

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

**Applicant/Program:** Crescent Hill Community Council  
**Applicant Requested Amount:** \$1,475.00  
**Appropriation Request Amount:** \$ 1,475.00

**Executive Summary of Request**  
  
Funding for the Annual Crescent Hill Fourth of July Festival on July 3 & 4, 2018, at the Peterson-Dumesnil House. Funds will be used for the sound system at the festival.

Is this program/project a fundraiser?  Yes  No  
Is this applicant a faith based organization?  Yes  No  
Does this application include funding for sub-grantee(s)?  Yes  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.

9 District #      Bill Hallett Primary Sponsor Signature      \$1,475 Amount      5/23/18 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.

**Approved by:**  
  
\_\_\_\_\_  
Appropriations Committee Chairman      Date  
Final Appropriations Amount: \_\_\_\_\_

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

<b>Legal Name of Applicant Organization</b> Crescent Hill Community Council	
<b>Program Name and Request Amount</b> Crescent Hill Fourth of July Festival - \$1,475	
	<b>Yes/No/NA</b>
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"> <li>▶ Kentucky Secretary of State?</li> <li>▶ Louisville Metro Revenue Commission?</li> <li>▶ Louisville Metro Government?</li> <li>▶ Internal Revenue Service?</li> <li>▶ Louisville Metro Human Relations Commission?</li> </ul>	<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"/> N/A
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"/> No
Prepared by: <i>Wyle Stodge</i>	Date: <i>05/22/18</i>

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization:		Crescent Hill Community Council Inc.	
<small>(as listed on: <a href="http://www.sos.ky.gov/business/records">http://www.sos.ky.gov/business/records</a>)</small>			
Main Office Street & Mailing Address: 301 S. Peterson Avenue., Louisville, KY 40206			
Website: <a href="http://www.crescenthill.us">www.crescenthill.us</a>			
Applicant Contact:	Debbie Wiebe	Title:	Development Committee Chair
Phone:	312-286-8825	Email:	Debbie.wiebe502@gmail.com
Financial Contact:	Taylor Mayer	Title:	Treasurer
Phone:	502-558-8424	Email:	tmayer@tmayerlaw.com
Organization's Representative who attended NDF Training: Mark Gaff			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	301 S. Peterson Ave.		
Council District(s):	9th	Zip Code(s):	40206
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: <i>Crescent Hill 4<sup>th</sup> of July Festival</i>			
Total Request: (\$)	\$1,475	Total Metro Award (this program) in previous year: (\$)	4,000
Purpose of Request (check all that apply):			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current year projected budget <input checked="" type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation (current & signed) Cost estimates from proposed vendor if request is for capital expense		<input type="checkbox"/> Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 Evaluation forms if used in the proposed program Annual audit (if required by organization) Faith Based Organization Certification Form, if applicable	
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.			
Source:	Metro NDF Grant	Amount: (\$)	4,000
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Has the applicant met the BBB Charity Review Standards? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 3 – AGENCY DETAILS

#### Describe Agency's Vision, Mission and Services:

The mission of the Crescent Hill Community Council is to serve as an advocate for maintaining Crescent Hill's quality of life by improving the civic, recreational, cultural and educational life of the Crescent Hill neighborhood, and by strengthening community pride and involvement through objective planning, preservation, and enhancement of its historic character and natural beauty.

#### Council Goals

- Increase awareness of the Council's purpose and activities.
- Provide opportunities for people to become involved in the Council and its programs and activities.
- Work more closely with the Frankfort Avenue Business Association and other Crescent Hill organizations and institutions.
- Act as an advocate for neighborhood physical improvements.
- Preserve Crescent Hill's historic character and natural beauty.
- Promote a safe community.
- Strengthen the Council's relationship with Metro agencies and elected officials.

#### Crescent Hill Community Council Structure

The Crescent Hill Community Council has an annual meeting for all members. A Board governs work between general meetings. The Board is composed of officers (elected by the Council), committee chairs (elected by the Board) district representatives (elected by the Board), and at-large members (elected by the Board). Board meetings are typically held monthly, and are open to the public.

#### Benefits

The Community Council helps inform neighborhood residents about events, programs and other activities in their community, resolves neighborhood issues and serves as a liaison between Metro Government and the neighborhood. We also mow and maintain medians, small parks and right of ways in the neighborhood. We have spearheaded the redesign and revitalization of Kennedy Court Park, and have raised funds for Field Elementary, United Crescent Hill Ministries, Barret Middle School and the Crescent Hill Public Library. We currently host the 4th of July Festival, Easter Egg Hunt, Chili Night Out and Holiday Open House at the Peterson-Dumesnil House.

**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

**SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF**

Board Member	Term End Date
Cynthia Thomas, President	Dec. 31, 2018
Vice President (Vacant)	
Barry Creech, Secretary	Dec. 31, 2018
Taylor Mayer, Treasurer	Dec. 31, 2018

**Describe the Board term limit policy:**  
 Board members serve for the calendar year following their election. Terms of office transition in January of each year.

