

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

DEC 19 2014 PM 2:44 JH

**Applicant/Program:** Zion Community Development Cooperation/ Russell Education Academic Community Help (REACH)

**Executive Summary of Request:** District Four is appropriating \$5,000 for the Russell Education Academic Community Help (REACH). The neighborhood development fund will go towards providing education to the community, establish programs and academic services. Additionally the funding will help with the purchase of computers, printers and academic supplies.

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

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

<u>4</u>		<u>\$5000</u>	<u>12/18/2014</u>
District #	Primary Sponsor Signature	Amount	Date

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

N/A

**Approved by:**

\_\_\_\_\_ Date \_\_\_\_\_  
Appropriations Committee Chairman

**Clerk's Office Only:**

Request Amount: \_\_\_\_\_ Committee Amended Appropriation: \_\_\_\_\_  
Original Appropriation: \_\_\_\_\_ Council Amended Appropriation: \_\_\_\_\_

COUNCIL ON METRO COUNCIL CLERK  
REVIEWED  
DATE 1/14/15 TIME 12:01

## NDF NON-PROFIT APPLICATION CHECKLIST

<b>Legal Name of Applicant Organization:</b> Zion Community Development Cooperation		
Program Name: Russell Education Academic Community Help	Request Amount: \$5000	Yes/No/NA
<b>Request form:</b> Is the NDF request form signed by all Council Member(s) appropriating funding?		yes
<b>Request form:</b> Is the funding proposed less than or equal to the request amount?		yes
<b>Request form:</b> Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?		yes
<b>Application Page 1:</b> Has prior Metro funds committed/granted been disclosed?		NO
<b>Application Page 1:</b> Is the application properly signed and dated by authorized signatory?		yes
<b>Application Page 3:</b> Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?		yes
<b>Application Pages 3 – 5:</b> Is the proposed public purpose of the program well-documented?		yes
<b>Application 4:</b> Is there adequate documentation of how the proceeds of the fundraiser will be spent?		N/A
<b>Application Budget Page 6:</b> 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
<b>Faith Based Organizations:</b> Is the signed Faith Based Form signed and included?		yes
<b>Jefferson County Only:</b> Will all funding be spent in Louisville/Jefferson County?		yes
<b>Capital Project(s) request:</b> Is the cost estimate(s) from proposed vendor(s) included?		N/A
<b>Good Standing:</b> Is the entity in good standing with: <ul style="list-style-type: none"> <li>• Kentucky Secretary of State – include Secretary of State website information on organization</li> <li>• Louisville Metro Government – check OMB monthly report filed in Council Financial Reports</li> <li>• Internal Revenue Service – most recent Form 990 included</li> </ul>		yes
<b>Separate Taxing Districts:</b> If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?		N/A
<b>Small Cities:</b> 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
<b>Operating Requests:</b> Is recommended operating funding less than or equal to 33% of total operating budget?		N/A
<b>IRS Exempt Proof:</b> Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?		yes
<b>Operating Budget:</b> Is the organization’s current fiscal year operating budget included?		yes
<b>Ordinance Required:</b> Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.		NO
<b>Board Members:</b> Is the entity’s board member list (with term length/term limits) included?		yes
<b>Staff:</b> Is a list of the highest paid staff included with their expected annual personnel costs?		yes
<b>Annual Audit:</b> Is the most recent annual audit (if required by organization) included?		yes
<b>Rent Requests:</b> Is a copy of signed lease included?		N/A
<b>Articles of Incorporation:</b> Are the Articles of Incorporation of the organization included?		yes
<b>IRS Form W-9:</b> Is the IRS Form W-9 included?		yes
<b>Evaluation Forms:</b> Are the evaluation forms (if program participants are given evaluation forms) included?		N/A
<b>Affirmative Action:</b> Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?		N/A
Prepared by: <i>Kudwa Ohmy</i>		Date: 12/18/2014





