

NDF NON-PROFIT APPLICATION CHECKLIST

Legal Name of Applicant Organization: <u>Thierman Condominium Council</u>		
Program Name: <u>Tree Planting</u>	Request Amount: <u>\$14600</u>	Yes/No/NA
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?		Yes
Request form: Is the funding proposed less than or equal to the request amount?		yes
Request form: Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?		Yes
Application Page 1: Has prior Metro funds committed/granted been disclosed?		N/A
Application Page 1: Is the application properly signed and dated by authorized signatory?		yes
Application Page 3: Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?		NO
Application Pages 3 – 5: Is the proposed public purpose of the program well-documented?		yes
Application 4: Is there adequate documentation of how the proceeds of the fundraiser will be spent?		yes
Application Budget Page 6: Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for "Metro, Non Metro and Total" expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?		yes
Faith Based Organizations: Is the signed Faith Based Form signed and included?		N/A
Jefferson County Only: Will all funding be spent in Louisville/Jefferson County?		yes
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?		yes
Good Standing: Is the entity in good standing with: <ul style="list-style-type: none"> • Kentucky Secretary of State – include Secretary of State website information on organization • Louisville Metro Government – check OMB monthly report filed in Council Financial Reports • Internal Revenue Service – most recent Form 990 included 		yes
Separate Taxing Districts: If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?		N/A
Small Cities: Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)		N/A
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?		N/A
IRS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?		yes
Operating Budget: Is the organization's current fiscal year operating budget included?		yes
Ordinance Required: Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.		NO
Board Members: Is the entity's board member list (with term length/term limits) included?		yes
Staff: Is a list of the highest paid staff included with their expected annual personnel costs?		yes
Annual Audit: Is the most recent annual audit (if required by organization) included?		N/A
Rent Requests: Is a copy of signed lease included?		N/A
Articles of Incorporation: Are the Articles of Incorporation of the organization included?		yes
IRS Form W-9: Is the IRS Form W-9 included?		yes
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?		N/A
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?		N/A
Prepared by: <u>Luonackg</u>		Date: <u>9/30/2015</u>



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION

Legal Name of Applicant Organization: Thierman Condominium Council of Co-Owners Inc.

(as listed on: <http://www.sos.ky.gov/business/records>)

Main Office Street & Mailing Address: 416-420 W. Breckinridge St. Louisville, KY, 40203

Website: N/A

Applicant Contact:	Lisa Casey	Title:	VP Thierman Condo Owners Assoc.
Phone:	502-634-3410	Email:	lisarefinisher@aol.com
Financial Contact:	Angie Siegle	Title:	Treasurer Condo Owner Assoc.
Phone:	502-500-5346	Email:	theirmantreasurer@gmail.com

Organization’s Representative who attended NDF Training: Lisa Casey & Isaac Gavi : website training

GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED

Program Facility Location(s):	416-420 W. Breckinridge St. Louisville, KY, 40203 /Tree Row		
Council District(s):	District 4	Zip Code(s):	40203

SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION

PROGRAM/PROJECT NAME: Thierman Street Scape Green Beautification Project

Total Request: (\$)	4,600	Total Metro Award (this program) in previous year: (\$)	0
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Purpose of Request (check all that apply):

- Operating Funds (generally cannot exceed 33% of agency’s total operating budget)
- Programming/services/events for direct benefit to community or qualified individuals
- Capital Project of the organization (equipment, furnishing, building, etc)

The Following are Required Attachments:

<input type="checkbox"/> IRS Exempt Status Determination Letter see attachm	<input type="checkbox"/> Signed lease if rent costs are being requested n/a
<input checked="" type="checkbox"/> Current Year Projected Budget	<input checked="" type="checkbox"/> IRS Form W9
<input checked="" type="checkbox"/> List of Board of Directors (include term & term limits)	<input type="checkbox"/> Evaluation forms if used in the proposed program n/a
<input checked="" type="checkbox"/> Current financial statement	<input type="checkbox"/> Annual audit (if required by organization) n/a
<input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H	<input type="checkbox"/> Faith Based Organization Certification Form, if required n/a
<input checked="" type="checkbox"/> Articles of Incorporation	<input type="checkbox"/> Staff including the 3 highest paid staff n/a
<input checked="" type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense	

For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.

