

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

**Applicant/Program:** Arbor Creek, Section 2 Condominiums Council of Co-Owners, Inc.  
**Applicant Requested Amount:** \$36,250  
**Appropriation Request Amount:** \$36,250

**Executive Summary of Request**  
Funding will be used to pave Arbor Manor Way, Arbor Brook Lane and Arbor Falls Dr. These roads never received a final coat by the developer who went bankrupt. Residents have been living here for approximately 15 years with poor quality roads which continue to deteriorate. The Condo Association is matching these funds.

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

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

23 District #      [Signature] Primary Sponsor Signature      \$ 36,250 Amount      7/16/19 Date

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

Approved by: [Signature]      8-14-19 Date  
Appropriations Committee Chairman  
Final Appropriations Amount: \_\_\_\_\_

**Applicant/Program:**

**Additional Disclosure and Signatures**

**Additional Council Office Disclosure**

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

**Council Member Signature and Amount**

District 1 \_\_\_\_\_ \$ \_\_\_\_\_  
District 2 \_\_\_\_\_ \$ \_\_\_\_\_  
District 3 \_\_\_\_\_ \$ \_\_\_\_\_  
District 4 \_\_\_\_\_ \$ \_\_\_\_\_  
District 5 \_\_\_\_\_ \$ \_\_\_\_\_  
District 6 \_\_\_\_\_ \$ \_\_\_\_\_  
District 7 \_\_\_\_\_ \$ \_\_\_\_\_  
District 8 \_\_\_\_\_ \$ \_\_\_\_\_  
District 9 \_\_\_\_\_ \$ \_\_\_\_\_  
District 10 \_\_\_\_\_ \$ \_\_\_\_\_  
District 11 \_\_\_\_\_ \$ \_\_\_\_\_  
District 12 \_\_\_\_\_ \$ \_\_\_\_\_  
District 13 \_\_\_\_\_ \$ \_\_\_\_\_  
District 14 \_\_\_\_\_ \$ \_\_\_\_\_  
District 15 \_\_\_\_\_ \$ \_\_\_\_\_

**Applicant/Program:**

Arbor Creek, Section 2 Condominiums Council of Co-Owners, Inc. / Road Paving

**Additional Disclosure and Signatures**

**Additional Council Office Disclosure**

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

District 16 \_\_\_\_\_ \$ \_\_\_\_\_

District 17 \_\_\_\_\_ \$ \_\_\_\_\_

District 18 \_\_\_\_\_ \$ \_\_\_\_\_

District 19 \_\_\_\_\_ \$ \_\_\_\_\_

District 20 \_\_\_\_\_ \$ \_\_\_\_\_

District 21 \_\_\_\_\_ \$ \_\_\_\_\_

District 22 \_\_\_\_\_ \$ \_\_\_\_\_

District 23 \_\_\_\_\_ \$ \_\_\_\_\_

District 24 \_\_\_\_\_ \$ \_\_\_\_\_

District 25 \_\_\_\_\_ \$ \_\_\_\_\_

District 26 \_\_\_\_\_ \$ \_\_\_\_\_

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

**Legal Name of Applicant Organization** Arbor Creek, Section 2 Condominiums Council of Co-Owners, Inc.

**Program Name and Request Amount** Road Paving - \$36,250

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	<input type="checkbox"/> Yes
Is the funding proposed by Council Member(s) less than or equal to the request amount?	<input type="checkbox"/> Yes
Is the proposed public purpose of the program viable and well-documented?	<input type="checkbox"/> Yes
Will all of the funding go to programs specific to Louisville/Jefferson County?	<input type="checkbox"/> Yes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	<input type="checkbox"/> Yes
Has prior Metro Funds committed/granted been disclosed?	<input type="checkbox"/> Yes
Is the application properly signed and dated by authorized signatory?	<input type="checkbox"/> Yes
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	<input type="checkbox"/> Yes
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	<input type="checkbox"/> No
Is the entity in good standing with: <ul style="list-style-type: none"> <li>▶ Kentucky Secretary of State?</li> <li>▶ Louisville Metro Revenue Commission?</li> <li>▶ Louisville Metro Government?</li> <li>▶ Internal Revenue Service?</li> <li>▶ Louisville Metro Human Relations Commission?</li> </ul>	<div style="border: 1px solid black; width: 40px; height: 15px; margin: 0 auto; text-align: center;">...</div> <div style="font-size: 2em; font-weight: bold; margin-top: 5px;">YES</div>
Is the current Fiscal Year Budget included?	<input type="checkbox"/> Yes
Is the entity's board member list (with term length/term limits) included?	<input type="checkbox"/> Yes
Is recommended funding less than 33% of total agency operating budget?	<input type="checkbox"/> Yes
Does the application budget reflect only the revenue and expenses of the project/program?	<input type="checkbox"/> Yes
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	<input type="checkbox"/> Yes
Is the most recent annual audit (if required by organization) included?	<input type="checkbox"/> N/A
Is a copy of Signed Lease (if rent costs are requested) included?	<input type="checkbox"/> N/A
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	<input type="checkbox"/> N/A
Are the Articles of Incorporation of the Agency included?	<input type="checkbox"/> Yes
Is the IRS Form W-9 included?	<input type="checkbox"/> Yes
Is the IRS Form 990 included?	<input type="checkbox"/> No
Are the evaluation forms (if program participants are given evaluation forms) included?	<input type="checkbox"/> N/A
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	<input type="checkbox"/> N/A
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	<input type="checkbox"/> N/A

Prepared by: John Worsky

Date: 7-10-19

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

**SECTION 1 - APPLICANT INFORMATION**

Legal Name of Applicant Organization: Arbor Creek, section 2 condominiums  
(as listed on: <http://www.sos.ky.gov/business/records>) Council of CO-owners, Inc.