**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization: <b>Zion Community Development Cooperation</b> <i>(as listed on: <a href="http://www.sos.ky.gov/business/records">http://www.sos.ky.gov/business/records</a>)</i>			
Main Office Street & Mailing Address: <b>2200 W. Muhammad Ali Blvd.</b>			
Website: <b>www.zionlouisville.com</b>			
Applicant Contact:	<b>Billye Dean King</b>	Title:	<b>Academic Coordinator</b>
Phone:	<b>502-271-0914</b>	Email:	<b>billyedee@bellsouth.net</b>
Financial Contact:	<b>Yolanda Ballanger</b>	Title:	<b>Chair Person</b>
Phone:	<b>502-599-3690</b>	Email:	
Organization's Representative who attended NDF Training: <b>Billye D. King</b>			
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: <b>Russell Educational Academic Community Help (REACH)</b>			
Total Request: (\$)	<b>\$5,000.00</b>	Total Metro Award (this program) in previous year: (\$)	<b>\$0</b>
Purpose of Request (check all that apply):			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input checked="" type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current Year Projected Budget <input checked="" type="checkbox"/> List of Board of Directors (include term & term limits) <input checked="" type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense		<input type="checkbox"/> Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 <input type="checkbox"/> Evaluation forms if used in the proposed program <input type="checkbox"/> Annual audit (if required by organization) <input type="checkbox"/> Faith Based Organization Certification Form, if required <input type="checkbox"/> Staff including the 3 highest paid staff	
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.			
Source:	<b>N/A</b>	Amount: (\$)	<b>0</b>
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input type="radio"/> Yes <input checked="" type="radio"/> No			
Has the applicant met the BBB Charity Review Standards? <input type="radio"/> Yes <input checked="" type="radio"/> No			



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 3 – AGENCY DETAILS

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

Our vision is to equip every child with the academic ability to ( Explore The World Thru Reading). We also seek to provide each youth with the knowledge and competence to perform at their current grade level or above. We will provide a service that creates a spiral learning system for each grade level that supports and connects to the real world.

*BT*





## 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.):**

The program began in September 2014 and will continue throughout the summer with a break from July 3rd to the 2nd week in August. Refer to attached flyers.

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

The budget will be used to provide operating funds to establish programs, academic services, and to educate the community. In addition, technology, materials, and collaborating workshops will include parents, local school representatives, and the academic team. The funds will also be used to help complete the program and services needed by providing computers, printers, and academic supplies.

Handwritten initials "BK" in black ink, written over the "Applicant's Initials" label.



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

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

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

- ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
- ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.

The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:

- ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.

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

*BK*



**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	\$5000.00	\$875.00	\$5875.00
L: Other Expenses (Attach Detail List)			
<b>*TOTAL PROGRAM/PROJECT FUNDS</b>	\$5000.00	\$875.00	\$5875.00
<i>% of Program Budget</i>	85.1 %	14.9 %	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)	\$875.00
Fees Collected from Program Participants	
Other (please specify)	
<i>Total Revenue for Columns 2 Expenses **</i>	\$875.00 BK

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

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

*BK*





**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

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

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Zion Baptist Church	space	2200 W Muhammad Al
Business C.D.C Sponsor		
T. Roberson, M. Hazley, B.King	Teachers	6 to 10 hours per week
Volunteers	books and supplies	
<i>Total Value of In-Kind</i> (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)		

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

Agency Fiscal Year Start Date:

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

If YES, please explain:

Through project managements of fund raisers, in-kind donations, grants and volunteers, as well as an increase in student enrollment ;we anticipate a 60 percent increase in our budget for the next fiscal year.



**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

**SECTION 6 – CERTIFICATIONS & ASSURANCES**

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

**Standard Assurances**

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

**Standard Certifications**

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

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

n/a

**SECTION 7 – CERTIFICATIONS & ASSURANCES**

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

Signature of Legal Signatory:	<i>Billye D. King</i>	Date:	11/18/2014
Legal Signatory: (please print):	Billye D. King	Title:	Academic Coord.
Phone:	502-271-0914	Extension:	
Email:	billyedee@bellsouth.net		

Applicant's Initials *BK*

## GOALS FOR The Russell Educational Academic Community Help R.E.A.C.H. PROGRAM

The program's goal is to empower youth to understand their learning potential by internalizing their learning style.

Students will use different approaches to achieve mastery of various skills.

Students will use many approaches to integrate learning mastery.