Source:	n/a	Amount: (\$)	
Source:		Amount: (\$)	
Source:		Amount: (\$)	

Has the applicant contacted the BBB Charity Review for participation? Yes No

Has the applicant met the BBB Charity Review Standards? Yes No

Applicant’s Initials



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

- Promote Civic Pride
- Encourage well kept condos, grounds, courtyard gardens and street scape
- Sponsor Community Civic Improvements
- Guard and promote the general welfare of the Condominium Community
- Advice, assist and handle all matters for maintenance, insurance, repair, improvements in all area walks, storm drains, entrances and any and all areas adjacent to the Thierman
- Repair and Restore the Thierman which is listed on the National Registry of Historic Places, according to the standards set by the Heritage Council and Preservation Louisville



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.):

Thierman Street Scape Green Beautification Project

Start Date: 8/20/2015 - Meet and work with Metro Arborist, Russell Stevens, for guidance on what type of trees to plant, and advice on best practice for planting and removing trees. Also to get Russell to start tree project permit

9/1/2015- Gather information necessary for LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

9/28/2015 -Submit completed application to metro council for review

10/16/2015-10/31/2015- Once funds are approved, begin old tree removal, and prepare 5 beds for 5 new trees. Purchase and plant trees.

Specific client population : 24 Thierman condominium owners, Limerick neighbors, Presentation and Spalding students and employees will enjoy the new streets scape and shade provided by the trees. Also the historic former Lampton Baptist Church across from the Thierman at 4th and Breckinridge street is currently being renovated by its the new owners, Immanuel Baptist Church members, and outside donations bringing it back to it's former glory. This will vastly improve the general area and pedestrian traffic.

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

1. Remove 3 old Crab Apple trees that damaging cars with sap, fallen branches and leaving debris on side walks.
2. Dig up 2 empty tree spaces where 2 previous trees have died, grind stumps if necessary.
3. Prepare 5 tree spaces for new trees planting- grind out stumps and roots, replace old soil with new soil and fertilizer.
4. Buy and Plants 5 new Red Bud trees that will match our neighbor trees at Presentation Academy W.Breckinridge St. tree row.
4. Install green water gator feeders around new trees
5. Install metal/wrought iron fencing (suggested by Arborist) to protect trees similar to/or that compliments current historic wrought iron fencing that lines the Thierman/Breckinridge entrance.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

N/A

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: N/A

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:
Beautification of Breckinridge Street Scape and in line with Metro Louisville tree planting project...Making Louisville green. We had put in a request to Metro 311 and Councilman Tandy to have trees planted 3 years ago and was told there was no funding. Metro Arborist says wait list is very long, may take years for the city to get to us so he suggested we do the work ourselves, if possible.

Arborist Russell Stevens will be advising us and pulling the permit necessary.

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.

We have worked with Preservation Louisville, Marianne Zickuhr, and KY Heritage Council, Mike Radeke, Restoration Project Manager. They have been instrumental in helping the Thierman Condo Assoc. improve the Thierman according to historic standards. We are the 1st Condo Assoc, in KY to receive the Historic Preservation Credit in May 2015, which has immensely improved the building look and safety.

We are good neighbors to the Christian Care Community that owns an adjacent facility and currently in negotiations to buy the parking lot next the Thierman, that they own. If that goes through, we plan on resurfacing the lot and putting up wrought Iron/Metal fencing that will greatly improve the look of the lot.

Mike Miller, long time resident of the Thierman is the Vice President of the Limerick Assoc. and a strong advocate of making our neighborhood safer, cleaner, and a better place to live.

Lisa and Bill Casey Thierman owners and long time Old Louisville residents previous Toonerville presidents and members of Tonnerville and SSNA, Brightside cleanups etc.



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			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (Attach Detailed List)			
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (Attach Detail List)			
J: Small Equipment			
K: Capital Equipment	\$4600	0	\$4600
L: Other Expenses (Attach Detail List)			
*TOTAL PROGRAM/PROJECT FUNDS	\$4600	0	\$4600
% of Program Budget	100 %	0 %	100%

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

Other State, Federal or Local Government	N/A
United Way	N/A
Private Contributions (do not include individual donor names)	N/A
Fees Collected from Program Participants	N/A
Other (please specify)	N/A
Total Revenue for Columns 2 Expenses **	

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

**Must equal or exceed total in column 2.

Applicant's Initials 



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).

