will be served thereby. 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 majority vote of the Directors present in a secret ballot, a quorum being present, shall be required for removal.

ARTICLE X

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).

No director of the Corporation shall be held personally liable to the corporation for monetary damages for breach of his or her duties as a director, except for under 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 XI

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 By-laws or a resolution adopted after notice to members, if any, entitled to vote.

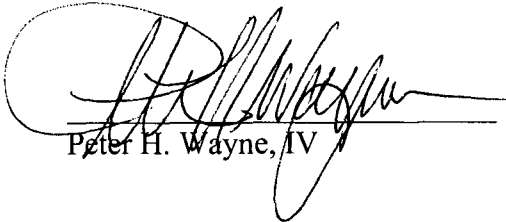
ARTICLE XII

In the event of dissolution of the Corporation, the Board of Directors shall pay or make provision for the payment of all liabilities of the Corporation. The remaining assets, if any, shall be distributed to Metro United Way, Inc. of Louisville, Kentucky, provided that it at that time qualifies as an exempt organization under Section 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws). If Metro United Way, Inc. is not so qualified, then the remaining assets, if any, shall be distributed to one or more organizations organized and operated exclusively for charitable or educational purposes that at the time qualify as an exempt organization under Section 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), or to a state or local government for a public purpose, as the Board of Directors shall determine.

ARTICLE XIII

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

IN TESTIMONY WHEREOF, witness the signature of the Incorporators of this Corporation, this 13 day of January, 2012.



Peter H. Wayne, IV

Francesca Curry

Rebecca Brady

Scott Owens

Delquan Dorsey

Artie Robertson

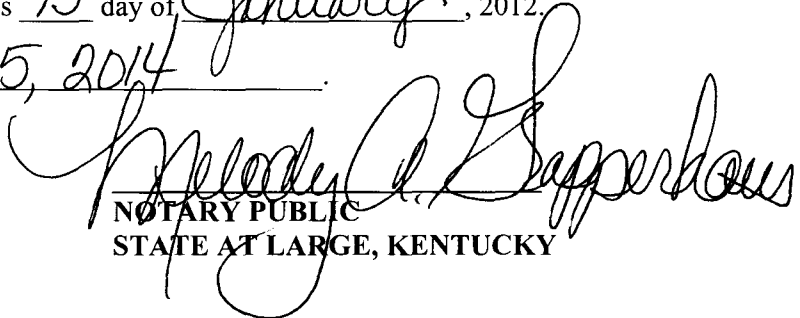
Marita Willis

STATE OF KENTUCKY)
) SS
COUNTY OF JEFFERSON)

Before me, the undersigned authority, personally appeared Peter H. Wayne, IV; Francesca Curry; Rebecca Brady; Scott Owens; Delquan Dorsey; Artie Robertson; and Marita Willis and being duly sworn, acknowledged that they are, respectively, the Incorporators of the aforementioned Corporation, and that each signed the aforementioned Articles of Incorporation as his or her free act and deed.

Witness my signature and seal of office this 13th day of January, 2012.

My Commission Expires: May 25, 2014.


NOTARY PUBLIC
STATE AT LARGE, KENTUCKY

This Document Prepared By:

EILEEN L. ORDOVER
Attorney at Law
LEGAL AID SOCIETY, INC.
416 West Muhammad Ali Blvd.
Louisville, Kentucky 40202
(502) 584-1254

ARTICLE XII

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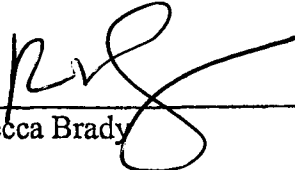
ARTICLE XIII

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

IN TESTIMONY WHEREOF, witness the signature of the Incorporators of this Corporation, this 23 day of January, 2012.