Main Office Street & Mailing Address: 6934 Arbor Manor Way, Lou KY 40228

Website:

Applicant Contact: Donna Ising Title: Association Member

Phone: 502.451.6354 Email: ajhoward17@bellsouth.net

Financial Contact: Jerry Smith Title: Treasurer

Phone: 502.681.8021 Email: N/A

Organization's Representative who attended NDF Training:

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

Program Facility Location(s): Arbor Manor Way, Arbor Brook Lane

Council District(s): 23 Zip Code(s): 40228

**SECTION 2 - PROGRAM REQUEST & FINANCIAL INFORMATION**

PROGRAM/PROJECT NAME: Roadway Paving

Total Request: (\$) 36,250 Total Metro Award (this program) in previous year: (\$) N/A

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

**The Following are Required Attachments:**

IRS Exempt Status Determination Letter	Signed lease if rent costs are being requested <u>N/A</u>
Current year projected budget	IRS Form W9 ✓
Current financial statement	Evaluation forms if used in the proposed program <u>N/A</u>
Most recent IRS Form 990 or 1120-H	Annual audit (if required by organization) <u>N/A</u>
Articles of Incorporation (current & signed)	Faith Based Organization Certification Form, if applicable <u>N/A</u>
Cost estimates from proposed vendor if request is for capital expense	

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

Source:	Amount: (\$)
Source:	Amount: (\$)
Source:	Amount: (\$)

Has the applicant contacted the BBB Charity Review for participation?  Yes  No N/A  
 Has the applicant met the BBB Charity Review Standards?  Yes  No N/A

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

Services:  
"COUNCIL of CO-OWNERS" (as defined by KRS 381.805 to KRS. 381-990. as amended)

Vision: To obtain monetary assistance to finish roadways within community, as left unfinished by association developer.

Mission: To have completed finished roads.

**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

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

Board Member	Term End Date
Shawn Raible	Feb 2020
Ken Clay	Feb 2020
Donna Ising	Feb 2021
Bob Cloud	Feb 2021
Jerry Smith	Feb 2020
Note: no members are paid.	

**Describe the Board term limit policy:**  
 Bylaws Amendment-attached.  
 states term limits of the B.O.D.

Three Highest Paid Staff Names	Annual Salary

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 - PROGRAM/PROJECT NARRATIVE

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

Attached proposal from A.D.C. Paving. currently, and for the past 13 years, 57 residences have dealt with and driven on unfinished roadways. Developer fell into bankruptcy in 2008 and never finished. New developer, although stating he would pave, did not. Additional documentation, legal opinions, letters are attached.

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

Finish + pave current unfinished roadways.



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

N/A

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

N/A

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

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

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

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

- Unfinished Roadways + deterioration of asphalt, effects property values negatively.
- Many owners have reported vehicle damage over the years.
- Overall enjoyment of the community will improve/ok, Better quality of life + living.

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

N/A

**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

**SECTION 6 – PROGRAM/PROJECT BUDGET SUMMARY**

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

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
A: Personnel Costs Including Benefits	0		
B: Rent/Utilities	0		
C: Office Supplies	0		
D: Telephone	0		
E: In-town Travel	0		
F: Client Assistance (See Detailed List on Page 8)	0		
G: Professional Service Contracts	0		
H: Program Materials	0		
I: Community Events & Festivals (See Detailed List on Page 8)	0		
J: Machinery & Equipment	0		
K: Capital Project	\$36,250	\$36,250	\$72,500
L: Other Expenses (See Detailed List on Page 8)	0		0
<b>*TOTAL PROGRAM/PROJECT FUNDS</b>	<b>36,250</b>	<b>36,250</b>	<b>72,500</b>
% of Program Budget	50 %	50 %	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 <b>HOA FEES</b>	<b>\$36,250</b>
Other (please specify)	
Total Revenue for Column 2 Expenses **	

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

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



**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

**Detail of In-Kind Contributions for this PROGRAM only:** Includes Volunteers, Space, Utilities, etc. (Include anything not bought with cash revenues of the agency). *none.*

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
N/A		
<p align="center"><i>Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution &amp; Other In Kind)</i></p>		

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

Agency Fiscal Year Start Date: *January 1st - December 31st.*

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

If YES, please explain:

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 7 – CERTIFICATIONS & ASSURANCES

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

#### Standard Assurances

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

#### Standard Certifications

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

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

### SECTION 8 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:	<i>Donna Lsing</i>	Date:	July 1, 2019
Legal Signatory: (please print):	Donna Lsing	Title:	Board of Directors
Phone:	451-6354	Extension:	
		Email:	cjhoward17@bellsouth.net

(502)

Form **8718**  
(Rev. March 2018)

### User Fee for Exempt Organization Determination Letter Request

OMB No. 1545-1798  
Control number \_\_\_\_\_  
Amount paid \_\_\_\_\_  
User fee screener \_\_\_\_\_

Department of the Treasury  
Internal Revenue Service

- ▶ Attach this form to determination letter application.  
(Form 8718 is NOT a determination letter application.)
- ▶ Go to [www.irs.gov/Form8718](http://www.irs.gov/Form8718) for the latest information.

For  
IRS  
Use  
Only

Name of organization  
**Arbor Creek Section 2 Condominiums**

Employer Identification Number  
**20-5174166**

Caution: Do not attach Form 8718 to an application for a pension plan determination letter. Use Form 8717 instead.

1	Type of request	Fee
a	<input checked="" type="checkbox"/> Application for recognition of exemption under section 501 or under section 521 from organizations (other than pension, profit-sharing, and stock bonus plans described in section 401). Enter the applicable fee amount . . . . . ▶	\$ <u>600</u>
b	<input type="checkbox"/> Group exemption letters . . . . . ▶	\$ _____





**BERKSHIRE HATHAWAY** | Parks & Weisberg, Realtors®  
HomeServices

Dear Metro Council

We the Board of Arbor Creek Section 2 Condominiums Council of Co-Owners INC., will not sue or hold liable Metro Public Works, any Council member personally or the Council itself for the production and completion of the paving of the roads, in the Villas of Arbor Creek. We as a board also declare that the association will take complete and full responsibility of any repairs of the roads after the completion.