Table with 3 columns: Donor*/Type of Contribution, Value of Contribution, Method of Valuation. Rows include Board Member Isaac Gavi (40 hours), Board Member Lisa Casey (40 hours), Arborist Russell Stevens (10 hours), and a total row for 90 hours.

* DONOR INFORMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION. VOLUNTEERS NEED NOT BE LISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NOTING HOW MANY HOURS PER PERSON PER WEEK

Agency Fiscal Year Start Date: January 1, 2015

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 [checked] YES []

If YES, please explain:

Applicant's Initials [Handwritten Signature]



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

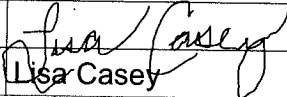
1. The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
2. The Agency has a written Affirmative Action/Equal Opportunity Policy.
3. The Agency does not discriminate in employment or in provision of any service/program/activity/event 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.

N/A No one is related

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:		Date:	9/28/2015
Legal Signatory: (please print):	Lisa Casey	Title:	VP Thierman Condo
Phone:	502-634-3410	Extension:	N/A
Email:	lisarefinisher@aol.com		

Applicant's Initials 

Attachment 6 Articles of Incorporation Pg 1 of 5

Multi-page document. Select page: 1 2 3 4 5

ARTICLES OF INCORPORATION
 OF
THIERMAN CONDOMINIUM COUNCIL OF CO-OWNERS, INC.
 (A Non-Profit Corporation)

262378
 RECEIVED AND FILED
 DATE AUG 24 1989
 TIME 10:45am
 AMOUNT \$8.00
 BREMER EHRLER
 SECRETARY OF STATE
 COMMONWEALTH OF KENTUCKY

KNOW ALL MEN BY THESE PRESENTS:

That I, the undersigned, have this day voluntarily associated the following together for the purpose of forming non-profit corporation under the provisions of Chapter 273 of the Kentucky Revised Statutes, and to that end do hereby adopt Articles of Incorporation as follows:

ARTICLE I

The name of the corporation is Thierman Condominium Council of Co-Owners, Inc., and by such name it shall be known as a body corporate and its duration shall be perpetual.

571821

ARTICLE II

The general nature of the objects and purposes of this corporation shall be:

- A. Promote civic pride.
- B. Encourage well kept apartments.
- C. Sponsor community civic improvements.
- D. Guard and promote the general welfare of the Condominium Community.
- E. Advise, assist, and handle all matters in the collection of assessments for maintenance, insurance, repair, improvement of any and all common area walks, storm drains, basins, entrances, and any and all areas which are a part of the Thierman complex or adjacent thereto.
- F. Advise, assist and handle all matters pertaining to the banking, spending, contract letting, financing, and any and all

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Multi-page document. Select page: 1 2 3 4 5

general matters as stated in "E" aforesaid.

G. Advise, assist and make any and all rules and regulations pertaining to all of the above stated purposes.

H. Advise, assist and make any and all rules and regulations pertaining in all of the above stated purposes.

I. Any and all other duties as set forth in the Master Deed and Declaration of Horizontal Property Regime for Thierman Condominiums as recorded in Deed Book 5611, Page 881, in the office of the Jefferson County Clerk, Jefferson County, Kentucky.

J. And to do any and all other functions as stated in Chapter 273 of the Kentucky Revised Statutes necessary for the carrying out of the above stated objects and purposes.

ARTICLE III

The address of the registered office of the Corporation in the State of Kentucky is 416-420 West Breckinridge, Louisville, Kentucky 40203. The name and address of the resident agent of the Corporation is THOMAS HUNTER 416-420 West Breckinridge, Unit C-4, Louisville, Kentucky 40203.

