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



Applicant/Program: City of Hurstbourne/Sidewalk and Ramp ADA Compliance Improvements					
Executive Summary of Request:					
This project is for the City of Hurstbourne sidewalk and ADA compliant ramp improvements program that started in 2011 with inventories and evaluations. This phase will provide sidewalk and ramp ADA required improvements.					
Is this program/project a fundraiser? Is this applicant a faith based organization? Does this application include funding for sub-grantee(s)? Yes X No Yes X 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. District # Primary Sponsor Signature Primary Sponsor Signature					
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. There are no personal or business relationships with the applicant.					
Approved by:					
Appropriations Committee Chairman Date					
Clerk's Office Only:					
Request Amount: Committee Amended Appropriation:					
Original Appropriation: Council Amended Appropriation:					

REVIEWED

1|Page Effective February 2014

DATE \$ 12-14 TIME 3:23pm



SECTION 1 – APPLICANT INFORMATION					
Legal Name of Applica	nt Orgar	nization: City C	of Huretho	urno	
(as listed on: http://www.so	s.kv.gov/b	usiness/records) City C	of Hurstbo	urre	
Main Office Street & N	Aailing A	ddress: 304 Whittington	Parkway		
Website: www.hurstbo	urne.org				
Applicant Contact:	Mr. Jin	n Leidgen	Title:	City Manager/Administrator	
Phone:	(502) 4	126-4808	Email:	jim@hurstbourne.org	
Financial Contact:	Ms. Tr	isha Sikkema	Title:	Accountant	
Phone:	(502)	126-4808	Email:	trisha@hurstbourne.org	
Organization's Repres	entative	who attended NDF Train	ing: Mr. Jim Leidge	en	
GEOG	RAPHICA	AL AREA(S) WHERE PROG	RAM ACTIVITIES AR	E (WILL BE) PROVIDED	
Program Facility Locat	ion(s):	Colonel Anderson Pa	rkway		
Council District(s):		18	Zip Code(s):	40222	
	SECT	ION 2 – PROGRAM REQL	est & financial in	FORMATION	
PROGRAM/PROJECT N	IAME:				
Total Request: (\$)	30,000	Total Metro A	ward (this program)	in previous year: (\$) 30,000	
Purpose of Request (c	neck all 1	that apply):			
Operating Fu	nds (ger	nerally cannot exceed 33%	6 of age ncy's total օր	perating budget)	
Programmin	g/service	es/events for direct benef	it to community or o	qualified individuals	
Capital Proje	ct of the	organization (equipment	, furnishing, building	g, etc)	
The Following are Req	uired At	tachments:			
IRS Exempt Status Det			Signed lease if re	nt costs are being requested	
Current Year Projecte	-		IRS Form W9		
List of Board of Direct	· ·	de term & term limits		if used in the proposed program	
Current financial state			I —	equired by organization)	
Most recent IRS Form Articles of Incorporati		120-Н	1 ····	nization Certification Form, if required	
Cost estimates from p		vendor if request is for	Staff including th	ne 3 highest paid staff	
capital expense					
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro					
Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional					
sheet if necessary.					
Source:			Amount: (\$)		
Source: Amount: (\$)					
Source:			Amount: (\$)		
Has the applicant contacted the BBB Charity Review for participation? Yes No					
Has the applicant met the BBB Charity Review Standards? Yes No					

Page 1 Effective April 2014

Applicant's Initials __



SECTION 3 AGENCY DETAILS
Describe Agency's Vision, Mission and Services:
The City of Hurstbourne's goal is to make the "City" a "walkable" community, allowing residents to "connect" to other portions of the City, and ensure that people with disabilities may also utilize the sidewalks.
3

Page 2 Effective April 2014 Applicant's Madeis #



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.): This project is Phase IV for the City of Hurstbourne Improvements Program that started in 2011 with inventories and evaluations. This phase will provide sidewalk and ramp improvements along Colonel Anderson Parkway and will be completed in the fall of 2014. The project will take approximately 90 calendar days. 8. Describe specifically how the funding will be spent including identification of funding to sub grantee(s): The funding will allow the City of Hurstbourne to construct handicap ramps and sidewalk improvements along Colonel Anderson Parkway. Phase IV engineer's estimate is \$40,389.00