Three Highest Paid Staff Names	Annual Salary
N/A	

Applicant's Initials *JLW*

**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

**SECTION 5 – PROGRAM/PROJECT NARRATIVE**

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

The festival is our main community event and fundraiser each year, and will occur on July 3 - 4, 2018. The 4th of July festival allows us to bring the neighborhood together directly through the event, as well as through volunteer opportunities. The Community Council use this event to recruit volunteers from other neighborhood and business organizations, as well as residents of Crescent Hill. In this way, we provide a platform for active community members to network outside of Crescent Hill and for new residents to get involved. We also hold a Volunteer Appreciation meeting, which allows additional opportunities for neighbors to become more acquainted and form community ties.

We measure success in terms of 1) volunteer participation, 2) repeat and new vendors and sponsors, 3) comments by patrons and attendees, 4) event participation, and 5) our ability to give back to the community and break-even on the event.

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

Funding of \$1,475 will be used to offset expenses for the 4th of July festival. The event incurs a number of site-related expenditures. This grant will be used to offset the following expense:

-Sound System \$2,300

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

The event is not planned solely as a fundraiser, as the basic purpose of the event is to create a greater sense of community by celebrating together. Often the event does produce revenue in excess of expense. In those cases, the funds are used to further the mission of the Crescent Hill Community Council, including regular maintenance of community properties, such as the Hite Median, Kennedy Court Park and Eastover Park. Revenue is also used as a seed fund for next year's 4th of July event.

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

- The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:
- ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.

The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.

- Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):
- ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
  - ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

The festival is designed to bring the neighborhood together and strengthen community ties through volunteer opportunities and event participation.

We measure success in terms of 1) volunteer participation, 2) repeat and new vendors and sponsors, 3) community participation, 4) comments by patrons and attendees, 5) number of participants who use the free parking and trolley service available during the event, and 6) our ability to give back to the community after the event.

**F: Briefly describe any existing collaborative relationships the organization has with other community organizations. Describe what those partners are bringing to the relationship in general and to this program/project specifically.**

The Crescent Hill 4th of July Festival requires collaboration with a number of other community organizations:

- Peterson-Dumesnil House Foundation - grounds are utilized for the event and a silent auction fundraiser for the foundation
- Frankfort Avenue Business Association - handles beer sales
- Masonic Homes of Kentucky - in-kind support for the festival
- Southern Baptist Theological Seminary - provides parking for festival attendees

Throughout the year, we have ongoing partnerships with United Crescent Hill Ministries, Field Elementary, St. Joseph's Children's Home and others.



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 6 – PROGRAM/PROJECT BUDGET SUMMARY

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

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non- Metro Funds	Total Funds
<b>A: Personnel Costs Including Benefits</b>			
<b>B: Rent/Utilities</b>			
<b>C: Office Supplies</b>			
<b>D: Telephone</b>			
<b>E: In-town Travel</b>			
<b>F: Client Assistance (See Detailed List on Page 8)</b>			
<b>G: Professional Service Contracts</b>			
<b>H: Program Materials</b>			
<b>I: Community Events &amp; Festivals (See Detailed List on Page 8)</b>	\$1,475	\$63,188	\$64,663
<b>J: Machinery &amp; Equipment</b>			
<b>K: Capital Project</b>			
<b>L: Other Expenses (See Detailed List on Page 8)</b>			
<b>*TOTAL PROGRAM/PROJECT FUNDS</b>	1,475	63,188	64,663
<b>% of Program Budget</b>	2.2 %	97.8 %	100%

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

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	\$10,500
Fees Collected from Program Participants	\$54,950
Other (please specify)	\$4,500 (artist booth fees)
<b>Total Revenue for Column 2 Expenses **</b>	<b>\$69,950</b>

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

\*\*Must equal or exceed total in column 2.

**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7 (circle one and use multiple sheets if necessary)	Column 1	Column 2	Column (1 + 2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
Art Show Expenses		500	500
Ping Pong Toss Expenses		550	550
Children's Fun Zone Expenses		3,413	3,413
Communications & Marketing		750	750
Facilities, Grounds and Equipment	\$1,475	9,625	11,100
FABA Beer		8,400	8,400
Fireworks		8,500	8,500
Gaming Expenses		1,400	1,400
Information Booth/History Display		175	175
Miscellaneous Expenses		125	125
Musicians and Entertainers		1,650	1,650
Non-CHCC Food		24,000	24,000
Pet Contest		250	250
Security		2,950	2,950
Ticket Printing		550	550
Volunteer Appreciation		350	350
<b>Total</b>	1,475	63,188	64,663

**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).

<b>Donor*/Type of Contribution</b>	<b>Value of Contribution</b>	<b>Method of Valuation</b>
Use of Peterson-Dumesnil House	\$4,200	Two-day rental fee
Volunteers (days of event)	\$4,000	\$20/hr x 200 people
Volunteers (planning team)	\$3,000	\$20/hr x 150 hours
<i>Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution &amp; Other In Kind)</i>	\$11,200	

**\* 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, 2018

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

If YES, please explain:

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 7 – CERTIFICATIONS & ASSURANCES