ARTICLE IV

The executive authority of this Corporation shall be vested in a Board of Directors, which initially shall be composed of the following:

NAME	ADDRESS
Dargan E. Montgomery	416-420 West Breckinridge, Louisville, Kentucky
Normand D. Nezelkewicz	416-420 West Breckinridge, Louisville, Kentucky
Thomas G. Pfersching	416-420 West Breckinridge, Louisville, Kentucky
Gerald L. Tschiegg	416-420 West Breckinridge, Louisville, Kentucky
Mary Miller	416-420 West Breckinridge, Louisville, Kentucky

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Attachment Pg 3 of 5

Multi-page document. Select page: 1 2 3 4 5

ARTICLE V

The number of Directors to be elected at the first meeting of the Corporation is no more than nine (9). This Corporation shall not have less than (5) Directors during its existence. A change in the number of Directors may be made by an amendment to the by-laws. The Board of Directors shall have the right to fill all vacancies on the Board, even though the Director may not have assumed the active performance of his duties.

ARTICLE VI

Under the name of the Corporation it may adopt a corporate seal, and it has the power to contract and be contracted with, to sue and be sued, and it may receive, accept, purchase or acquire and hold in any other lawful manner real and personal property, and it may dispose of same by gift, deed, or in any other lawful manner, for the benefit of the corporation, its members, or associates, or any other cause or causes of a religious, educational, or charitable nature.

ARTICLE VII

The Corporation is not organized for pecuniary profit nor shall it have any power to issue certificates of stock or declare dividends, and no part of its net earnings shall inure to the benefit of any member of Director. The balance, if any, of all money received by the Corporation from its operations after the payment in full of all debts, reserves and obligations of the Corporation, of whatsoever kind and nature, shall be used and distributed exclusively for charitable, scientific and educational purposes.

ARTICLE VIII

The Corporation formed hereby shall have no capital stock, and

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AH Attachment 6 Pg 4 of 5

Multi-page document. Select page: 1 2 3 4 5

shall be composed of members rather than shareholders.

ARTICLE IX

The name of the person who is to be a subscriber/incorporator to the articles and, who is to be a member of the Corporation upon organization is as follows:

NAME	ADDRESS
LOUIS M. SMITH JR.	816 Meidinger Tower, Louisville, Kentucky

ARTICLE X

The By-Laws may be adopted or amended in any respect not inconsistent with the provisions of law or the Declaration by vote of fifty-one (51%) percent of the apartment owners (as defined in the Declaration) members of the Corporation at any meeting of the Corporation duly called for such purpose.

ARTICLE XI

The owner of any apartment in the THIERMAN CONDOMINIUM complex upon acquiring title, shall automatically become a member of the Corporation and shall remain a member until such time as his/her ownership of such unit(s) ceases for any reason, at which time his/her membership in the Corporation shall automatically cease.

ARTICLE XII

Members of the Corporation shall not be personally liable for any debt or obligation solely by reason of being members.

ARTICLE XIII

The Articles of Incorporation of this Corporation may be changed by written consent of or by vote of fifty-one percent (51%) of the Condominium owners (as defined in the Declaration) members of the Corporation voting, at a meeting duly called upon notice for the

Multi-page document. Select page: 1 2 3 4 5

Form **W-9**
 (Rev. August 2013)
 Department of the Treasury
 Internal Revenue Service

**Request for Taxpayer
 Identification Number and Certification**

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

Name (as shown on your income tax return)
Thierman Condominiums Council of Co-Owners Inc

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:
 Individual/sole proprietor C Corporation S Corporation Partnership Trust/estate
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
 Other (see instructions) ▶ _____

Exemptions (see instructions):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____

Address (number, street, and apt. or suite no.)
3944 Bardstown Rd

City, state, and ZIP code
Louisville KY 40218

List account number(s) here (optional)

Requester's name and address (optional)

Print or type
 See Specific Instructions on page 2.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

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Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number

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Part II Certification

Under penalties of perjury, I certify that:

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

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶ *[Signature]* Date ▶ **9-27-15**

General Instructions

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

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

Purpose of Form

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

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

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

withholding tax on foreign partners' share of effectively connected income, and

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

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

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

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

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

Form **1120-H**

U.S. Income Tax Return for Homeowners Associations

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service

Information about Form 1120-H and its separate instructions is at www.irs.gov/form1120h.