Page 3 Effective April 2014 Applicant's Initials



C: If this request is a fundraiser, please detail how the proceeds will be spent: N/A
D: For Expenditure Reimbursement Only — The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances: ☐ 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 under 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, our 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.
Page 4 Ellective April 2014 Applicant's Initials



E: Describe the program's benefits to those being served (measurable outcomes). Include process for collecting data and the indicators that will be tracked to measure the benefits. The improvement of handicap ramps and sidewalks within the City of I allow padestrians (including the disabled) to utilize the sidewalks to corresidential areas to commercial areas within the City. These improver "enhance the quality of life" for residents and visitors within the City. I numerour calls related to ramp and sidewalk improvements on a regulated audit performed in 2011 helped to priortize areas of need.	to those being served: Hurstbourne will nnect from nents will he City receives
F. Exicity describe any calating collaborative relationships the organization has with our organizations. Describe what those partners are bringing to the relationship in general as program/project specifically. N/A	

Page 5 Effective April 2014 Applicant's Initials #



SECTION 5 - PROGRAM/PROJECT BUDGET SUMMARY

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

	Column 1	Column 2	Column (1+2)=3
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits		31	
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	\$30,000	\$10,389	\$40,389
K: Capital Equipment			
L: Other Expenses (Attach Detail List)	\$30,000	\$10,389	\$40,389
*TOTAL PROGRAM/PROJECT FUNDS			
Sof Program Dissect	74.3 %	25.7 %	100%

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

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	
Fees Collected from Program Participants	
Other (please specify)	\$10,389
Total Revenue for Columns 2 Expenses **	\$10,389

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

Page 6
Effective April 2014

Applicant's Initials

^{**}Must equal or exceed total in column 2.



Detail of In-Kind Contributions for this PROGRAM only: Includes Volunteers, Space, Utilities, etc. (Include anything not bought with cash revenues of the agency). Donar 1 Type of Contribution Value of Contribution Method of Valuation N/A Total Value of in-Kind (to match Program Budget Line item. Volunteer Contribution & Other In Kind) * DONOR (MADRIMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION, VOLUNTEERS REED NOT BE LISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NOTING HOW MANY HOURS PER PERSON PER WEEK Agency Fiscal Year Start Date: July 1, 2014 Does your Agency anticipate a 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:

Page 7

inginamis initials for



SECTION 6 - CERTIFICATIONS & ASSURANCES

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

Standard Assurances

- Applicant sinders with this application and its attachments as well as any resulting great agreement, reports and proof of expenditure is subject to Kentucky's open records law.
- Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using
 their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal
 solo.
- 3. Applicant and any sub-grantoe 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 district.
- 4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
- The Agency is to good standing with the Kentucky Secretary of State, Louisville Metro Generoment, the Jufferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
- Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
- Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal
 year and
- Applicant understands they must provide proof of all expenditures (concelled theols, research, wild involved). The Applicant
 understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld
 as expect to be returned if previously distanced.
- 9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approved date, and will end with Jude 30 of the Issael 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 compilent 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 reimburied, as the Council may also se not to award the application.
- 11. Applicant understands if the grant agreement is not returned to Louisville Metro within \$3 days of its minding to the applicant, the

Standard Certifications

- 1. The Agency sertifies it will not use Louisville Metro Government funds for any rollgious, political or fraternal Activities.
- 2. The Agency has a written Affirmative Action/Equal Opportunity Policy.
- The Agency does not a scriminate in employment or in provision of any service/program/activity/exent based on age, color, disabled status, national union, race, resignon, sex, gender identity or sexual prientation, or Vietnam era veceran scalus.
- The Agency certifies it will not require clients, recipients, or beneficiaries to participate in religious, political, fraternal or like accessors of the contents on states accessors accessors with somewhat recent do recovers famous
- 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.