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

#### Standard Assurances

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

#### Standard Certifications

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

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

### SECTION 8 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:	<i>Cynthia B Thomas</i>	Date:	5-19-18
Legal Signatory: (please print):	Cynthia B Thomas	Title:	President
Phone:	502-741-1798	Extension:	
		Email:	<i>cynthiatthomas@louisville.gov</i>

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

DEPARTMENT OF THE TREASURY

Date: FEB 16 2017

Employer Identification Number:

DLN:

17053342346006

CRESCENT HILL COMMUNITY COUNCIL INC  
301 S PETERSON AVE  
LOUISVILLE, KY 40206-2540

Contact Person:

MS. MALONEY

ID# 31210

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Form 990/990-EZ/990-N Required:

Yes

Effective Date of Exemption:

February 15, 2011

Contribution Deductibility:

No

Addendum Applies:

No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(4). This letter could help resolve questions on your exempt status. Please keep it for your records.

Based on the information you submitted in your application, we approved your request for reinstatement under Revenue Procedure 2014-11. Your effective date of exemption, as listed at the top of this letter, is retroactive to your date of revocation.

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

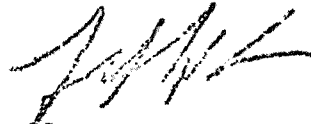
If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-NC" in the search bar to view Publication 4221-NC, Compliance Guide for Tax-Exempt Organizations (Other than 501(c)(3) Public Charities and Private Foundations), which describes your recordkeeping, reporting, and disclosure requirements.

Letter 948

CRESCENT HILL COMMUNITY COUNCIL INC

Sincerely,

A handwritten signature in black ink, appearing to read "Jeffrey I. Cooper". The signature is stylized with a large initial "J" and a long horizontal stroke at the end.

Jeffrey I. Cooper  
Director, Exempt Organizations  
Rulings and Agreements

**Crescent Hill Community Council Inc**  
**Profit & Loss Budget vs. Actual**  
 January 1 through May 18, 2018

	<u>Jan 1 - May 18, 18</u>	<u>Budget</u>
<b>Ordinary Income/Expense</b>		
<b>Income</b>		
43400 · Direct Public Support		
43410 · Corporate Contributions	0.00	0.00
43440 · Gifts in Kind - Goods	0.00	0.00
43450 · Individ, Business Contributions	0.00	0.00
43400 · Direct Public Support - Other	0.00	0.00
<b>Total 43400 · Direct Public Support</b>	<b>0.00</b>	<b>0.00</b>
44800 · Indirect Public Support		
44820 · United Way, CFC Contributions	0.00	0.00
44800 · Indirect Public Support - Other	0.00	0.00
<b>Total 44800 · Indirect Public Support</b>	<b>0.00</b>	<b>0.00</b>
45000 · Investments		
45030 · Interest-Savings, Short-term CD	0.00	0.00
45000 · Investments - Other	0.00	0.00
<b>Total 45000 · Investments</b>	<b>0.00</b>	<b>0.00</b>
46400 · Other Types of Income		
46430 · Miscellaneous Revenue	0.00	0.00
46400 · Other Types of Income - Other	0.00	0.00
<b>Total 46400 · Other Types of Income</b>	<b>0.00</b>	<b>0.00</b>
47000 · Membership Dues	1,485.00	6,550.00
47100 · 4th of July Income		
47110 · Artist Booth Fees	1,515.00	4,500.00
47120 · CHCC Food Booth Income	0.00	0.00
47130 · CHCC Children's Fun Zone	0.00	500.00
47135 · Vendor Children's Fun Zone	0.00	3,000.00
47140 · FAB A Beer Income	0.00	12,000.00
47150 · Gaming Income		
47151 · Cake Wheel	0.00	1,900.00
47150 · Gaming Income - Other	0.00	0.00
<b>Total 47150 · Gaming Income</b>	<b>0.00</b>	<b>1,900.00</b>
47160 · Miscellaneous Income	0.00	500.00
47170 · Neighborhood Development Fund	0.00	4,000.00
47180 · Non-CHCC Food, ATM, etc.	0.00	30,000.00
47185 · Unused Ticket Sales	0.00	1,600.00
47190 · Individual Sponsors	2,250.00	500.00
47195 · Ping Pong Toss	0.00	1,200.00
47301 · Cake Wheel Donations	0.00	250.00
47100 · 4th of July Income - Other	0.00	0.00
<b>Total 47100 · 4th of July Income</b>	<b>3,765.00</b>	<b>59,950.00</b>
47200 · Outdoor Cinema Concessions	0.00	0.00
47300 · Donations/Sponsors	0.00	0.00
47400 · Newsletter Advertising Income	1,844.00	0.00
47410 · Development Income	0.00	11,000.00
47500 · Interest Income	2.62	12.00
47800 · Payment in Kind Income	0.00	0.00
9000 · Program Income		
47230 · Membership Dues	0.00	0.00
47240 · Program Service Fees	0.00	0.00
9000 · Program Income - Other	0.00	0.00
<b>Total 9000 · Program Income</b>	<b>0.00</b>	<b>0.00</b>
<b>Total Income</b>	<b>7,096.62</b>	<b>77,512.00</b>
<b>Expense</b>		
2000 · Payroll Expenses	0.00	0.00
60900 · Business Expenses		