2014

For calendar year 2014 or tax year beginning , 2014, and ending

TYPE OR PRINT	Name THIERMAN CONDOMINIUMS COUNCIL OF CO-OWNERS, INC.	Employer identification number [REDACTED]
	Number, street, and room or suite no. If a P.O. box, see instructions. 3944 BARDSTOWN ROAD	Date association formed
	City or town, state or province, country, and ZIP or foreign postal code LOUISVILLE KY 40218-2610	

Check if: (1) Final return (2) Name change (3) Address change (4) Amended return

A Check type of homeowner's association: Condominium management association Residential real estate association Timeshare association

B Total exempt function income. Must meet 60% gross income test (see instructions)	B	81,355.
C Total expenditures made for purposes described in 90% expenditure test (see instructions)	C	70,023.
D Association's total expenditures for the tax year (see instructions)	D	71,017.
E Tax-exempt interest received or accrued during the tax year	E	

Gross Income (excluding exempt function income)

1 Dividends	1	
2 Taxable interest	2	222.
3 Gross rents	3	
4 Gross royalties	4	
5 Capital gain net income (attach Schedule D (Form 1120))	5	
6 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)	6	
7 Other income (excluding exempt function income) (attach statement)	7	
8 Gross income (excluding exempt function income) . Add lines 1 through 7	8	222.

Deductions (directly connected to the production of gross income, excluding exempt function income)

9 Salaries and wages	9	
10 Repairs and maintenance	10	
11 Rents	11	
12 Taxes and licenses	12	
13 Interest	13	
14 Depreciation (attach Form 4562)	14	
15 Other deductions (attach statement) See Other Deductions Statement	15	994.
16 Total deductions . Add lines 9 through 15	16	994.
17 Taxable income before specific deduction of \$100. Subtract line 16 from line 8	17	-772.
18 Specific deduction of \$100	18	\$100.

Tax and Payments

19 Taxable income . Subtract line 18 from line 17	19	-872.
20 Enter 30% of line 19. (Timeshare associations, enter 32% of line 19)	20	0.
21 Tax credits (see instructions)	21	
22 Total tax . Subtract line 21 from line 20. See instructions for recapture of certain credits	22	0.
23 a 2013 overpayment credited to 2014. 23 a		
b 2014 estimated tax payments 23 b		
c Total ▶ 23 c		
d Tax deposited with Form 7004 23 d		
e Credit for tax paid on undistributed capital gains (attach Form 2439) 23 e		
f Credit for federal tax paid on fuels (attach Form 4136) 23 f		
g Add lines 23c through 23f. 23 g		
24 Amount owed . Subtract line 23g from line 22 (see instructions)	24	
25 Overpayment . Subtract line 22 from line 23g	25	0.
26 Enter amount of line 25 you want: Credited to 2015 estimated tax ▶ Refunded ▶ 26		

Sign Here

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 taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer _____ Date _____ Title _____

May the IRS discuss this return with the preparer shown below (see instrs)? Yes No

Paid Preparer Use Only

Print/Type preparer's name DAVID W. JOHNSON	Preparer's signature <i>[Signature]</i>	Date 2/10/15	Check <input checked="" type="checkbox"/> if self-employed	PTIN
Firm's name Firm's address	DAVID W. JOHNSON, RTRP 8906 LACOSTA ROAD LOUISVILLE, KY 40290-1491		Firm's EIN	Phone no.

THIERMAN CONDOMINIUMS COUNCIL OF CO-OWNERS, INC. [REDACTED]

Form 1120H, Page 1, Line 15

Other Deductions Statement

<u>LEGAL AND PROFESSIONAL</u>	<u>742.</u>
<u>POSTAGE AND DUPLICATION</u>	<u>237.</u>
<u>STATE ANNUAL REPORT</u>	<u>15.</u>
Total	<u><u>994.</u></u>

THIERMAN CONDOMINIUM COUNCIL OF CO-OWNERS, INC.