Sincerely,

X DocuSigned by:  
*Shawn Raible* 8/12/2019 | 11:52 AM EDT  
025097302847044E

Shawn Raible

X \_\_\_\_\_

Ken Clay

X *Ken Clay*

Bob Cloud

X *Robert W. Cloud*

Gerry Smith

X *Gerry Smith*

Donna Ising

X *Donna Ising*





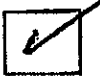
Louisville Metro Government  
Office of Management and Budget

Neighborhood Development Fund Training Attestation

Grantee Organization Name: Arbor Creek Section 2 Condominium Council of Co-Owners, Inc.  
Grantee Representative Name: Donna Ising, Board of Directors

I agree that I am an authorized representative and/or signatory of the organization named above and attest to having viewed the Neighborhood Development Fund training presentation. I understand the reporting requirements of the Neighborhood Development Fund grant. Additionally, after viewing the presentation, I have correctly answered the below questions.

Please check:



I viewed the NDF training material on the website

Answer the following questions before signing (Circle or write in the correct answer).

1. The NDF funding your agency received is a gift from LMG? True or False
2. Name the three budget categories that require a detail list.  
client assistance, community events and festivals and other expenses
3. If your agency charged gross pay to NDF, you are required to provide additional documentation to satisfy reporting requirements. True or False
4. Which four questions should your financial support documentation answer at all times?  
who, what, when and where
5. Your agency is considered noncompliant if you do not account for funds received and/or your financial report is missing support documentation? True or False
6. Canceled check, bank statement, invoice and receipt are considered proof of payment. True or False.

Donna Ising  
Grantee Representative Signature

August 14, 2019  
Date

BOD

NOTE: Please return to Roxanne Steele

E-mail address: Roxanne.Steele@louisvilleky.gov  
Mailing Address: Louisville Metro Government  
ATTN: NDF Coordinator  
611 West Jefferson St.  
Louisville, KY 40202

Fax: 502-574-3219

**Arbor Creek Section 2 Condominium  
Council of Co-Owners, Inc.**

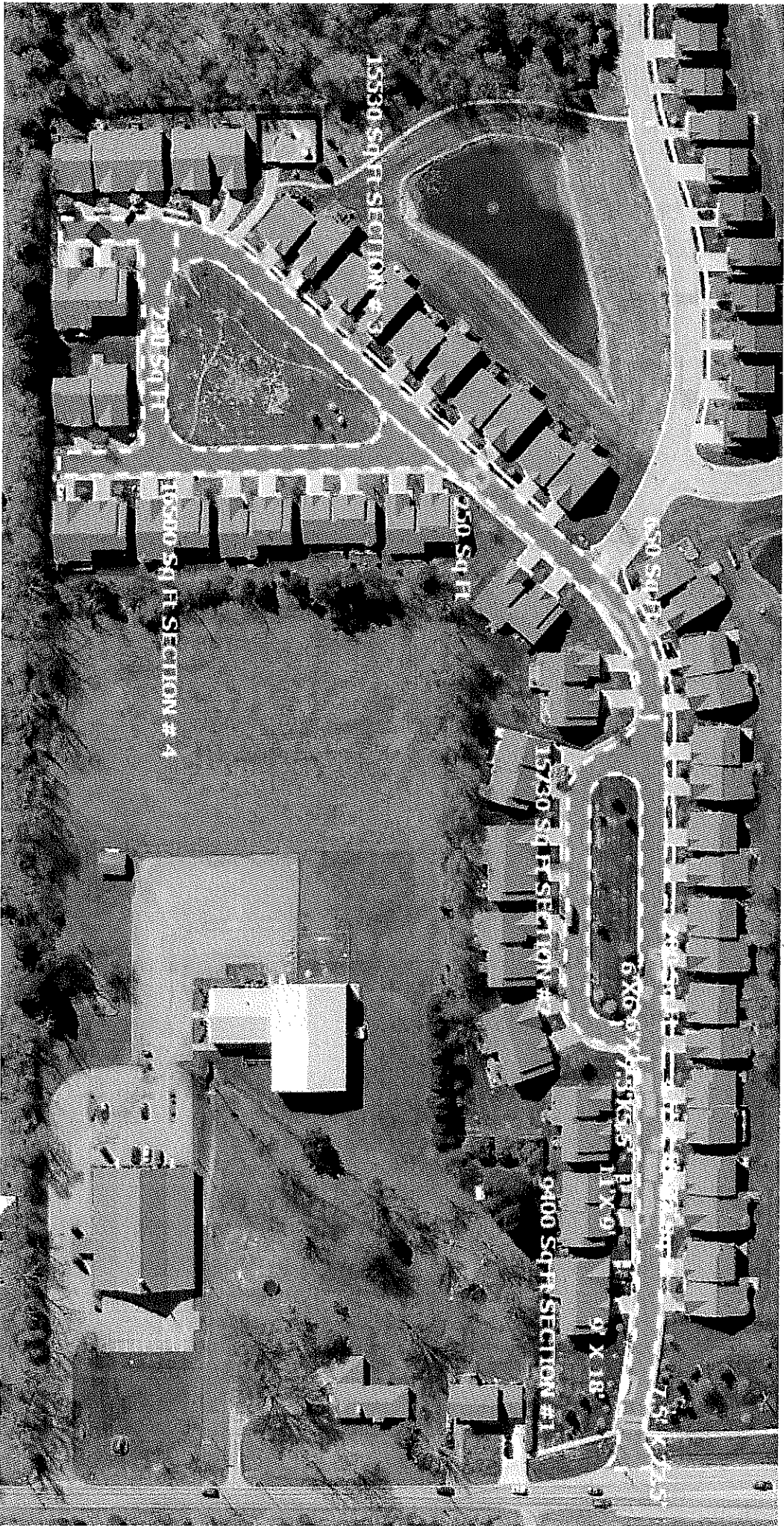
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To: County Attorney  
From: Full Board of Directors  
Date: August 13, 2019  
Re: Application for NDF (Roads)  
Arbor Creek, Section 2, Condo's,  
Council of Co-Owners Inc.