Peter H. Wayne, IV

Francesca Curry



Rebecca Brady

Scott Owens

Delquan Dorsey

Artie Robertson

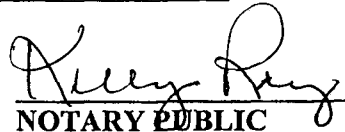
Marita Willis

STATE OF KENTUCKY)
) SS
COUNTY OF JEFFERSON)

Before me, the undersigned authority, personally appeared Peter H. Wayne, IV; Francesca Curry; Rebecca Brady; Scott Owens; Delquan Dorsey; Artie Robertson; and Marita Willis and being duly sworn, acknowledged that they are, respectively, the Incorporators of the aforementioned Corporation, and that each signed the aforementioned Articles of Incorporation as his or her free act and deed.

Witness my signature and seal of office this 23 day of January, 2012.

My Commission Expires: June 29, 2012.



NOTARY PUBLIC
STATE AT LARGE, KENTUCKY

This Document Prepared By:

EILEEN L. ORDOVER
Attorney at Law
LEGAL AID SOCIETY, INC.
416 West Muhammad Ali Blvd.
Louisville, Kentucky 40202
(502) 584-1254

ARTICLE XII

In the event of dissolution of the Corporation, the Board of Directors shall pay or make provision for the payment of all liabilities of the Corporation. The remaining assets, if any, shall be distributed to Metro United Way, Inc. of Louisville, Kentucky, provided that it at that time qualifies as an exempt organization under Section 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws). If Metro United Way, Inc. is not so qualified, then the remaining assets, if any, shall be distributed to one or more organizations organized and operated exclusively for charitable or educational purposes that at the time qualify as an exempt organization under Section 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), or to a state or local government for a public purpose, as the Board of Directors shall determine.

ARTICLE XIII

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

IN TESTIMONY WHEREOF, witness the signature of the Incorporators of this Corporation, this 18th day of January, 2012.

Peter H. Wayne, IV

Francesca Curry

Rebecca Brady

Scott Owens

Delquan Dorsey

Artie Robertson

Marita Willis
Marita Willis

STATE OF KENTUCKY)
) SS
COUNTY OF JEFFERSON)

Before me, the undersigned authority, personally appeared Peter H. Wayne, IV; Francesca Curry; Rebecca Brady; Scott Owens; Delquan Dorsey; Artie Robertson; and Marita Willis and being duly sworn, acknowledged that they are, respectively, the Incorporators of the aforementioned Corporation, and that each signed the aforementioned Articles of Incorporation as his or her free act and deed.

Witness my signature and seal of office this 18th day of January, 2012.

My Commission Expires: May 25, 2014.

Melody A. Epperhaus

NOTARY PUBLIC
STATE AT LARGE, KENTUCKY

This Document Prepared By:

EILEEN L. ORDOVER
Attorney at Law
LEGAL AID SOCIETY, INC.
416 West Muhammad Ali Blvd.
Louisville, Kentucky 40202
(502) 584-1254

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Peter H. Wayne, IV



Francesca Curry

Rebecca Brady

Scott Owens

Delquan Dorsey

Artie Robertson

Marita Willis

STATE OF KENTUCKY)
) SS
COUNTY OF JEFFERSON)

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Witness my signature and seal of office this 13th day of January, 2012.

My Commission Expires: May 25, 2014.

Melody A. Gapper Deuss

NOTARY PUBLIC
STATE AT LARGE, KENTUCKY

This Document Prepared By:

EILEEN L. ORDOVER
Attorney at Law
LEGAL AID SOCIETY, INC.
416 West Muhammad Ali Blvd.
Louisville, Kentucky 40202
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IN TESTIMONY WHEREOF, witness the signature of the Incorporators of this Corporation, this 18 day of January, 2012.

Peter H. Wayne, IV

Francesca Curry

Rebecca Brady



Scott Owens

Delquan Dorsey

Artie Robertson

Marita Willis

STATE OF KENTUCKY)
) SS
COUNTY OF JEFFERSON)

Before me, the undersigned authority, personally appeared Peter H. Wayne, IV; Francesca Curry; Rebecca Brady; Scott Owens; Delquan Dorsey; Artie Robertson; and Marita Willis and being duly sworn, acknowledged that they are, respectively, the Incorporators of the aforementioned Corporation, and that each signed the aforementioned Articles of Incorporation as his or her free act and deed.