CEPTION T. PERTICIPATIONS & ACCUMANATE

I certify under the penelty 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 faisification. If faisification 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 outhorized to signatify application for the applying organization and have initiated each page of the application.					
Signature of Legal Signatory:	of light	Date: 7/24/14			
Legal Signatory: (please print):	James Wordson	Thile: 6, A.O.			
Phone: 502 426-4808 Ex	itension: / Email:	Tin@hvLsTbarerer			

Page 8

Effective April 2014

Applicant's initials FEC

City of Hurstbourne ADA Ramps Improvement Project - FY2014-15 OPTIONS FOR PHASE 4 - ADJUSTED TO BUDGET



Engineer's Estimate

Colonel Anderson Parkway - Sidewalk & Ramp Improvements

	Description	#Panels	S.F.	Quantity	Unit	\$/Unit	Cost
1	Sidewaiks (Demo & Instati)	140	3500	389	S.Y.	\$55	\$21,389
5	Pagring te/Tachle			35	Ench	8700	\$15,400
3	Tactile Strip on Existing			0	Each	\$450	\$0
4	Adjust Utilities to Grade			6	Each	\$350	\$2,100
5	Topsoil/Seed & Straw			1	LS	\$1,500	\$1,500
					Estimat	ed Cost	\$40,389

Total Cost \$40.389



July 2014

pl

CITY OF HURSTBOURNE, KENTUCKY ORDINANCE NO. 14-04

AN ORDINANCE ADOPTING AN ANNUAL BUDGET FOR THE CITY OF HURSTBOURNE FOR THE FISCAL YEAR JULY 1, 2014 TO JUNE 30, 2015 BY ESTIMATING REVENUES AND RESOURCES AND APPROPRIATING FUNDS FOR THE OPERATION OF CITY GOVERNMENT

WHEREAS, an annual budget proposal has been prepared and delivered to the City Commission; and

WHEREAS, the City Commission has reviewed said budget proposal and made necessary modifications in public session, now, therefore, BE IT ORDAINED BY THE CITY OF HURSTBOURNE:

Section 1: That the annual budget for the fiscal year ending June 30, 2015, is hereby adopted as follows:

Resources Available:	General Fund	Road Fund	TOTAL
Prior Yr. Carry-Forward & Fund	s Appropriations \$318,340	\$0	\$318,340
REVENUES: State Road Fund Property Taxes Interest and Penalties Insurance Premium Tax Cable Franchise Fees Bank Deposit Tax Sign Fees Alcohol Beverage Fees Home Occupation Fees Business License Fees Coal/Mineral Tax Interest General Fund Miscellaneous Income	\$1,140,000 \$5,000 \$600,000 \$25,000 \$62,000 \$6,500 \$20,000 \$1,000 \$10,000 \$500 \$25,000	\$98,000 \$98,000	\$98,000 \$1,140,000 \$5,000 \$600,000 \$25,000 \$6,500 \$20,000 \$1,000 \$10,000 \$500 \$25,000 \$1,998,000
Subtotal Revenues Property Tax Discounts	\$1,900,000 (\$55,000)	\$0	(\$55,000)
TOTAL REVENUES	\$1,845,000	\$98,000	\$1,943,000
Total Resources available for Appropriations	\$2,163,340	\$98,000	\$2,261,340
APPROPRIATIONS: General Government Public Works Public Safety Sanitation-Code Enforcement	\$520,840 \$961,000 \$250,000 \$431,500	\$98,000	\$520,840 \$1,059,000 \$250,000 \$431,500
TOTAL APPROPRIATIONS	\$2,163,340	\$98,000	\$2,261,340

Section 2: This Ordinance shall take effect upon passage and publication.

First Reading held on:

Tuesday, June 10, 2014 Tuesday, June 24, 2014

Passed and Approved on:

Attest: Robert English, Mayor James E. Leidgen, City Clerk



4-7-21/16:00

Was.

Independent Auditor's Report

To the Mayor and Members of the City Commission City of Hurstbourne, Kentucky

Report on the Financial Statements

We have audited the accompanying financial statements of the governmental activities and each major fund of the City of Hurstbourne, Kentucky, as of and for the year ended June 30, 2013, and the related notes to the financial statements, which collectively comprise the City's basic financial statements as listed in the table of contents.

Management's Responsibility for the Financial Statements

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

Auditor Responsibility

Our responsibility is to express opinions on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

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

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

Opinions

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the governmental activities and each major fund of the City of Hurstbourne, Kentucky, as of June 30, 2013, and the respective changes in financial position for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Other Matters

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis and budgetary comparison information on pages 3 through 7 and 25 through 29 be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

Other Reporting Required by Government Auditing Standards

In accordance with Government Auditing Standards, we have also issued our report dated December 10, 2013, on our consideration of the City of Hurstbourne, Kentucky's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards in considering the City of Hurstbourne, Kentucky's internal control over financial reporting on compliance.