If you would like to write up something "binding" from Metro Govt, to include everything; Metro Council all members and any Metro Council person who votes yes for our roads, Public Works and anything else.

Our Board of Directors, Our Full Association and Management Division, now and in the future will take full and total responsibility of our roads after paving and for any and all repairs.

Donna Ising, Board of Directors  
*Donna Ising* August 13, 2019



15530 SQ FT SECTION # 3

2982 SQ FT

250 SQ FT

10000 SQ FT SECTION # 4

850 SQ FT

17430 SQ FT SECTION # 2

6 X 6

7 X 5.5

11 X 9

9 X 18

9100 SQ FT SECTION # 1

7.5



ADC Paving  
4629 Astor Road  
Louisville, KY 40218

# Estimate

Date	Estimate #
11/25/2018	1541-18

Name / Address
Cedar Property Management April Arnold 4506 Bardstown Rd. Louisville, KY 40218

Ship To
6800 Arbor Manor Way Louisville, KY 40228

Customer Contact	Rep	Map Code
	JS	211C

Description	Rate		Total
1 1/2" OVERLAY / RESURFACE SECTION # 1 * TOTAL AREA: 9400 SQUARE FEET * Trim and remove vegetation (weed kill if necessary) * Mill edge keys at all sidewalks, street aprons and garages (as necessary) * Power broom and haul away spoils * Apply SS1-H tack coat * Wedge or Pre-Patch any low-lying or damaged areas * Install 1 1/2" compacted, surface course of asphalt	10,875.00		10,875.00
1 1/2" OVERLAY / RESURFACE SECTION # 2 * TOTAL AREA: 15730 SQUARE FEET * Trim and remove vegetation (weed kill if necessary) * Mill edge keys at all sidewalks, street aprons and garages (as necessary) * Power broom and haul away spoils * Apply SS1-H tack coat * Wedge or Pre-Patch any low-lying or damaged areas * Install 1 1/2" compacted, surface course of asphalt	18,125.00		18,125.00

**Total**

Signature

Phone #	Fax #
502-964-1415	502-964-1416

Web Site
adcpaving.com



ADC Paving  
 4629 Astor Road  
 Louisville, KY 40218

# Estimate

Date	Estimate #
11/25/2018	1541-18

Name / Address
Cedar Property Management April Arnold 4506 Bardstown Rd. Louisville, KY 40218

Ship To
6800 Arbor Manor Way Louisville, KY 40228

Customer Contact	Rep	Map Code
	JS	211C

Description	Rate		Total
1 1/2" OVERLAY / RESURFACE SECTION # 3 * TOTAL AREA: 15530 SQUARE FEET * Trim and remove vegetation (weed kill if necessary) * Mill edge keys at all sidewalks, street aprons and garages (as necessary) * Power broom and haul away spoils * Apply SS1-H tack coat * Wedge or Pre-Patch any low-lying or damaged areas * Install 1 1/2" compacted, surface course of asphalt	18,000.00		18,000.00
1 1/2" OVERLAY / RESURFACE SECTION # 4 * TOTAL AREA: 16500 SQUARE FEET * Trim and remove vegetation (weed kill if necessary) * Mill edge keys at all sidewalks, street aprons and garages (as necessary) * Power broom and haul away spoils * Apply SS1-H tack coat * Wedge or Pre-Patch any low-lying or damaged areas * Install 1 1/2" compacted, surface course of asphalt	19,000.00		19,000.00

<b>Total</b>
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Signature

Phone #	Fax #
502-964-1415	502-964-1416

Web Site
adcpaving.com



ADC Paving  
 4629 Astor Road  
 Louisville, KY 40218

# Estimate

Date	Estimate #
11/25/2018	1541-18

<b>Name / Address</b>
Cedar Property Management April Arnold 4506 Bardstown Rd. Louisville, KY 40218

<b>Ship To</b>
6800 Arbor Manor Way Louisville, KY 40228

<b>Customer Contact</b>	<b>Rep</b>	<b>Map Code</b>
	JS	211C

Description	Rate		Total
2" MILL & OVERLAY * Trim and remove vegetation (weed kill if necessary) * Mill an area of 2220 SQUARE FEET. to a depth of 2" * Power broom and haul away spoils * Apply SS1-H tack coat * Replace milled area with 2" compacted, surface grade asphalt	6,500.00		6,500.00

<b>Total</b>	\$72,500.00
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Signature \_\_\_\_\_

<b>Phone #</b>	<b>Fax #</b>
502-964-1415	502-964-1416

<b>Web Site</b>
adcpaving.com

**U.S. Income Tax Return  
for Homeowners Associations**

**2018**

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form1120H](http://www.irs.gov/Form1120H) for instructions and the latest information.