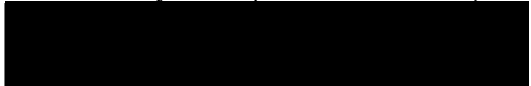
Attachment 3 Board of Officer's Pg 1 of 1

General Information

Organization Number 0262398
Name THIERMAN CONDOMINIUM COUNCIL OF CO-OWNERS, INC.
Profit or Non-Profit N - Non-profit
Company Type KCO - Kentucky Corporation
Status A - Active
Standing G - Good
State KY
File Date 8/24/1989
Organization Date 8/24/1989
Last Annual Report 5/21/2015
Principal Office 3944 BARDSTOWN ROAD
 LOUISVILLE, KY 40218
Registered Agent KENTUCKY REALTY
 3944 BARDSTOWN ROAD
 LOUISVILLE, KY 40218

W9

Taxpayer #



Current Officers

term
1 Year
no
term
limits)

President Isaac Gavi
Vice President Lisa Casey
Secretary William Schrader
Treasurer Angie Seigle
Director Isaac Gavi
Director Lisa Casey
Director William Schrader
Director Angie Seigle

Thierman Board

List of Thierman Board Member.

Individuals / Entities listed at time of formation

Director DARGAN E MONTGOMERY
Director NORMAND D NEZELKEWICZ
Director THOMAS G PFERSCHING
Director GERALD L TSCHIEGG
Director MARY MILLER
Incorporator LOUIS M SMITH JR

Images available online

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

<u>Annual Report</u>	5/21/2015	1 page	<u>PDF</u>
<u>Annual Report</u>	3/13/2014	1 page	<u>PDF</u>
<u>Registered Agent name/address change</u>	5/16/2013 11:26:35 AM	1 page	<u>PDF</u>

Attachment 7

Cost Estimate from Proposed vendor
for Capital Expense

Pg 1 of 1

No Job Too Tall,
No Job Too Small



**CREATIVE
CLEANING SOLUTIONS**
We Make Dirty Look Good!

Veteran Owned
and Operated

502-727-2537

Bobby Langley

creativcleaningsolutionlouky.com • creativcleaningsolutionlouky@yahoo.com

Name: Lisa Casey
Address: Thierman Blvd.
City: Louisville 1 State: Ky Zip: 40203
Contact: Bobby Langley / Lisa Casey
Home Phone: 634-3400 Cell Phone: _____

Date: 9-21-15

Frequency:

Daily Weekly Bi-Weekly

Other: _____

Offices _____

Bathrooms _____

Kitchens _____

Breakrooms _____

Storage Areas _____

Garage/Basements _____

Hallways _____

Common Areas _____

Foyers _____

Bedrooms _____

Floors:

Carpet Tile Other _____

Comments:

Scope of Work:

Remove 3 existing flowering Crab
Apple Trees

Remove dirt + Prep for new
Trees in 5 spaces ~ 3 FT DEEP

Supply Plant + Condition soil
for 5 Red bud trees

Provide 5 watering bass

Provide + install off the
shelf Fencing for above trees

UP TO 500.00 for cost of Goods

Provide all labor + mt.

WE PROPOSE hereby to furnish material and labor - complete in accordance with above specifications, for the sum of:

UPON COMPLETION

dollars (\$ 4600-)

Payments to be made as follows:

All material is guaranteed to be as specified. All work to be completed in a substantial workmanlike manner according to specifications submitted, per standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon weather, accidents or delays beyond our control. Our workers are fully covered by Workman's Compensation Insurance.

Authorized
Signature

Note: This proposal may be
withdrawn by us if not accepted within _____ days.