4:13 PM

05/18/18

Cash Basis

**Crescent Hill Community Council Inc**  
**Profit & Loss Budget vs. Actual**  
 January 1 through May 18, 2018

	Jan 1 - May 18, 18	Budget
60920 · Business Registration Fees	0.00	0.00
60900 · Business Expenses - Other	0.00	0.00
<b>Total 60900 · Business Expenses</b>	<b>0.00</b>	<b>0.00</b>
62100 · Contract Services		
62110 · Accounting Fees	0.00	0.00
62140 · Legal Fees	0.00	0.00
62150 · Outside Contract Services	0.00	0.00
62100 · Contract Services - Other	0.00	0.00
<b>Total 62100 · Contract Services</b>	<b>0.00</b>	<b>0.00</b>
62800 · Facilities and Equipment		
62810 · Depr and Amort - Allowable	0.00	0.00
62830 · Donated Facilities	0.00	0.00
62840 · Equip Rental and Maintenance	0.00	0.00
62870 · Property Insurance	0.00	0.00
62890 · Rent, Parking, Utilities	0.00	0.00
62800 · Facilities and Equipment - Other	0.00	0.00
<b>Total 62800 · Facilities and Equipment</b>	<b>0.00</b>	<b>0.00</b>
64000 · 4th of July Expenses		
64001 · Cash Drawer 4th of July	0.00	0.00
64002 · Ping Pong Toss Expenses	0.00	550.00
64005 · Art Show Expenses	100.00	500.00
64010 · CHCC Food/Drink Booth	0.00	0.00
64015 · CHC Children's Fun zone Exp	0.00	913.00
64017 · Vendor Children's Fun Zone	0.00	2,500.00
64020 · Communications & Marketing	0.00	750.00
64025 · FABA Beer	0.00	8,400.00
64030 · Facilities, Grounds & Equipment	396.01	11,100.00
64035 · Fireworks	2,500.00	8,500.00
64040 · Gaming Expenses	0.00	1,400.00
64045 · History Display	0.00	50.00
64050 · Information Booth	0.00	125.00
64055 · Miscellaneous Expenses	18.93	125.00
64060 · Musicians & Entertainers	0.00	1,650.00
64065 · Non-CHCC Food	0.00	24,000.00
64070 · Office Supplies	0.00	0.00
64075 · Pet Contest	0.00	250.00
64080 · Security	0.00	2,950.00
64085 · Ticket Printing	380.73	550.00
64090 · Volunteer Appreciation	0.00	350.00
64000 · 4th of July Expenses - Other	0.00	0.00
<b>Total 64000 · 4th of July Expenses</b>	<b>3,395.67</b>	<b>64,663.00</b>
65000 · Newsletter Expenses		
65010 · Books, Subscriptions, Reference	0.00	0.00
65020 · Postage, Mailing Service	180.00	0.00
65030 · Printing and Copying	0.00	0.00
65050 · Telephone, Telecommunications	0.00	0.00
65000 · Newsletter Expenses - Other	0.00	0.00
<b>Total 65000 · Newsletter Expenses</b>	<b>180.00</b>	<b>0.00</b>
65100 · Other Types of Expenses		
65160 · Other Costs	0.00	0.00
65100 · Other Types of Expenses - Other	0.00	0.00
<b>Total 65100 · Other Types of Expenses</b>	<b>0.00</b>	<b>0.00</b>
66000 · Programs & Committees		
66005 · Compassion	0.00	50.00
66010 · Comprehensive Plan	0.00	100.00
66015 · Crime Prevention	0.00	50.00
66020 · Green		