For calendar year 2018 or tax year beginning \_\_\_\_\_, 2018, and ending \_\_\_\_\_, 20

<b>TYPE OR PRINT</b>	Name <b>ARBOR CREEK SECTION 2 CONDOMINIUMS</b>	Employer identification number <b>20-5174133</b>
	Number, street, and room or suite no. If a P.O. box, see instructions.	Date association formed
	<b>4506 BARDSTOWN RD</b>	<b>05/15/2016</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>LOUISVILLE, KY 40218</b>	

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

**A** Check type of homeowners association:  Condominium management association  Residential real estate association  Timeshare association

<b>B</b> Total exempt function income. Must meet 60% gross income test. See instructions	<b>B</b>	<b>172,748</b>	<b>00</b>
<b>C</b> Total expenditures made for purposes described in 90% expenditure test. See instructions	<b>C</b>	<b>158,145</b>	<b>00</b>
<b>D</b> Association's total expenditures for the tax year. See instructions	<b>D</b>	<b>282,725</b>	<b>00</b>
<b>E</b> Tax-exempt interest received or accrued during the tax year	<b>E</b>		

**Gross Income** (excluding exempt function income)

<b>1</b> Dividends	<b>1</b>		
<b>2</b> Taxable interest	<b>2</b>	<b>2,697</b>	<b>00</b>
<b>3</b> Gross rents	<b>3</b>		
<b>4</b> Gross royalties	<b>4</b>		
<b>5</b> Capital gain net income (attach Schedule D (Form 1120))	<b>5</b>		
<b>6</b> Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)	<b>6</b>		
<b>7</b> Other income (excluding exempt function income) (attach statement)	<b>7</b>		
<b>8</b> <b>Gross income</b> (excluding exempt function income). Add lines 1 through 7	<b>8</b>	<b>2,697</b>	<b>00</b>

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

<b>9</b> Salaries and wages	<b>9</b>		
<b>10</b> Repairs and maintenance	<b>10</b>		
<b>11</b> Rents	<b>11</b>		
<b>12</b> Taxes and licenses	<b>12</b>		
<b>13</b> Interest	<b>13</b>		
<b>14</b> Depreciation (attach Form 4562)	<b>14</b>		
<b>15</b> Other deductions (attach statement)	<b>15</b>		
<b>16</b> <b>Total deductions.</b> Add lines 9 through 15	<b>16</b>		
<b>17</b> Taxable income before specific deduction of \$100. Subtract line 16 from line 8	<b>17</b>		
<b>18</b> Specific deduction of \$100	<b>18</b>	<b>\$100</b>	<b>00</b>

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**Tax and Payments**

<b>19</b> <b>Taxable income.</b> Subtract line 18 from line 17	<b>19</b>	<b>2,597</b>	<b>00</b>
<b>20</b> Enter 30% (0.30) of line 19. (Timeshare associations, enter 32% (0.32) of line 19.)	<b>20</b>	<b>779</b>	<b>00</b>
<b>21</b> Tax credits (see instructions)	<b>21</b>		
<b>22</b> <b>Total tax.</b> Subtract line 21 from line 20. See instructions for recapture of certain credits	<b>22</b>	<b>779</b>	<b>00</b>
<b>23</b> <b>a</b> 2017 overpayment credited to 2018 <b>23a</b>	<b>23a</b>		
<b>b</b> 2018 estimated tax payments <b>23b</b>	<b>23b</b>		
<b>c</b> Total <b>23c</b>	<b>23c</b>		
<b>d</b> Tax deposited with Form 7004 <b>23d</b>	<b>23d</b>		
<b>e</b> Credit for tax paid on undistributed capital gains (attach Form 2439) <b>23e</b>	<b>23e</b>		
<b>f</b> Credit for federal tax paid on fuels (attach Form 4136) <b>23f</b>	<b>23f</b>		
<b>g</b> Add lines 23c through 23f <b>23g</b>	<b>23g</b>		
<b>24</b> <b>Amount owed.</b> Subtract line 23g from line 22. See instructions	<b>24</b>	<b>779</b>	<b>00</b>
<b>25</b> <b>Overpayment.</b> Subtract line 22 from line 23g	<b>25</b>		
<b>26</b> Enter amount of line 25 you want: <b>Credited to 2019 estimated tax</b> <b>Refunded</b>	<b>26</b>		

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

**Sign Here**

Signature of officer _____	Date _____	ACCOUNTANT Title _____
----------------------------	------------	------------------------

May the IRS discuss this return with the preparer shown below? See instructions.  Yes  No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>AMANDA KENNY</b>	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN <b>P01804142</b>
	Firm's name <b>RICE LEGACY LLC</b>	Firm's EIN <b>46-3705233</b>			
	Firm's address <b>4506 BARDSTOWN RD., LOUISVILLE, KY 40218</b>	Phone no. <b>(502)361-1111</b>			



See instructions. Taxable period beginning , and ending

<b>A</b> LLET Exemption Code Enter Code <u>1</u> <u>9</u>	<b>D</b> Federal Identification Number: <b>20-5174133</b>	<b>E</b> Kentucky Corporation LLET Account Number (Required): _____
	Name of Corporation: <b>ARBOR CREEK SECTION 2 CONDOMINIUMS</b> <input type="checkbox"/> Change of Name Number and Street: <b>4506 BARDSTOWN RD</b>	
<b>B</b> Income Tax Exemption Code Enter Code <u>1</u> <u>9</u> <input type="checkbox"/> Mandatory TR XUS	City: <b>LOUISVILLE</b> State: <b>KY</b> ZIP Code: <b>40218</b> Telephone Number: <b>(502) 361-4111</b>	State and Date of Incorporation: <b>KY 05/15/2006</b>
	Check if applicable: <input type="checkbox"/> Amended return <input type="checkbox"/> Amended return - RAR Provide explanation of changes in Part V - Explanation of Amended Return Changes	<b>F</b> Name of Common Parent: _____ Kentucky Corporation LLET Account Number: _____  <b>G</b> Check if applicable: <input type="checkbox"/> Initial return <input type="checkbox"/> Short-period return (Complete Part IV) <input type="checkbox"/> Change of accounting period <input type="checkbox"/> Final return (Complete Part IV)