Witness my signature and seal of office this 18th day of January, 2012.

My Commission Expires: May 25, 2014

Melody A. Sapperhaus
NOTARY PUBLIC
STATE AT LARGE, KENTUCKY

This Document Prepared By:

EILEEN L. ORDOVER
Attorney at Law
LEGAL AID SOCIETY, INC.
416 West Muhammad Ali Blvd.
Louisville, Kentucky 40202
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ARTICLE XII

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ARTICLE XIII

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

IN TESTIMONY WHEREOF, witness the signature of the Incorporators of this Corporation, this 18 day of January, 2012.

Peter H. Wayne, IV

Francesca Curry

Rebecca Brady

Scott Owens

Delquan Dorsey



Artie Robertson

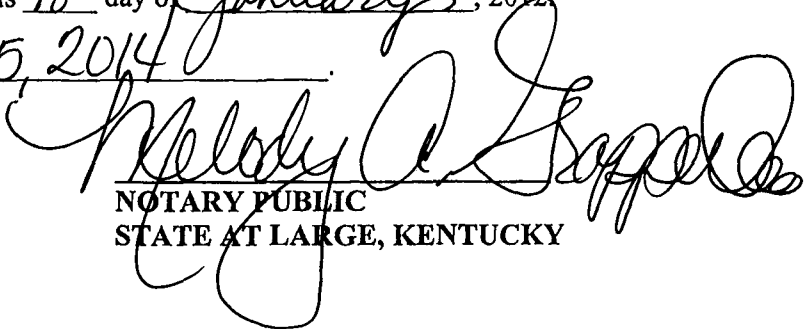
Marita Willis

STATE OF KENTUCKY)
) SS
COUNTY OF JEFFERSON)

Before me, the undersigned authority, personally appeared Peter H. Wayne, IV; Francesca Curry; Rebecca Brady; Scott Owens; Delquan Dorsey; Artie Robertson; and Marita Willis and being duly sworn, acknowledged that they are, respectively, the Incorporators of the aforementioned Corporation, and that each signed the aforementioned Articles of Incorporation as his or her free act and deed.

Witness my signature and seal of office this 18th day of January, 2012

My Commission Expires: May 25, 2014



Melody A. Sapp

NOTARY PUBLIC
STATE AT LARGE, KENTUCKY

This Document Prepared By:

EILEEN L. ORDOVER
Attorney at Law
LEGAL AID SOCIETY, INC.
416 West Muhammad Ali Blvd.
Louisville, Kentucky 40202
(502) 584-1254

ARTICLE XII

In the event of dissolution of the Corporation, the Board of Directors shall pay or make provision for the payment of all liabilities of the Corporation. The remaining assets, if any, shall be distributed to Metro United Way, Inc. of Louisville, Kentucky, provided that it at that time qualifies as an exempt organization under Section 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws). If Metro United Way, Inc. is not so qualified, then the remaining assets, if any, shall be distributed to one or more organizations organized and operated exclusively for charitable or educational purposes that at the time qualify as an exempt organization under Section 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), or to a state or local government for a public purpose, as the Board of Directors shall determine.

ARTICLE XIII

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


IN TESTIMONY WHEREOF, witness the signature of the Incorporators of this Corporation, this 20th day of January, 2012.

Peter H. Wayne, IV

Francesca Curry

Rebecca Brady

Scott Owens



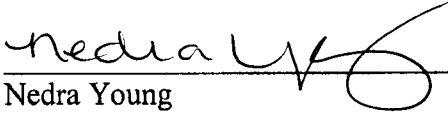
Delquan Dorsey

Artie Robertson

Marita Willis

CONSENT OF INITIAL REGISTERED AGENT

Pursuant to the provisions of KRS Chapter 273, the undersigned as the initial registered agent identified in Article III of the Articles of Incorporation of Louisville Asset Building Coalition, Inc. (the "Corporation"), hereby consents to serve the Corporation in that capacity until such time as such appointment is terminated or until the undersigned resigns in accordance with the Kentucky Revised Statutes.