4:13 PM  
 05/18/18  
 Cash Basis

**Crescent Hill Community Council Inc**  
**Profit & Loss Budget vs. Actual**  
 January 1 through May 18, 2018

	<u>Jan 1 - May 18, 18</u>	<u>Budget</u>
66021 · Kennedy Park Mowing	0.00	1,275.00
66022 · New Projects	0.00	225.00
66023 · Tree Program	0.00	250.00
66020 · Green - Other	0.00	0.00
<b>Total 66020 · Green</b>	<b>0.00</b>	<b>1,750.00</b>
66025 · Historian	0.00	0.00
66030 · Membership/Welcome		
66031 · Office Supplies	0.00	100.00
66032 · Postage	0.00	200.00
66033 · Printing	0.00	200.00
66034 · Printing & Specialty Bags	0.00	250.00
66030 · Membership/Welcome - Other	0.00	0.00
<b>Total 66030 · Membership/Welcome</b>	<b>0.00</b>	<b>750.00</b>
66035 · Outdoor Cinema	0.00	0.00
66040 · Social Committee		
66041 · Chili Night Out	0.00	300.00
66042 · Dessert With the Mayor	0.00	200.00
66043 · Holiday Open House	0.00	450.00
66044 · Spirit of Crescent Hill	0.00	250.00
66045 · Other	0.00	0.00
66046 · Easter Egg Hunt & Parade Candy	104.86	250.00
66040 · Social Committee - Other	0.00	0.00
<b>Total 66040 · Social Committee</b>	<b>104.86</b>	<b>1,450.00</b>
66050 · Block Parties	0.00	250.00
66055 · District Representatives	0.00	0.00
66060 · Development	0.00	700.00
66065 · Easter Parade	0.00	2,000.00
66300 · Community Giving	0.00	1,000.00
66400 · Communications	0.00	1,800.00
66000 · Programs & Committees - Other	0.00	0.00
<b>Total 66000 · Programs &amp; Committees</b>	<b>104.86</b>	<b>9,900.00</b>
66900 · Reconciliation Discrepancies	3.50	0.00
67000 · Council Operation & Expenses		
67005 · Insurance GL & DO	0.00	1,750.00
67010 · Monthly Meetings	84.97	300.00
67015 · Office Supplies	0.00	595.00
67020 · Permits & Fees-non 4th of July	0.00	0.00
67025 · Software	0.00	1,404.00
67030 · Volunteer Management	0.00	0.00
67035 · Web Fees	3.75	100.00
67040 · Web Redesign	0.00	0.00
67045 · Membership- Other Organizations	0.00	100.00
67050 · PayPal Fees	45.69	200.00
67100 · Finance	405.00	500.00
67000 · Council Operation & Expenses - Other	0.00	0.00
<b>Total 67000 · Council Operation &amp; Expenses</b>	<b>539.41</b>	<b>4,949.00</b>
68000 · Payment in Kind Expenses	0.00	0.00
68300 · Travel and Meetings		
68310 · Conference, Convention, Meeting	0.00	0.00
68320 · Travel	0.00	0.00
68300 · Travel and Meetings - Other	0.00	0.00
<b>Total 68300 · Travel and Meetings</b>	<b>0.00</b>	<b>0.00</b>
<b>Total Expense</b>	<b>4,223.44</b>	<b>79,512.00</b>
<b>Net Ordinary Income</b>	<b>2,873.18</b>	<b>-2,000.00</b>
<b>Other Income/Expense</b>		

4:13 PM

05/18/18

Cash Basis

**Crescent Hill Community Council Inc**  
**Profit & Loss Budget vs. Actual**  
January 1 through May 18, 2018

---

	Jan 1 - May 18, 18	Budget
Other Expense		
80000 · Ask My Accountant	0.00	0.00
Total Other Expense	0.00	0.00
Net Other Income	0.00	0.00
Net Income	<u>2,873.18</u>	<u>-2,000.00</u>

4:14 PM  
05/18/18  
Cash Basis

Crescent Hill Community Council Inc  
**Balance Sheet**  
As of May 18, 2018

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	<u>May 18, 18</u>
<b>ASSETS</b>	
Current Assets	
Checking/Savings	
MainSource Gaming Bank Account	15.00
MainSource General Bank Acct.	<u>22,886.25</u>
<b>Total Checking/Savings</b>	<u>22,901.25</u>
<b>Total Current Assets</b>	<u>22,901.25</u>
<b>TOTAL ASSETS</b>	<u><u>22,901.25</u></u>
<b>LIABILITIES &amp; EQUITY</b>	
Equity	
30000 · Opening Balance Equity	18,492.66
32000 · Unrestricted Net Assets	1,535.41
Net Income	<u>2,873.18</u>
<b>Total Equity</b>	<u>22,901.25</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<u><u>22,901.25</u></u>

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2017, or fiscal year beginning and ending

2017

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879EO for the latest information.

Name of exempt organization

Employer identification number

Crescent Hill Community Council Inc Name and title of officer

Taylor Mayer, Treasurer

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

Table with 5 rows (1a-5a) and 2 columns (Form type, Amount). Row 2b contains '20,643'.

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize Shaw Tax Services, LLC to enter my PIN as my signature

on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature

Date 02-05-2018

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date 02-05-2018

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

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

A For the 2017 calendar year, or tax year beginning 2017, and ending 20

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C Name of organization: Crescent Hill Community Council Inc. D Employer identification number. E Telephone number: (502) 203-6620. F Group Exemption Number.

G Accounting Method: Cash. H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: www.crescenthill.us. J Tax-exempt status (check only one): 501(c)(4). K Form of organization: Other Nonprofit.

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ 81,902

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I

Table with 21 rows and 3 columns: Description, Line Number, Amount. Rows include Revenue (Contributions, Gaming, etc.), Expenses (Grants, Salaries, etc.), and Net Assets (Excess or deficit, Net assets at beginning/end of year).

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II [X]

Table with 3 columns: Description, (A) Beginning of year, (B) End of year. Rows include Cash, savings, and investments; Land and buildings; Other assets; Total assets; Total liabilities; Net assets or fund balances.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III [ ]

What is the organization's primary exempt purpose? Neighborhood Association

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

Table with 3 columns: Description, Line Number, Expenses. Rows include 4th of July Celebration, Committees: Block Party, Spirit of Crescent Hill, History, Holiday party, Chili Night Out, Easter, Dessert with the Mayor, Welcome, Membership, Beautification, Derby Party, Community Giving consists of donations to neighborhood entities Field Elementary School PTA, and the nonprofit Center for Neighborhoods, Other program services, Total program service expenses.