PART I - LLET COMPUTATION			PART II - INCOME TAX COMPUTATION		
1	Schedule L, Section D, line 1 (Page 4) ..	00	1	Income tax (see instructions) .....	00
2	Tax credit recapture .....	00	2	Tax credit recapture .....	00
3	<b>Total</b> (add lines 1 and 2) .....	00	3	Tax installment on LIFO recapture ...	00
4	Nonrefundable LLET credit from Kentucky Schedule(s) K-1 .....	00	4	<b>Total</b> (add lines 1 through 3) .....	00
5	Nonrefundable tax credits (attach Schedule TCS) .....	00	5	Nonrefundable LLET credit from the Corporation LLET Credit Worksheet(s) (see instructions) .....	00
6	<b>LLET liability</b> (greater of line 3 less lines 4 and 5 or \$175 minimum) .....	00	6	Nonrefundable LLET credit (Part I, line 6 less \$175) .....	00
7	Withholding tax (Form PTE-WH) .....	00	7	Nonrefundable tax credits (attach Schedule TCS) .....	00
8	Estimated tax payments .....	00	8	<b>Net income tax liability</b> (line 4 less lines 5 through 7, but not less than zero) .....	00
9	Certified rehabilitation tax credit .....	00	9	Estimated tax payments .....	00
10	Film industry tax credit .....	00	10	Extension payment .....	00
11	Extension payment .....	00	11	Prior year's tax credit .....	00
12	Prior year's tax credit .....	00	12	LLET overpayment from Part I, line 18 .....	00
13	Income tax overpayment from Part II, line 17 .....	00	13	Corporation income tax paid on original return .....	00
14	LLET paid on original return .....	00	14	Corporation income tax overpayment on original return .....	00
15	LLET overpayment on original return .....	00	15	<b>Income tax due</b> (lines 8 and 14 less lines 9 through 13) .....	00
16	<b>LLET due</b> (lines 6 and 15 less lines 7 through 14) .....	00	16	<b>Income tax overpayment</b> (lines 9 through 13 less lines 8 and 14) .....	00
17	<b>LLET overpayment</b> (lines 7 through 14 less lines 6 and 15) .....	00	17	Credited to 2018 LLET .....	00
18	Credited to 2018 income tax .....	00	18	Credited to 2018 interest .....	00
19	Credited to 2018 interest .....	00	19	Credited to 2018 penalty .....	00
20	Credited to 2018 penalty .....	00	20	Credited to 2019 corporation income tax .....	00
21	Credited to 2019 LLET .....	00	21	<b>Amount to be refunded</b> .....	00
22	<b>Amount to be refunded</b> .....	00			

TAX PAYMENT SUMMARY (Round to nearest dollar)				OFFICIAL USE ONLY	
LLET		INCOME		PW 2018 VAL E	
1 LLET due (Part I, Line 16)	\$ 00	1 Income tax due (Part II, Line 15)	\$ 00		
2 Interest	\$ 00	2 Interest	\$ 00		
3 Penalty	\$ 00	3 Penalty	\$ 00		
4 Subtotal	\$ 00	4 Subtotal	\$ 00		
TOTAL PAYMENT (Add Subtotals) .....					\$ 00





**PART III – TAXABLE INCOME COMPUTATION**

1	Federal taxable income (Form 1120, line 28)	00	12	Dividend income (See line 5)	12	00
<b>ADDITIONS:</b>			13	Federal work opportunity credit	13	00
2	Interest income (state and local obligations)	00	14	Depreciation adjustment	14	00
3	State taxes based on net/gross income	00	15	Other (attach Schedule O-720)	15	00
4	Depreciation adjustment	00	16	Revenue Agent Report (RAR)	16	00
5	Deductions attributable to nontaxable income	00	17	<b>Net income</b> (line 10 less lines 11 through 16)	17	00
6	Related party expenses (attach Schedule RPC)	00	18	Current net operating loss adjustment (mandatory nexus only)	18	00
7	Dividend paid deduction (REIT)	00	19	<b>Kentucky net income</b> (add lines 17 and 18)	19	00
8	Other (attach Schedule O-720)	00	20	<b>Taxable net income</b> (see instructions)	20	00
9	Revenue Agent Report (RAR)	00	21	Net operating loss deduction (NOLD)	21	00
10	<b>Total</b> (add lines 1 through 9)	00	22	<b>Taxable net income after NOLD</b> (line 20 less line 21)	22	00
<b>SUBTRACTIONS:</b>						
11	Interest income (U.S. obligations)	00				

**PART IV – EXPLANATION OF FINAL RETURN AND/OR SHORT-PERIOD RETURN**

- |   |  |
|---|--|
| <input type="checkbox"/> Ceased operations in Kentucky  | <input type="checkbox"/> Change in filing status |
| <input type="checkbox"/> Change of ownership            | <input type="checkbox"/> Merger                  |
| <input type="checkbox"/> Successor to previous business | <input type="checkbox"/> Other _____             |

**PART V – EXPLANATION OF AMENDED RETURN CHANGES**

COPY

**OFFICER INFORMATION**

Attach a schedule listing the name, home address, and Social Security number of the vice president, secretary, and treasurer.

Has the attached officer information changed from the last return filed?  Yes  No

President's Name \_\_\_\_\_ President's Home Address \_\_\_\_\_  
 President's Social Security Number \_\_\_\_\_  
 Date Became President \_\_\_\_\_

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

<b>Sign Here</b>	Signature of Officer	Date	03/06/2019
	Name of Officer: <b>AMANDA KENNY</b>	Title	<b>ACCOUNTANT</b>
<b>Paid Preparer Use</b>	Signature of Preparer	Date	03/06/2019
	Name of Preparer or Firm: <b>RICE LEGACY, LLC</b>	ID Number	<b>46-3705233</b>
	E-mail and/or Telephone No.: <b>5023611111</b>	Mark the DOR to copy this return with this preparer? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Enclose</b>	Include federal Form 1120 with all supporting schedules and statements.	<b>Refund or No Payment</b>	Kentucky Department of Revenue P. O. Box 856905 Louisville, KY 40285-6905
<b>Payment</b>	Check Payable: Kentucky State Treasurer E-Pay Options: <a href="http://www.revenue.ky.gov">www.revenue.ky.gov</a>	<b>With Payment</b>	Kentucky Department of Revenue P. O. Box 856910 Louisville, KY 40285-6910



SCHEDULE Q—KENTUCKY CORPORATION/LLET QUESTIONNAIRE

IMPORTANT: Questions 3—15 must be completed by all corporations. If this is the corporation's initial return or if the corporation did not file a return under the same name and same federal I.D. number for the preceding year, questions 1 and 2 must be answered. Failure to do so may result in a request for a delinquent return.