Students will be encouraged to develop tactile, visual, cognitive, hands on and hypothesis to gain success.

Students will develop the necessary skills to integrate all learning to enhance and enrich other learning concepts in all academic areas.

### CONCEPTS TAUGHT

- WRITING
- READING
- MATH
- LIFE SKILLS
- SKILL PROCESSING, INTEGRATION
- TEST TAKING SKILLS
- COMMUNICATION
- TECHNOLOGY
- THE WRITING PROCESS
- ETIQUETTE



BUDGET ITIMIZED PROJECTED COST

COMPUTERS: ALL IN ONE (5) \$ 499.99 each- \$2,500.00

PRINTERS: ALL IN ONE (5) \$ 150.00 each \$750.00

LAPTOP: (2) \$ 400.00 each \$800.00

PROGRAM /SERVICES:

- SUPPLIES \$400.00
- 
- (2) BOOKSHELVES \$300.00
- 
- (3) BEAN BAGS \$150.00
- 
- (5) CHAIRS FOR COMPUTERS \$375.00
- 
- (2 ) DESKS \$600.00

TOTAL: \$ 5,875.00

# Annual Budget Overview

Budget Totals	Estimated	Actual	Difference
Total Income	\$520	\$520	\$0
Total Expenses	\$635	\$635	\$0
Difference	(\$115)	TRUE	\$115

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

DEPARTMENT OF THE TREASURY

Date: JUL 25 2003

ZION COMMUNITY DEVELOPMENT  
CORPORATION  
2200 MUHAMMAD ALI BLVD  
LOUISVILLE, KY 40212

Employer Identification Number:

DLN:

17053029045043

Contact Person:

ANDREA SPECK

ID# 95044

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Foundation Status Classification:

See addendum

Advance Ruling Period Begins:

November 12, 2002

Advance Ruling Period Ends:

December 31, 2006

Addendum Applies:

Yes

Dear Applicant:

Based on information you supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably expect to be a publicly supported organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, during an advance ruling period you will be treated as a publicly supported organization, and not, as a private foundation. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must send us the information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, we will classify you as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, we will classify you as a private foundation for future periods. Also, if we classify you as a private foundation, we will treat you as a private foundation from your beginning date for purposes of section 507(d) and 4940.

Grantors and contributors may rely on our determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you send us the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until we make

Letter 1045 (DO/CG)



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

DEPARTMENT OF THE TREASURY

Date:

MAR 21 2007

Employer Identification Number:

[REDACTED]

DLN:

17053048711077

ZION COMMUNITY DEVELOPMENT  
CORPORATION  
2201 MOHAMMAD ALI BLVD  
LOUISVILLE, KY 40212-0000

Contact Person:

SHAWNDEA KREBS

ID# 31072

Contact Telephone Number:

(877) 829-5500

Public Charity Status:

509(a)(2)

Dear Applicant:

Our letter dated July 2003, stated you would be exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, and you would be treated as a public charity, rather than as a private foundation, during an advance ruling period.

Based on the information you submitted, you are classified as a public charity under the Code section listed in the heading of this letter. Since your exempt status was not under consideration, you continue to be classified as an organization exempt from Federal income tax under section 501(c)(3) of the Code.

Publication 557, Tax-Exempt Status for Your Organization, provides detailed information about your rights and responsibilities as an exempt organization. You may request a copy by calling the toll-free number for forms, (800) 829-3676. Information is also available on our Internet Web Site at [www.irs.gov](http://www.irs.gov).

If you have general questions about exempt organizations, please call our toll-free number shown in the heading.

Please keep this letter in your permanent records.