Stephens & Lawson, CPAs

Louisville, Kentucky December 10, 2013

City of Hurstbourne

Municipal Order 14-01

(RELATING TO APPOINTING THE SUPERINTENDENTS FOR CITY DEPARTMENTS)

WHEREAS, KRS 83A.140(6) requires the formal designation of superintendents over City Departments at the first meeting of each year; and,

NOW THEREFORE, BE IT ORDERED BY THE HURSTBOURNE CITY COMMISSION

The following superintendent assignments are made for: Calendar Year 2014.

General Government Ed Dahlem

Public Safety Earl Hubbuch

Public Works Lois Wagner

Sanitation/Code Enforcement Ben Jackson

Section 2: Each of the Department superintendents shall serve as the Chairperson of their respective Department Executive Committee.

Section 3: This Municipal Order shall be in effect from and after its adoption by the City Commission.

Adopted at a Regular Meeting of the Hurstbourne City Commission held on Add 1 442, 2014.

APPROVED:

Bob English, Mayor

Date: 11414

Date: 1-14-14

Form W-9

Request for Taxpayer

Give form to the

Departmen	ober 2007) t of the Tressury	Identification Numb	er and Certification	send to the IRS.
	venue Service Vame (as shown	on your income tax return)		
oi	C_{ij}	4 OF HURSTBOURNE	-	
e.Bad		different from above		
8 _	6			
	Charle entermist	box: Individual/Sole proprietor Corporation	n D Pertnership	
88		ty company. Enter the tax classification (Declaregarded		Exempt
Print or type Specific Instructions	Other (see insti	uctions) >		
II I		, street, and apt. or suite no.)	l .	r's name and address (optional)
<u>a</u> 5	304 W	HITTINGTON PARKWAY,	TE 100	
2	City, state, and Z	IP code	1	
န္မ 📗	Louis	VILLE, KY 4022Z ber(a) here (optional)		
88	List account num	ber(s) here (optional)		
- 1				
Part	Taxpay	er Identification Number (TIN)		
F-1	Tibl in the a	ppropriate box. The TIN provided must match the	nume given on Line 1 to avoid	Social security number
hackup	withholding, Fo	y individuals. This is your social security number ((SSN). However, for a resident	
allen so	de proprietor, o	r disregarded entity, see the Part I Instructions of	n page 3. For other entities, it is	gr
		etion number (EIN). If you do not have a number,		Employer Identification number
Note. If	the account is to enter.	in more than one name, see the chart on page 4	for guidelines on whose	61 1609697
74-77		ation.		
Part.				
		ury, I certify that:	and the last welling for a mi	ember to be legued to make start
1. The	number abowr	on this form is my correct tempayer identification backup withholding because: (a) I am exampt for	number for 1 am waiting for a 11.	minutes to be assess to tries, and
Rev	enua Service (I	osciup withouring because; (a) I am examplim RS) that I am subject to backup withholding as a in no longer subject to backup withholding, and	result of a failure to report all into	erest or dividends, or (c) the IRS has
3. Ian	a U.S. ottizen	or other U.S. person (defined below).		
Withhole For more	ding because y rtgage interest ment (IRA), and	ons. You must cross out item 2 above if you have been a report all interest and dividends paid, acquisition or abandonment of secured projected generally, payments other than interest and divide. See the instructures on page 4.	on your tax retum, For real estat party, cancalistion of debt. contri	e transactions, item 2 does not apply. butions to an individual ratirement
Sign Here	Signature o		Data ►	5-14-14
Gen	eral instr	uctions	Definition of a U.S. perso	on, For federal tax purposes, you ar
		e to the Internal Revenue Code unless	secsidered a U.S. person if	
	ise noted.	w np w ne prayers man 1 september 2 m m m m m m m m m m m m m m m m m m		S. citizen or U.S. resident alien, on, company, or association created o
Puro	ose of Fo	m	organized in the United Sta	ates or under the laws of the United

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

Use Form W-8 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

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

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

- · An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section) 301.7701-7).