Attachment 4 - Current Financial Statement

Thierman Condominium Council of Co-Owners, Inc

Pg 1 of 1

KR Budget Comparison Standard with Code

Transaction 8/1/2015 to 8/31/2015 11:59:00 PM

	Current Month Operating			Year to Date Operating			Annual
	Actual	Budget	\$ Var	Actual	Budget	\$ Var	
Income							
31000 Condominium Fees	6,660.03	6,660.06	(0.03)	53,280.24	53,280.48	(0.24)	79,920.72
TOTAL	6,660.03	6,660.06	(0.03)	53,280.24	53,280.48	(0.24)	79,920.72
Other Revenue							
36500 Late Charges	50.00	0.00	50.00	750.00	0.00	750.00	0.00
37000 Interest Income	20.92	0.00	20.92	149.66	0.00	149.66	0.00
39400 Historical Credit	0.00	0.00	0.00	35,074.26	0.00	35,074.26	0.00
TOTAL Other Revenue	70.92	0.00	70.92	35,973.92	0.00	35,973.92	0.00
TOTAL Income	6,730.95	6,660.06	70.89	89,254.16	53,280.48	35,973.68	79,920.72
Expense							
P-Utilities							
45500 Gas & Electric Expense	358.03	575.00	(216.97)	4,398.71	4,600.00	(201.29)	6,900.00
47000 Water & Sewer	0.00	916.67	(916.67)	7,924.66	7,333.36	591.30	11,000.00
TOTAL P-Utilities	358.03	1,491.67	(1,133.64)	12,323.37	11,933.36	390.01	17,900.00
Repairs and Maintenance							
48000 Set out Garb & Recycle	140.00	140.00	0.00	1,120.00	1,120.00	0.00	1,680.00
51000 Simplex Grinnel / Fire Ext	0.00	41.67	(41.67)	516.86	333.36	183.50	500.00
54800 Lighting Expense	0.00	41.67	(41.67)	215.13	333.36	(118.23)	500.00
55000 Common Area Cleaning	455.00	383.33	71.67	1,500.00	3,066.64	(1,566.64)	4,600.00
56000 Misc	0.00	8.33	(8.33)	0.00	66.64	(66.64)	100.00
57100 Snow Removal	0.00	58.33	(58.33)	500.00	466.64	33.36	700.00
58000 Mowing	315.00	125.00	190.00	676.50	1,000.00	(323.50)	1,500.00
58100 Landscaping	120.00	291.67	(171.67)	1,930.76	2,333.36	(402.60)	3,500.00
58300 Repair & Maint Exp	375.00	83.33	291.67	816.56	666.64	149.92	1,000.00
58400 Plumbing Repair	0.00	416.67	(416.67)	2,579.85	3,333.36	(753.51)	5,000.00
58600 Electrical	0.00	83.33	(83.33)	209.00	666.64	(457.64)	1,000.00
60100 Plaster & Drywall Repairs	0.00	500.00	(500.00)	560.00	4,000.00	(3,440.00)	6,000.00
60300 Masonary Work	0.00	333.33	(333.33)	2,200.00	2,666.64	(466.64)	4,000.00
61200 Non-Budgeted Items	0.00	443.06	(443.06)	10,250.47	3,544.48	6,705.99	5,318.72
TOTAL Repairs and Maintenance	1,405.00	2,949.72	(1,544.72)	23,075.13	23,597.76	(522.63)	35,396.72
S-Administrative							
62000 Bad Debt	0.00	83.33	(83.33)	0.20	666.64	(666.44)	1,000.00
63500 Insurance -Business	0.00	833.33	(833.33)	7,500.00	6,666.64	833.36	10,000.00
65500 Management Fees	336.00	336.00	0.00	2,688.00	2,688.00	0.00	4,032.00
66000 Miscellaneous Expense	0.00	0.00	0.00	1,493.07	0.00	1,493.07	0.00
66500 Postage/Dplication Expense	13.58	25.00	(11.42)	178.26	200.00	(21.74)	300.00
67000 Legal/Professional	545.00	250.00	295.00	487.10	2,000.00	(1,512.90)	3,000.00
68500 Taxes	0.00	25.00	(25.00)	290.00	200.00	90.00	300.00
70000 Reserve	667.00	666.00	1.00	5,336.00	5,328.00	8.00	7,992.00
70100 Reserve off-set	(667.00)	0.00	(667.00)	(5,336.00)	0.00	(5,336.00)	0.00
TOTAL S-Administrative	894.58	2,218.66	(1,324.08)	12,636.63	17,749.28	(5,112.65)	26,624.00
TOTAL Expense	2,657.61	6,660.05	(4,002.44)	48,035.13	53,280.40	(5,245.27)	79,920.72
Excess Revenue / Expense	4,073.34	0.01	4,073.33	41,219.03	0.08	41,218.95	0.00



Louisville Metro Government
Office of Management and Budget

Neighborhood Development Fund Training Attestation

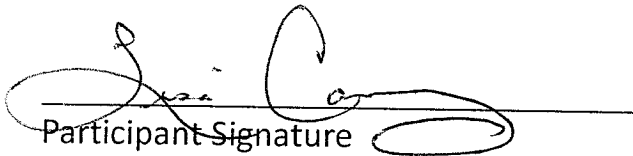
Organization Name: Arvernia Condominium Council of Co Owners Inc

Participant Name: LISA CASEY

I agree that I am an authorized representative and/or signatory of the organization named above and attest to having participated in Neighborhood Development Fund training. In addition, I understand the requirements of the Neighborhood Development Fund grant process.