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated - see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV [ ]

Table with 5 columns: (a) Name and title, (b) Average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-), (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation. Rows include Mark Gaff (President), Cynthia Thomas (Vice President), Barry Creech (Secretary), Anetta Shaw (Treasurer).

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 33 through 45b regarding organizational activities, financials, and governance.

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47 - 49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
49a Did the organization make any transfers to an exempt non-charitable related organization?
b If "Yes," was the related organization a section 527 organization?
50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC), (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation.

f Total number of other employees paid over \$100,000
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation.

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a completed Schedule A

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 Taylor Mayer Signature of officer
Taylor Mayer, Treasurer Type or print name and title

Paid Preparer Use Only Anetta Shaw EA MBA Print/Type preparer's name
Shaw Tax Services, LLC Firm's name
4965 US Highway 42 Suite 1000 Firm's address
Louisville KY 40222
02-05-2018 Date
502-203-6620 Phone no.

May the IRS discuss this return with the preparer shown above? See instructions



**SCHEDULE G**  
**(Form 990 or 990-EZ)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

CMB No. 1545-0047

**2017**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest instructions.

Name of the organization

Employer identification number

**Crescent Hill Community Council Inc**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
<b>Total</b>						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

**Part II**

**Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 <u>4th of July</u> (event type)	(b) Event #2  (event type)	(c) Other events <u>None</u> (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts . . . . .	70,860		70,860
	2	Less: Contributions . . . . .			
	3	Gross income (line 1 minus line 2) . . . . .	70,860		70,860
Direct Expenses	4	Cash prizes . . . . .			
	5	Noncash prizes . . . . .	1,420		1,420
	6	Rent/facility costs . . . . .			
	7	Food and beverages . . . . .	30,818		30,818
	8	Entertainment . . . . .	2,100		2,100
	9	Other direct expenses . . . . .	26,921		26,921
	10	Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶			
11	Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				9,601

**Part III**

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

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

9 Enter the state(s) in which the organization conducts gaming activities:  
 a Is the organization licensed to conduct gaming activities in each of these states? . . . . .  Yes  No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .  Yes  No  
 b If "Yes," explain: \_\_\_\_\_

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

**Supplemental Information to Form 990 or 990-EZ**  
Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Crescent Hill Community Council Inc

Employer identification number

**01. Description of other revenue (Part I, line 8)**

Description	Amount
Newsletter	5,644

**02. Description of other expenses (Part I, line 16)**

Description	Amount
Insurance	1,662
Development	365
KY Filing Fee	25
Welcome Committee	38
Holiday Open House	327
Easter Activities	211
Membership- Other organizations	50
Monthly Meetings	237
Spirit of Crescent Hill	117
Office Supplies	254
Chili Night Out	241
Dessert with the Mavor	141
Green Committee	1,375
Software	1,404
PayPal Fees	175
Community Giving	1,250
Website	153

**03. Description of other assets (Part II, line 24)**

Category	Beginning of Year	End of Year
----------	-------------------	-------------

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

Name of the organization

Employee identification number

Crescent Hill Community Council Inc



Prepaid expense

0

52

ARTICLES OF INCORPORATION

OF

CRESCENT HILL COMMUNITY COUNCIL, INC.

RECEIVED

JUL 25 1969

Y. o. c. h.

Commonwealth of Kentucky

5-123252

**KNOW ALL MEN BY THESE PRESENTS:**

That we, Herman D. Weick, Clough Venable, Raymond Voll and Mrs. Richard Swigart, all of Jefferson County, Kentucky, do declare that we hereby associate ourselves to form a corporation for educational, charitable and civic purposes, pursuant to the provisions of KRS 273.160 et seq., stating that:

(1) The name of the corporation shall be "CRESCENT HILL COMMUNITY COUNCIL, INC."

(2) The duration of the corporation shall be perpetual, or until and unless the corporation shall be dissolved by the voluntary act of the members and Directors in such manner as may be prescribed by law.

(3) The purposes of the corporation are to create a feeling of community in the Crescent Hill area through objective planning and preservation, with regard for necessary changes that must be made, and in connection therewith to engage in all necessary, legal activities and undertakings.

(4) The registered office of the corporation in Kentucky shall be located at 2518 Top Hill Road, Louisville, Kentucky, 40206, and the registered resident agent of the corporation shall be Mrs. Richard Swigart, whose address is the same as the said office.

(5) In carrying out the above described corporate purposes, the corporation shall have all of the powers enumerated in KRS 273.161 to 273.390, to which reference is hereby specifically

(6) The names and addresses of the ~~incorporators~~

follows:

Mr. Herman D. Wleck  
205 Idlewylda Drive  
Louisville, Kentucky 40206

Mr. Clough Venable  
166 North Petersen Avenue  
Louisville, Kentucky 40206

Mr. Raymond Voll  
212 Heady Avenue  
Louisville, Kentucky 40207

Mrs. Richard Swigart  
2518 Top Hill Road  
Louisville, Kentucky 40206

(7) The original board of directors of the corporation shall consist of four (4) persons, to wit, the four (4) above-named incorporators.