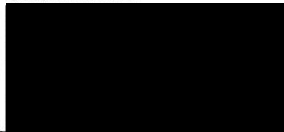
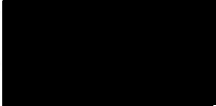


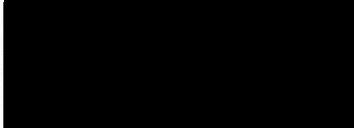


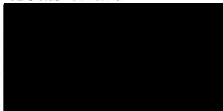
Sincerely yours,



Lois G. Lerner  
Director, Exempt Organizations  
Rulings and Agreements

Letter 1050 (DO/CG)

ZION COMMUNITY DEVELOPMENT CORPORATION BOARD

<b>Yolanda Ballanger</b> 	<b>Pandora Cooper</b> 	<b>A. Frazier Curry</b> 
<b>Jessie Daniels</b> 	<b>Rev. Gerald J. Joiner</b> 	<b>Tyrone King</b> 
<b>Lisa Locke</b> 	<b>Yvonne Parker</b> 	<b>Leonard Watkins</b> 
<b>Delores White</b> 	<b>Louis Willis</b> 	

Revised November 14, 2014

**Zion Community Development Corporation  
Annual 2014 Budget**

**Income**

Individual Donations	\$1,000.00
Interest Income	\$100.00
Investment Accounts	\$20,000.00

**Total** **\$21,100.00**

**Expenses**

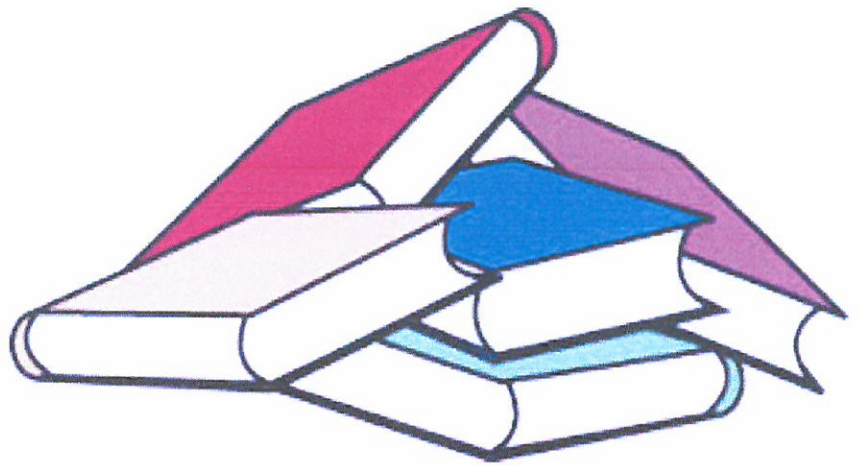
Telephone and Internet	\$2,000.00
Legal Fees	\$1,000.00
Property Taxes	\$1,500.00
Postage	\$100.00
Office Supplies & Equipment	\$800.00
Membership Fees	\$250.00
Courtesy	\$100.00
Liability Ins. Board	\$3,000.00
Utilities	\$350.00
Tax Prep. & Filing Fees	\$520.00
Property Purchase	\$10,000.00

**Total** **\$19,620.00**

**Net Income** **\$1,480.00**



# EXPLORE THE WORLD THRU READING



## R.E.A.C.H.

Russell Educational Academic Community Help

Tuesday: 5:00 P.M.- 7:00 P.M.  
Saturday: 10:00 A.M.-12:30 P.M.  
Location: Library (2<sup>nd</sup> Floor)  
2200 W. Muhammad Ali Blvd.

Ask for Mrs. B.D. King

(502) 271-0914/(502) 775-6405

**Zion Community Development Corporation**  
**General Ledger**  
 As of August 31, 2014

Name	Memo	Amount	Balance
<b>Republic Bank</b>			
	Beg. Balance		2,442.46
Cash	Board Retreat	-50.00	2,392.46
Yvonne Parker	Annual Report	-15.00	2,377.46
	Donation - Bd. Member	100.00	2,477.46
AT&T		-90.27	2,387.19
AT&T	UVerse	-48.00	2,339.19
	Service Charge	-3.00	2,336.19
Total Republic Bank		-106.27	<b>2,336.19</b>
<b>BB&amp;T - CD</b>			
			7,871.54
Total BB&T - CD			<b>7,871.54</b>
<b>Metro Bank CD</b>			
			5,439.53
Total Metro Bank CD			<b>5,439.53</b>
<b>PNC Bank</b>			
			1,300.00
Total PNC Bank			<b>1,300.00</b>
<b>Republic Bank MM CD</b>			
			2,043.26
	Service Charge	-3.00	2,040.26
	Interest	0.09	2,040.35
Total Republic Bank MM CD		-2.91	<b>2,040.35</b>
Total All Accounts			<b>18,987.61</b>

## Short Form Return of Organization Exempt From Income Tax

# 2013

**Open to Public Inspection**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ 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](http://www.irs.gov/form990).