Please check:

I viewed the NDF training material on the website


Participant Signature

9-28-2015
Date

NOTE: Please return to Roxanne Steele:

E-mail address: Roxanne.Steele@louisvilleky.gov or Fax: 502-574-3219

Mailing Address: Louisville Metro Government ATTN: NDF Coordinator 611 West Jefferson St. 40202

Attachment 2 - Current Year Budget Pg 1 of 1

THIERMAN BUDGET 2015			
INCOME			
Condo Fee			79920.72
EXPENSES			
Gas & Electric			6900
Water & Sewer			11000
Set out Garb			1680
Simplex Grinnel			500
Lighting Expenses			500
Common Area Cleaning			4600
Misc			100
Snow Removal			700
Landscaping			3500
Mowing			1500
Repairs & Maint			1000
Plaster & Drywall repair			6000
Masonry Work			4000
Plumbing Repairs			5000
Electrial			1000
Insurance			10000
Bad Debt			1000
Management Fee			4032
Postage/Duplication			300
Legal/Professional			3000
Taxes			300
Transfer to Reserve			7992
Non- Budgeted items			5316.72
TOTAL			79920.72

NDF NON-PROFIT APPLICATION CHECKLIST

Legal Name of Applicant Organization:		
Program Name:	Request Amount:	Yes/No/NA
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?		Yes
Request form: Is the funding proposed less than or equal to the request amount?		YES
Request form: Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?		Yes
Application Page 1: Has prior Metro funds committed/granted been disclosed?		NO/YES
Application Page 1: Is the application properly signed and dated by authorized signatory?		NO
Application Page 3: Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?		NO
Application Pages 3 – 5: Is the proposed public purpose of the program well-documented?		NO
Application 4: Is there adequate documentation of how the proceeds of the fundraiser will be spent?		YES
Application Budget Page 6: Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for “Metro, Non Metro and Total” expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?		YES
Faith Based Organizations: Is the signed Faith Based Form signed and included?		N/A
Jefferson County Only: Will all funding be spent in Louisville/Jefferson County?		YES
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?		YES
Good Standing: Is the entity in good standing with: <ul style="list-style-type: none"> • Kentucky Secretary of State – include Secretary of State website information on organization • Louisville Metro Government – check OMB monthly report filed in Council Financial Reports • Internal Revenue Service – most recent Form 990 included 		YES
Separate Taxing Districts: If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?		N/A
Small Cities: Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)		N/A
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?		N/A
IRS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?		YES
Operating Budget: Is the organization’s current fiscal year operating budget included?		YES
Ordinance Required: Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.		NO
Board Members: Is the entity’s board member list (with term length/term limits) included?		
Staff: Is a list of the highest paid staff included with their expected annual personnel costs?		NO
Annual Audit: Is the most recent annual audit (if required by organization) included?		N/A
Rent Requests: Is a copy of signed lease included?		N/A
Articles of Incorporation: Are the Articles of Incorporation of the organization included?		YES
IRS Form W-9: Is the IRS Form W-9 included?		YES
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?		N/A
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?		N/A
Prepared by:		Date:

THIERMAN CONDOMINIUM COUNCIL OF CO-OWNERS, INC.**General Information**

Organization Number	0262398
Name	THIERMAN CONDOMINIUM COUNCIL OF CO-OWNERS, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	8/24/1989
Organization Date	8/24/1989
Last Annual Report	5/21/2015
Principal Office	3944 BARDSTOWN ROAD LOUISVILLE, KY 40218
Registered Agent	KENTUCKY REALTY 3944 BARDSTOWN ROAD LOUISVILLE, KY 40218

Current Officers

President	<u>Isaac Gavi</u>
Vice President	<u>Lisa Casey</u>
Secretary	<u>William Schrader</u>
Treasurer	<u>Angie Seigle</u>
Director	<u>Isaac Gavi</u>
Director	<u>Lisa Casey</u>
Director	<u>William Schrader</u>
Director	<u>Angie Seigle</u>