1 Indicate whether: (a)  new business; (b)  successor to previously existing business which was organized as: (1)  corporation; (2)  partnership; (3)  sole proprietorship; or (4)  other. If successor to previously existing business, give name, address, and federal I.D. number of the previous business organization.

2 If a foreign corporation, enter the date qualified to do business in Kentucky.

3 List the following Kentucky account numbers. Enter N/A for any number not applicable. KY Secretary of State Organization, Employer Withholding, Sales and Use Tax Permit, Consumer Use Tax, Unemployment Insurance, Coal Severance and/or Processing Tax.

4 The corporation's books are in care of: (name and address) CEDAR PROPERTY MANAGEMENT GROUP, 4506 BARDSTOWN RD, LOUISVILLE, KY 40218.

5 Are disregarded entities included in this return?  Yes  No. If yes, list name, address, and federal I.D. number of each entity.

6(a) Was the corporation a partner or member in a pass-through entity doing business in Kentucky?  Yes  No. If yes, list name and federal I.D. number of the pass-through entity(ies).

6(b) Was the corporation doing business in Kentucky other than through its interest held in a pass-through entity doing business in Kentucky?  Yes  No.

7 Are related party costs as defined in KRS 141.205(1)(f) included in this return?  Yes  No. If yes, attach Schedule RPC, Related Party Costs Disclosure Statement, and enter any related party cost additions on Form 720, Part III, Line 6.

8 Did the corporation at any time during the taxable year do business in Kentucky and own 80 percent or more of the voting stock of another corporation doing business in Kentucky?  Yes  No. If yes, list name, address, and federal I.D. number of each entity.

9 Was 80 percent or more of the corporation's voting stock owned by any corporation doing business in Kentucky at any time of the year?  Yes  No. If yes, list name, address and federal I.D. number of each entity.

10 The federal tax return attached to this Kentucky tax return is: (1) a pro forma federal tax return  a copy of the federal tax return filed with the Internal Revenue Service.

11 Is the entity filing this Kentucky tax return or any entity included in the tax return organized as a limited cooperative association per KRS Chapter 279A?  Yes  No. If yes, and this is a nexus consolidated return, enter each limited cooperative association's name, address, and federal I.D. number included in the return.

12 Is the entity filing this Kentucky tax return or any entity included in this tax return organized as a statutory trust or a series statutory trust per KRS Chapter 386A?  Yes  No. If yes, is the entity filing this Kentucky tax return or any entity included in this tax return a series within a statutory trust?  Yes  No. If yes, for each series within a statutory trust, enter the name, address, and federal I.D. number of the statutory trust registered with the Kentucky Secretary of State.

13 Was this return prepared on: (a)  cash basis; (b)  accrual basis; (c)  other.

14 Did the corporation file a Kentucky tangible personal property tax return for January 1, 2019?  Yes  No. If yes, list name and federal I.D. number of entity(ies) filing return(s).

15 Is the corporation currently under audit by the Internal Revenue Service?  Yes  No. If yes, enter years under audit. If the Internal Revenue Service has made final and unappealable adjustments to the corporation's taxable income which have not been reported to the department, check here  and file an amended return. See 2018 Kentucky Corporation Income Tax and LLET Return instructions for information regarding amended returns. Attach a copy of the final determination to each amended return.



**SCHEDULE L—LIMITED LIABILITY ENTITY TAX COMPUTATION**

Check this box and complete Schedule L-C, Limited Liability Entity Tax—Continuation Sheet, if the corporation or limited liability pass-through entity filing this tax return is a partner or member of a limited liability pass-through entity or general partnership (organized or formed as a general partnership after January 1, 2006) doing business in Kentucky. Enter the total amounts from Schedule L-C in Section A of this schedule.

**SECTION A—Computation of Gross Receipts and Gross Profits**

		Column A Kentucky	Column B Total
1(a) Gross receipts less returns and allowances .....	1(a)	00	00
(b) Kentucky statutory gross receipts reductions (see instructions) .....	(b)		
2 Adjusted gross receipts (line 1(a) less line 1(b)).....	2	00	00
3(a) Cost of goods sold (attach Schedule COGS).....	3(a)	00	00
(b) Kentucky statutory cost of goods sold reductions (see instructions)....	(b)		
4 Adjusted cost of goods sold (line 3(a) less line 3(b)).....	4	00	00
5 Gross profits (line 2 less line 4).....	5	00	00



**If Section A, Column B, Line 2 is \$3,000,000 or less,  
STOP and enter \$175 in Section D, line 1 below.**

**SECTION B—Computation of Gross Receipts LLET**

1 If gross receipts from all sources (Column B, line 2) are greater than \$3,000,000, but less than \$6,000,000, enter the following: (Column A, line 2 x 0.00095) - $\left[ \frac{\$2,850 \times (\$6,000,000 - \text{Column A, line 2})}{\$3,000,000} \right]$ but in no case shall the result be less than zero .....			00
2 If gross receipts from all sources (Column B, line 2) are \$6,000,000 or greater, enter the following: Column A, line 2 x 0.00095.....	2		00
3 Enter the amount from line 1 or line 2.....	3		00