(8) The officers of the corporation shall consist of a president, a vice-president, a secretary and a treasurer; the method of electing or appointing said officers and all other matters relating to membership in and the regulation and management of the internal affairs of the corporation shall be prescribed in the bylaws, which shall be adopted by the board of directors and which may be from time to time amended, in the manner to be provided therein.

(9) The private property of the incorporators, members and directors shall not be subject to, or in any way liable for, any debt or contract of the corporation or any judgment against the corporation.

(10) The corporation shall commence business immediately upon the recording of these Articles of Incorporation in the office of the Secretary of State of Kentucky and in the office of the Clerk of the County Court of Jefferson County, Kentucky, and upon the

ASSUMED BY THE SECRETARY OF STATE OF A CERTIFICATE OF INCORPORATION.

IN TESTIMONY WHEREOF, witness our signatures as incorporators,  
this 21<sup>st</sup> day of July, 1969.

Herman D. Wieck  
Herman D. Wieck

Clough Venable  
Clough Venable

Raymond Voll  
Raymond Voll

Mrs. Richard Swigart  
Mrs. Richard Swigart

COMMONWEALTH OF KENTUCKY )  
  ) SS  
COUNTY OF JEFFERSON )

I, the undersigned Notary Public in and for the State and County aforesaid, do hereby certify that on this day the foregoing Articles of Incorporation were produced before me in my said County and State by Mrs. Richard Swigart, and she thereupon acknowledged to me that she and the other incorporators named therein executed the same as their voluntary act and deed for the purposes therein expressed.

WITNESS my hand and seal this 21<sup>st</sup> day of July, 1969.

Raymond A. Voll  
NOTARY PUBLIC, County of Jefferson  
State of Kentucky

My Commission expires \_\_\_\_\_ My Commission Expires Nov. 30, 1972

This instrument prepared by:  
Charles M. Hassett  
Attorney at Law  
400 South Sixth Street  
Louisville, Kentucky 40203

ORIGINAL COPY  
FILED AND RECORDED

Shirley Begley

JUL 30 1969

SECRETARY OF STATE OF KENTUCKY  
FRANKFORT, KENTUCKY  
BY X. J. [Signature]  
ASSISTANT SECRETARY OF STATE

## Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	1	Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Crescent Hill Community Council Inc</b>	
	2	Business name/disregarded entity name, if different from above	
	3	Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input checked="" type="checkbox"/> Other (see instructions) ▶ <b>501(c)4 nonprofit</b>	
	4	Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
	5	Address (number, street, and apt. or suite no.) <b>301 S. Peterson Ave</b>	Requester's name and address (optional)
	6	City, state, and ZIP code <b>Louisville, KY 40206</b>	
	7	List account number(s) here (optional)	

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the 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.

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

<b>Social security number</b>													
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> </table>													
or													
<b>Employer identification number</b>	[REDACTED]												

**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.

<b>Sign Here</b>	Signature of U.S. person ▶ <i>Anetta Brown</i>	Date ▶ <i>2-28-17</i>
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**General Instructions**

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

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1096 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- 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. See *What is FATCA reporting?* on page 2 for further information.



**CRESCENT HILL COMMUNITY COUNCIL, INC.****General Information**

<b>Organization Number</b>	0012310
<b>Name</b>	CRESCENT HILL COMMUNITY COUNCIL, INC.
<b>Profit or Non-Profit</b>	N - Non-profit
<b>Company Type</b>	KCO - Kentucky Corporation
<b>Status</b>	A - Active
<b>Standing</b>	G - Good
<b>State</b>	KY
<b>File Date</b>	7/30/1969
<b>Organization Date</b>	7/30/1969
<b>Last Annual Report</b>	2/5/2018
<b>Principal Office</b>	301 S. PETERSON LOUISVILLE, KY 40206
<b>Registered Agent</b>	TAYLOR MAYER 301 SO. PETERSON AVE. LOUISVILLE, KY 40206

**Current Officers**

<b>President</b>	<u>Cynthia Thomas</u>
<b>Secretary</b>	<u>Barry Creech</u>
<b>Treasurer</b>	<u>Taylor Mayer</u>
<b>Director</b>	<u>Thomas Korbee</u>
<b>Director</b>	<u>Tim Allen</u>
<b>Director</b>	<u>Mariel Young</u>

**Individuals / Entities listed at time of formation**

<b>Director</b>	<u>HERMAN D WIECK</u>
<b>Director</b>	<u>CLOUGH VENABLE</u>
<b>Director</b>	<u>RAYMOND VOLL</u>
<b>Director</b>	<u>RICHARD SWIGART</u>
<b>Incorporator</b>	<u>HERMAN D WIECK</u>
<b>Incorporator</b>	<u>CLOUGH VENABLE</u>
<b>Incorporator</b>	<u>RAYMOND VOLL</u>
<b>Incorporator</b>	<u>MRS RICHARD SWIGART</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>	2/5/2018 2:13:13 PM	1 page	<a href="#">PDF</a>
<u>Annual Report</u>	2/5/2018	1 page	<a href="#">PDF</a>
<u>Registered Agent</u>	2/9/2017 12:58:40 PM	1 page	<a href="#">PDF</a>