Department of the Treasury  
Internal Revenue Service

<b>A</b> For the 2013 calendar year, or tax year beginning _____, and ending _____	
<b>B</b> Check if applicable:	<b>C</b> Name of organization
<input type="checkbox"/> Address change	ZION COMMUNITY DEVELOPMENT CORPORATION
<input type="checkbox"/> Name change	Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
<input type="checkbox"/> Initial return	2201 W MUHAMMAD ALI BLVD
<input type="checkbox"/> Terminated	City or town State ZIP code
<input type="checkbox"/> Amended return	LOUISVILLE KY 40212
<input type="checkbox"/> Application pending	Foreign country name Foreign province/state/county Foreign postal code
	<b>D</b> Employer identification number
	[REDACTED]
	<b>E</b> Telephone number
	(502) 775-6404
	<b>F</b> Group Exemption Number ▶
<b>G</b> Accounting Method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ▶ _____	<b>H</b> Check <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).
<b>I</b> Website: ▶ N/A	
<b>J</b> Tax-exempt status (check only one) — <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	
<b>L</b> 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 . . . . . ▶ \$ 330,000	

**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

	Description	Line	Amount
<b>Revenue</b>	1 Contributions, gifts, grants, and similar amounts received . . . . .	1	250
	2 Program service revenue including government fees and contracts . . . . .	2	
	3 Membership dues and assessments . . . . .	3	
	4 Investment income . . . . .	4	80
	5a Gross amount from sale of assets other than inventory . . . . .	5a	
	b Less: cost or other basis and sales expenses . . . . .	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000) . . . . .	6a	
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . . .	6b	
c Less: direct expenses from gaming and fundraising events . . . . .	6c		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) . . . . .	6d		
7a Gross sales of inventory, less returns and allowances . . . . .	7a		
b Less: cost of goods sold . . . . .	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	7c		
8 Other revenue (describe in Schedule O) . . . . .	8		
9 <b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . . . ▶	9	330,000	
<b>Expenses</b>	10 Grants and similar amounts paid (list in Schedule O) . . . . .	10	
	11 Benefits paid to or for members . . . . .	11	
	12 Salaries, other compensation, and employee benefits . . . . .	12	
	13 Professional fees and other payments to independent contractors . . . . .	13	44
	14 Occupancy, rent, utilities, and maintenance . . . . .	14	
	15 Printing, publications, postage, and shipping . . . . .	15	
	16 Other expenses (describe in Schedule O) . . . . .	16	12,000
	17 <b>Total expenses.</b> Add lines 10 through 16 . . . . . ▶	17	12,500
<b>Net Assets</b>	18 Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	18	-12,200
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .	19	134,500
	20 Other changes in net assets or fund balances (explain in Schedule O) . . . . .	20	
	21 <b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20 . . . . . ▶	21	122,300







**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.

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O.		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions).		X
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O.		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III.		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N.		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions. <input type="text" value="37a"/>		
b	Did the organization file Form 1120-POL for this year?		
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved. <input type="text" value="38b"/>		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9. <input type="text" value="39a"/>		
b	Gross receipts, included on line 9, for public use of club facilities. <input type="text" value="39b"/>		
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <input type="text"/> ; section 4912 <input type="text"/> ; section 4955 <input type="text"/>		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.		X
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. <input type="text"/>		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. <input type="text"/>		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.		X
41	List the states with which a copy of this return is filed. <input type="text"/>		
42 a	The organization's books are in care of <input type="text" value="YALONDA BALLENGER"/> Telephone no. <input type="text" value="(502) 599-3690"/> Located at <input type="text" value="2201 W MUHAMMAD ALI BLVD"/> City <input type="text" value="LOUISVILLE"/> ST <input type="text" value="KY"/> ZIP + 4 <input type="text" value="40212"/>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: <input type="text"/>		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year. <input type="text" value="43"/>		
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ.		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ.		X
c	Did the organization receive any payments for indoor tanning services during the year?		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions).		X

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.
49 a 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 and 4947(a)(1) nonexempt charitable trusts 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: Signature of officer, Date, Type or print name and title

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Check [X] if self-employed, PTIN, Firm's name, Firm's address, Firm's EIN, Phone no.