301.7701-7).

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

The person who gives from W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

o The U.S. owner of a disregarded entity and not the entity,

Hurstbourne, Kentucky

Kentucky Secretary of State

Printable Version

Search Again

Class:

Status: Incorporated: Active

1982-08-12

County:

Jefferson

There are no pictures for Hurstbourne, Kentucky. Post one on our website today. Click Here.

Area Development County Seat

KIPDA No

Interactive Map

(Courtesy Kentucky Geography Network)

Notes: 1980 population: 3,530

Links:

ADD Website

County Website

Mayor

Robert English

Meeting Times:

2nd & 4th Tue 4:30pm Office Hours: Mon-Fri 9:00am-5:00pm

Website:

www.hurstbourne.org

Population Estimates:

1990: 4412

1991: 4501

1992: 4607

1993: 4640

1994: 4639

1995: 4638

1996: 4616

1997: 4614

1998: 4624

1999: 4739

*Compiled by the Ky. State Data Center. Population Estimates may change as city boundaries are adjusted.

Current Filings (KRS 81 045 to present date)

Date Filed	Туре	Ordinance	Map Status	Notes
2014- 07-28	Declaration	pursuant to HB 331 (2014)		Acknowledgment of Reclassification (Home Rule), Statement of Form of Government (Mayor- Commission), Name of City, & Year of Incorporation
2000- 12-27	Resignation & Appointment			City Commissioner
2000- 04-27	Appointment			City Commissioner
1983 - 05-26	Census			Population: 3,530 (1980)
1983- 01-26	Annexation	Ord. #8, Series FYE1983	MAPPABLE	
1982- 09-15	Incorporation	82-CI-00902	MAPPABLE	Jefferson Circuit Court Judgment

City of Hurstbourne

1. List of Hurstbourne City Commissioners with term and term limits for each one.

Bob English, Mayor – 4 years – Ending December 31, 2014 Ed Dahlem, Commissioner – 2 years – Ending December 31, 2014 Lois Wagner, Commissioner – 2 years – Ending December 31, 2014 Earl Hubbuch, Commissioner – 2 years – Ending December 31, 2014 Ben Jackson, Commissioner – 2 years – Ending December 31, 2014

2. List of the three highest paid staff.

Staff of only two:

Jim Leidgen, City Administrative Officer Victoria Lemke, Administrative Assistant

Jim Leidgen City Administrative Officer

NDF NON-PROFIT APPLICATION CHECKLIST				
Legal Name of Applicant Organization: City of Hurstbour ne				
Program Name: Request Amount \$30,000.	Yes/No/NA			
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?	Yes_			
Request form: Is the funding proposed less than or equal to the request amount?				
Request form: Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?				
Application Page 1: Has prior Metro funds committed/granted been disclosed?	N/A			
Application Page 1: Is the application properly signed and dated by authorized signatory?				
Application Page 3: Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?				
Application Pages 3 – 5: Is the proposed public purpose of the program well-documented?				
Application 4: Is there adequate documentation of how the proceeds of the fundraiser will be spent?				
Application Budget Page 6: Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for "Metro, Non Metro and Total" expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?				
Faith Based Organizations: Is the signed Faith Based Form signed and included?	N/A			
Jefferson County Only: Will all funding be spent in Louisville/Jefferson County?	Yes Yes			
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?				
Good Standing: Is the entity in good standing with: • Kentucky Secretary of State – include Secretary of State website information on organization • Louisville Metro Government – check OMB monthly report filed in Council Financial Reports • Internal Revenue Service – most recent Form 990 included	Yes			
Separate Taxing Districts: If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?				
Small Cities: Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)				
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?				
IRS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?				
Operating Budget: Is the organization's current fiscal year operating budget included?				
Ordinance Required: Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.				
Board Members: Is the entity's board member list (with term length/term limits) included?	Ye5			
Staff: Is a list of the highest paid staff included with their expected annual personnel costs?				
Annual Audit: Is the most recent annual audit (if required by organization) included?				
Rent Requests: Is a copy of signed lease included?				
Articles of Incorporation: Are the Articles of Incorporation of the organization included?	409			
IRS Form W-9: Is the IRS Form W-9 included?				
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?				
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?				
Prepared by: Date: 8/4/14				