<a href="#">name/address change</a>				
<a href="#">Annual Report</a>	2/9/2017	1 page	<a href="#">PDF</a>	
<a href="#">Annual Report</a>	3/23/2016	1 page	<a href="#">PDF</a>	
<a href="#">Annual Report</a>	4/30/2015	1 page	<a href="#">PDF</a>	
<a href="#">Registered Agent name/address change</a>	6/19/2014 2:05:06 PM	1 page	<a href="#">PDF</a>	
<a href="#">Annual Report</a>	6/19/2014	1 page	<a href="#">PDF</a>	
<a href="#">Annual Report</a>	6/5/2013	1 page	<a href="#">PDF</a>	
<a href="#">Annual Report</a>	2/25/2012	1 page	<a href="#">PDF</a>	
<a href="#">Registered Agent name/address change</a>	6/22/2011 8:20:56 AM	1 page	<a href="#">PDF</a>	
<a href="#">Annual Report</a>	6/22/2011	1 page	<a href="#">PDF</a>	
<a href="#">Annual Report</a>	6/23/2010	1 page	<a href="#">PDF</a>	
<a href="#">Annual Report</a>	6/30/2009	1 page	<a href="#">PDF</a>	
<a href="#">Annual Report</a>	6/16/2008	1 page	<a href="#">PDF</a>	
<a href="#">Annual Report</a>	6/24/2007	1 page	<a href="#">PDF</a>	
<a href="#">Annual Report</a>	4/16/2006	1 page	<a href="#">PDF</a>	
<a href="#">Statement of Change</a>	11/23/2005	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	4/14/2005	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	6/19/2003	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	7/2/2002	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	6/28/2001	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	8/16/2000	2 pages	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Statement of Change</a>	6/29/2000	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	7/19/1999	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	5/6/1998	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1997	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1996	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1995	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1994	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1993	2 pages	<a href="#">tiff</a>	<a href="#">PDF</a>
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<a href="#">Annual Report</a>	7/1/1991	2 pages	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1990	2 pages	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1989	3 pages	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1988	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Statement of Change</a>	11/17/1986	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Statement of Change</a>	11/17/1986	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	9/1/1986	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	7/1/1986	1 page	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	6/18/1970	11 pages	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Annual Report</a>	6/18/1970	11 pages	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Articles of Incorporation</a>	7/30/1969	5 pages	<a href="#">tiff</a>	<a href="#">PDF</a>
<a href="#">Articles of Incorporation</a>	7/30/1969	5 pages	<a href="#">tiff</a>	<a href="#">PDF</a>

## Assumed Names

## Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	2/5/2018 2:18:55 PM	2/5/2018 2:18:55 PM	
Registered agent address change	2/5/2018 2:13:13 PM	2/5/2018 2:13:13 PM	
Annual report	2/9/2017 1:13:24 PM	2/9/2017 1:13:24 PM	
Registered agent address change	2/9/2017 12:58:40 PM	2/9/2017 12:58:40 PM	
Annual report	3/23/2016 11:57:19 AM	3/23/2016 11:57:19 AM	
Annual report	4/30/2015 8:02:23 AM	4/30/2015 8:02:23 AM	
Annual report	6/19/2014 2:23:19 PM	6/19/2014 2:23:19 PM	
Registered agent address change	6/19/2014 2:05:06 PM	6/19/2014 2:05:06 PM	
Annual report	6/5/2013 2:27:07 PM	6/5/2013 2:27:07 PM	
Annual report	2/25/2012 8:53:32 AM	2/25/2012 8:53:32 AM	
Annual report	6/22/2011 8:23:27 AM	6/22/2011 8:23:27 AM	
Registered agent address change	6/22/2011 8:20:56 AM	6/22/2011 8:20:56 AM	
Annual report	6/23/2010 8:10:32 AM	6/23/2010 8:10:32 AM	
Annual report	6/30/2009 12:18:01 PM	6/30/2009 12:18:01 PM	
Annual report	6/16/2008 9:34:18 PM	6/16/2008 9:34:18 PM	
Annual report	6/24/2007 2:18:30 PM	6/24/2007 2:18:30 PM	
Annual report	4/16/2006 8:51:29 AM	4/16/2006 8:51:29 AM	
Registered agent address change	11/23/2005 3:05:16 PM	11/23/2005	
Registered agent address change	6/29/2000 10:02:36 AM	6/29/2000	
Annual report	6/29/2000 10:02:18 AM	6/29/2000	

## Microfilmed Images

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

Annual Report	3/30/2005	1 page
Annual Report	4/13/2004	1 page
Annual Report	6/19/2003	1 page
Annual Report	7/2/2002	1 page

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