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

D.C.

FILED IN OFFICE

DEC 09 2002

0547895.09

PBlevins  
NAOI

John Y. Brown III  
Secretary of State  
Received and Filed

11/12/2002 09:29 AM

Fee Receipt: \$8.00

ARTICLES OF INCORPORATION  
OF

ZION COMMUNITY DEVELOPMENT CORPORATION

Bobbie Holsclaw, Clerk

By \_\_\_\_\_ D.C.

WE, THE UNDERSIGNED, having associated for the purposes of forming a non-profit, not-stock corporation, under and pursuant to the laws of the Commonwealth of Kentucky, and more particularly Kentucky Revised Statutes, Chapter 273, hereby certify as follows:

ARTICLE I

Name

The Corporation shall be named and known as Zion Community Development Corporation.

ARTICLE II

Duration

The duration of the Corporation shall be perpetual.

ARTICLE III

Purpose

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

More specifically stated, to promote, on a non-profit educational and charitable basis, the economic and community development of economically deprived communities in Louisville, Kentucky by:

- a. Providing educational and training programs including but not limited to resource, organizational, and management development to promote entrepreneurial initiatives within targeted communities.
- b. Designing and engaging in economic, business, and community development, employment, and housing initiatives.

## ARTICLE IV

### Office and Registered Agent

The name and address of the registered agent of the Corporation for service of process, and the address of the registered office of the Corporation in this state, until changed by action of the Board of Directors, shall be:

H.D. Cockerham  
2200 W. Muhammad Ali Blvd.  
Louisville, KY 40212

The place of business of the corporation is 2200 W. Muhammad Ali Blvd., Louisville, Kentucky 40212.

## ARTICLE V

### Non-profit Nature

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

## ARTICLE VI

### Powers and Limitations

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

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

c) If and so long as the Corporation is a private foundation as defined in Section 409(a) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

- 1) The Corporation shall distribute its income for each taxable year at such time and in such manner as not to become subject to the tax on undistributed income imposed by Section 4942 of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws:
- 2) The Corporation shall not engage in any act or self dealing as defined in Section 4941(d) of the Internal Revenue Code 1954, or corresponding provisions of any later Federal tax laws.
- 3) The Corporation shall not retain any excess business holdings as defined in Section 4943(c) of the Internal Revenue Code of 1984, or corresponding provisions of any later Federal tax laws.
- 4) The Corporation shall not make any investments in such manner as to subject it to tax under Section 4944 of the Internal Revenue Code of 1954, or corresponding of any later Federal tax laws.
- 5) The Corporation shall not make any taxable expenditures as defined in Section 4945(d) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

## ARTICLE VII

### Incorporator

The names and addresses of the incorporators are as follows:

Rev. H. Donald Cockerham	Mr. Donald Littlejohn	Ms. Yolanda Ballanger
1005 South Western Parkway	313 Moser Road	700 South 31 <sup>st</sup> Street
Louisville, Kentucky 40211	Louisville, Kentucky 40223	Louisville, Kentucky 40211



## ARTICLE VIII

### Initial Board of Directors

The initial Board of Directors shall be comprised of nine (9) to twenty-one (21) members.

The names, addresses, and place of business of the initial Board of Directors and the principal office is as follows:

H. Donald Cockerham  
1005 So. Western Parkway  
Louisville, KY 40211

Donald Littlejohn  
313 Moser Road  
Louisville, KY 40223

Yvonne Parker  
3113 Kaye Lawn Drive  
Louisville, KY 40220

Linda Mitchell  
1381 So. Third Street  
Louisville, KY 40208

Michael Frank  
2125 Allston Avenue  
Louisville, KY 40210

Earl Beason  
3533 Algonquin Parkway  
Louisville, KY 40211

Tyrone King  
3225 Broeck Point Circle  
Louisville, KY 40241

Patricia Adams  
4123 Mimosa View Drive  
Louisville, KY 40299

Joe Greer  
8600 Banbridge Road  
Louisville, KY 40242

Ledita Howard  
2618 Oregon Avenue  
Louisville, KY 40210

A. Frazier Curry  
2209 High Pine Drive  
Louisville, KY 40214

Yolanda Ballanger  
700 So. 31<sup>st</sup> Street  
Louisville, KY 40211

Deloris White  
1030 Southwestern Pkwy.  
Louisville, KY 40211

Leon Larue  
1015 Southwestern Pkwy.  
Louisville, KY 40211

Morris Hansberry, Jr.  
1109 Southwestern Pkwy.  
Louisville, KY 40211

They shall serve a three (3) year period from the filing of these Articles of Incorporation or until the Board of Directors under Article X, are elected.

## ARTICLE IX

### By-Laws

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

- c) If and so long as the Corporation is a private foundation as defined in Section 409(a) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.
- 1) The Corporation shall distribute its income for each taxable year at such time and in such manner as not to become subject to the tax on undistributed income imposed by Section 4942 of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws:
  - 2) The Corporation shall not engage in any act or self dealing as defined in Section 4941(d) of the Internal Revenue Code 1954, or corresponding provisions of any later Federal tax laws.
  - 3) The Corporation shall not retain any excess business holdings as defined in Section 4943(c) of the Internal Revenue Code of 1984, or corresponding provisions of any later Federal tax laws.
  - 4) The Corporation shall not make any investments in such manner as to subject it to tax under Section 4944 of the Internal Revenue Code of 1954, or corresponding of any later Federal tax laws.
  - 5) The Corporation shall not make any taxable expenditures as defined in Section 4945(d) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

## ARTICLE VII

### Incorporator

The names and addresses of the incorporators are as follows:

Rev. H. Donald Cockerham 1005 South Western Parkway Louisville, Kentucky 40211	Mr. Donald Littlejohn 313 Moser Road Louisville, Kentucky 40223	Ms. Yolanda Ballanger 700 South 31 <sup>st</sup> Street Louisville, Kentucky 40211
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## ARTICLE X

### Board of Directors

The Corporation shall have general members and the affairs and the business of the Corporation shall be conducted by the Board of ten (10) to eighteen (18) Directors. The election or appointment of the Directors shall be pursuant to the By-Laws adopted by the initial Directors.

## ARTICLE XI

### No Personal Liability

The Officers and Directors of the Corporation shall not be held personally liable for any debt or obligation of the Corporation solely because of their position as Officers and Directors of the Corporation.

## ARTICLE XII

### Dissolution

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

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

## ARTICLE XIII

### Amendments

These Articles of Incorporation may be amended from time to time by Resolution of the Board of Directors.







## ZION COMMUNITY DEVELOPMENT CORPORATION OFFICERS

Chairperson..... Yolanda Ballanger  
 Vice Chairperson ..... A. Frazier Curry  
 Secretary..... Yvonne Parker  
 Treasurer ..... A. Frazier Curry

### TERMS OF APPOINTMENTS

NAME	TERM APPOINTMENT DATE	TERM EXPIRATION DATE
Yolanda Ballanger	January 1, 2015	December 31, 2019
Pandora Cooper	January 1, 2015	December 31, 2017
A. Frazier Curry	January 1, 2015	December 31, 2018
Jessie Daniels	January 1, 2015	December 31, 2017
Rev. Gerald J. Joiner	January 1, 2015	December 31, 2018
Tyrone King	January 1, 2015	December 31, 2017
Lisa Locke	January 1, 2015	December 31, 2019
Yvonne Parker	January 1, 2015	December 31, 2018
Leonard Watkins	January 1, 2015	December 31, 2019
Delores White	January 1, 2015	December 31, 2018
Louis Willis	January 1, 2015	December 31, 2018
VACANCY	January 1, 2015	December 31, 2017
VACANCY	January 1, 2015	December 31, 2017