Nedra Young

Louisville Asset Building Coalition
Three Highest Paid Staff
2015/16

2015/16 Salary

Ron Hatch, Executive Director	45,000
Joan Chandler, VITA Coordinator	35,000
Debbie Prince, Volunteer Coordinator	25,000

LOUISVILLE ASSET BUILDING COALITION, INC.

General Information

Organization Number	0822309
Name	LOUISVILLE ASSET BUILDING COALITION, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	2/22/2012
Organization Date	2/22/2012
Last Annual Report	5/4/2015
Principal Office	118 WEST BRECKINRIDGE STREET LOUISVILLE, KY 40202
Registered Agent	RON HATCH 118 WEST BRECKINRIDGE STREET SUITE 300 LOUISVILLE, KY 40203

Current Officers

Chairman	Eric Seto
Vice Chairman	Peter Wayne
Secretary	Lisa Locke
Treasurer	Scott Owens
Director	Peter Wayne
Director	Eric Seto
Director	Scott Owens
Director	Artie Robertson
Director	Delquan Dorsey
Director	Lisa Locke
Director	Dwight Haygood Jr.
Director	Jim Blandford
Director	Mark Farmer
Director	Micheal Raisor

Individuals / Entities listed at time of formation

Director	PETER H WAYNE IV
Director	REBECCA BRADY
Director	DELOUAN DORSEY
Director	MARITA WILLIS
Director	FRANCESCA CURRY
Director	SCOTT OWENS
Director	ARTIE ROBERTSON

Incorporator	<u>PETER H WAYNE IV</u>
Incorporator	<u>REBECCA BRADY</u>
Incorporator	<u>DELQUAN DORSEY</u>
Incorporator	<u>MARITA WILLIS</u>
Incorporator	<u>FRANCESCA CURRY</u>
Incorporator	<u>SCOTT OWENS</u>
Incorporator	<u>ARTIE ROBERTSON</u>

Images available online

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

<u>Registered Agent name/address change</u>	5/4/2015 10:01:10 AM	1 page	<u>PDF</u>	
<u>Annual Report</u>	5/4/2015	1 page	<u>PDF</u>	
<u>Principal Office Address Change</u>	6/24/2014 10:01:25 AM	1 page	<u>PDF</u>	
<u>Annual Report</u>	6/24/2014	1 page	<u>PDF</u>	
<u>Registered Agent name/address change</u>	8/9/2013 5:09:00 PM	1 page	<u>PDF</u>	
<u>Annual Report</u>	8/7/2013	1 page	<u>PDF</u>	
<u>Articles of Incorporation</u>	2/22/2012	20 pages	<u>tiff</u>	<u>PDF</u>

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	5/4/2015 10:11:34 AM	5/4/2015 10:11:34 AM	
Registered agent address change	5/4/2015 10:01:10 AM	5/4/2015 10:01:10 AM	
Annual report	6/24/2014 10:09:40 AM	6/24/2014 10:09:40 AM	
Principal office change	6/24/2014 10:01:25 AM	6/24/2014 10:01:25 AM	
Registered agent address change	8/9/2013 5:09:00 PM	8/9/2013 5:09:00 PM	
Annual report	8/7/2013 2:22:45 PM	8/7/2013 2:22:45 PM	
Add	2/22/2012 10:18:29 AM	2/22/2012	

Microfilmed Images

Bowman, Michael

From: Fowler, Cindi
Sent: Tuesday, December 08, 2015 1:51 PM
To: Bowman, Michael
Subject: VITA NDF

Michael,
Please sign the VITA NDF on my behalf.

Thanks,
Cindi