Revised 11/4/14

## ZION COMMUNITY DEVELOPMENT CORPORATION

### General Information

<b>Organization Number</b>	0547895
<b>Name</b>	ZION COMMUNITY DEVELOPMENT CORPORATION
<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>	11/12/2002
<b>Organization Date</b>	11/12/2002
<b>Last Annual Report</b>	6/3/2014
<b>Principal Office</b>	2200 W MUHAMMAD ALI BLVD LOUISVILLE, KY 40212
<b>Registered Agent</b>	GERALD J. JOINER 2201 W. MUHAMMAD ALI BLVD LOUISVILLE, KY 40212

### Current Officers

<b>President</b>	<a href="#">Yolanda Ballanger</a>
<b>Vice President</b>	<a href="#">A Frazier Curry</a>
<b>Secretary</b>	<a href="#">Yvonne Parker</a>
<b>Treasurer</b>	<a href="#">A. FRAZIER CURRY</a>
<b>Director</b>	<a href="#">LEONARD WATKINS</a>
<b>Director</b>	<a href="#">Tyrone King</a>
<b>Director</b>	<a href="#">LOUIS WILLIS</a>
<b>Director</b>	<a href="#">GERALD J JOINER</a>

### Individuals / Entities listed at time of formation

<b>Director</b>	<a href="#">H. DONALD COCKERHAM</a>
<b>Director</b>	<a href="#">LINDA MITCHELL</a>
<b>Director</b>	<a href="#">TYRONE KING</a>
<b>Director</b>	<a href="#">LEDITA HOWARD</a>
<b>Director</b>	<a href="#">DELORIS WHITE</a>
<b>Director</b>	<a href="#">DONALD LITTLEJOHN</a>
<b>Director</b>	<a href="#">MICHAEL FRANK</a>
<b>Director</b>	<a href="#">PATRICIA ADAMS</a>
<b>Incorporator</b>	<a href="#">REV. H. DONALD COCKERHAM</a>
<b>Incorporator</b>	<a href="#">MR. DONALD LITTLEJOHN</a>
<b>Incorporator</b>	<a href="#">MS. YOLANDA BALLANGER</a>

### Images available online

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

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

**Legal Name of Applicant Organization:**  
Zion Community Development Cooperation

As in the case of all legislative enactments, the appropriation must be for a public purpose. In other words, the appropriation must have a secular legislative purpose to support a program which benefits the public, and which has been, or could be undertaken by the government.

The appropriation must be totally and demonstrably earmarked for the beneficiary activity or program with no tangible or significantly intangible benefit inuring to the organization. Specifically, the appropriation may not fund equipment used by the organization, nor may it be used for improvements to real or personal property owned by the grantee church or organization.

The beneficiary activity or program must be open to the public as opposed to being restricted to church or organization members or affiliates.

The grantee church or organization may not use public funds in any way that involves worship, religious instruction, or religious practice.

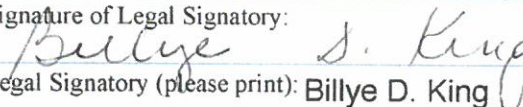
Public funds involved in the grant may not be used to support a school or any program of instruction operated by the grantee church or organization, or in its name.

The grantee organization may not use public funds in any way that involves proselytization or self-promotion of the organization.

The grantee church or organization must establish and maintain a system of recordkeeping which clearly and completely documents its use of the public funds involved in the grant.

**SIGNATURE**

I agree under the penalty of law to comply with all the items in this disclosure. 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 disclosure for the applying organization.

Signature of Legal Signatory:   
Legal Signatory (please print): Billye D. King

Date: 11/18/2014

Title: Academic Coordinator

Phone: 502-271-0914      Extension:

Email: billyedee@bellsouth.net



## 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>Zion Community Development Corporation</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 checked="" 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 type="checkbox"/> Other (see instructions) ▶ _____	
	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) _____ <i>(Applies to accounts maintained outside the U.S.)</i>	
	5 Address (number, street, and apt. or suite no.) <b>2201 W. Muhammad Ali Blvd</b>	Requester's name and address (optional)
	6 City, state, and ZIP code <b>Louisville Ky 40212</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 border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; height: 20px;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>									<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; height: 20px;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>								
or																	
<b>Employer identification number</b>																	

**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 ▶ <b>Yolanda Ballanger Chairperson</b>	Date ▶ <b>1-11-15</b>
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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 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

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

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