**SECTION C—Computation of Gross Profits LLET**

1 If gross profits from all sources (Column B, line 5) are greater than \$3,000,000, but less than \$6,000,000, enter the following: (Column A line 5 x 0.0075) - $\left[ \frac{\$22,500 \times (\$6,000,000 - \text{Column A, line 5})}{\$3,000,000} \right]$ but in no case shall the result be less than zero .....	1		00
2 If gross profits from all sources (Column B, line 5) are \$6,000,000 or greater, enter the following: Column A, line 5 x 0.0075.....	2		00
3 Enter the amount from line 1 or line 2.....	3		00

**SECTION D—Computation of LLET**

1 Enter the lesser of Section B, line 3 or Section C, line 3. If less than \$175, enter the minimum of \$175 here and on Page 1, Part I, line 1.....	1		00
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Louisville Metro Revenue Commission

**Occupational License Tax Return**

OL-3 2017\_V1.0

Form

**OL-3**

INDIVIDUAL/ SOLE PROPRIETOR			
Last name	First name	MI	Social Security Number

CORPORATION/ PARTNERSHIP	
Legal name/ Business name <b>ARBOR CREEK SECTION 2</b>	Federal ID Number <b>20-5174133</b>

<input checked="" type="checkbox"/> CHECK IF CHANGE IN ADDRESS IS BELOW			
Address (number and street) <b>4506 BARDSTOWN RD</b>		Unit/Apt. no.	Account ID
City, town, or post office <b>LOUISVILLE</b>	State <b>KY</b>	Zip code <b>40218</b>	Tax Year Ending <b>12/31/2018</b>
Email	Phone no.	Ext.	<input type="checkbox"/> No Activity <input type="checkbox"/> Amended Return <input type="checkbox"/> Final Return Business Cease Date

<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Did you make payments in the sum of \$600.00 or more to any individual for services rendered in Louisville Metro, Kentucky, other than an employee? IF YES, YOU ARE REQUIRED TO FILE FORM 1099-SF.	RETURN STATUS
---	-----------------------------	---	---------------

General Information These questions must be answered	A. Principal business activity: <b>HOMEOWNERS ASSOCIATION</b>	
	B. Did Federal Authorities change or propose to change net income reported for any prior year? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, which year(s) was adjusted? (Attach statement of changes)	
	C. Corporation's Principal Administrative Officer Address	Social Security Number
	D. Did you file a consolidated federal return? (If YES, see instructions)	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	E. Was there a change in ownership in the past year? Name of new owner Address	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO New Ownership Date

Tax Computation Complete Income Worksheet on Page 2 prior to completing this section.	25. Enter Adjusted Net Profit (From Line 20 on page 2 of form):			.00
	<b>Occupational License Tax Computation</b>		COLUMN A: Tax Rate = (.0145) Louisville Metro & Mass Transit	COLUMN B: Tax Rate = (.0075) School Board
	26. Enter Apportionment Percentage from Line 24 on page 2 of form			Non-Resident Individuals Do Not Complete Column B
	27. Enter Net Profit Allocation (Line 25 x Line 26) in Columns A & B			.00 .00
	28. Enter result of Line 1(e) on page 2 of form			.00 .00
	29. Enter the sum of Line 27 + Line 28 or Line 28, whichever is greater			.00 .00
	30. Tax Calculations [Line 29, Column A x .0145] & [Line 29, Column B x .0075] Enter in proper column			.00 .00
	31. Total Tax Due - Sum of Columns A & B of Line 30. (If Line 31 is greater than \$5,000.00, See Exhibit "A" under Specific Instructions.)			.00 .00
	32. Total Prepayments			.00 .00
	Refund: <b>b</b> , .00 Credit to next year: <b>c</b> , .00			.00 .00
33. Balance Due: (Line 31 minus Line 32a, if greater than \$0)			.00 .00	
34. Penalty & Interest (See Instructions):			.00 .00	
35. Amount To Be Paid (Add Lines 33 and 34):			.00 .00	

Signature	I hereby certify, under penalty of perjury, that the information provided and the attached supporting schedules are true, correct, and complete to the best of my knowledge.		
	Your signature	Date	
	Print/Type your name	Your Title	Daytime phone number

Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	PTIN
	AMANDA KENNY		03/06/2019	PO1804142
	Firm's name	RICE LEGACY	Firm's EIN	463705233
	Firm's address	4506 BARDSTOWN RD LOUISVILLE KY 40218	Phone no.	(502) 361-1111

**ELECTRONIC FILING**  
 Register for electronic filing. It is an easy, secure, and convenient way to file and pay taxes on-line. For more information access <https://www.metrorevenue.org>

MAILING ADDRESS: P.O. BOX 35410, LOUISVILLE, KENTUCKY 40232-5410  
 Telephone: (502) 574-4860

<b>Income Worksheet</b>  <b>Must Attach Form W-2</b>  <b>Lines 1a through 1e apply only to individuals with income reported on Federal Form W-2 from which the full amount of occupational taxes were not withheld.</b>	<b>1(a)</b> Gross salaries, wages, tips, etc. reported on Federal Form W-2 where the full amount of occupational taxes were not withheld, plus deferred compensation from 401 (K)/403 (B)/457 plans	1a	.00
	<b>1(b)</b> Related employee business expenses per Federal Form 2106 (Attach Form 2106)	1b	.00
	<b>1(c)</b> Line 1(a) minus Line 1(b)	1c	.00
	<b>1(d)</b> Compute the apportionment below for time spent in Louisville Metro directly related to the wages reported on Line 1c, carrying the percentage out five (5) decimal places.  <b>Total days worked in Louisville</b> <input type="text"/> + <input type="text"/> <b>Total days worked everywhere</b>	1d	
	<b>1(e)</b> Multiply Line 1(c) by Line 1(d) and enter on Line 28, Columns A and B on page 1 of form. <b>Note:</b> If you are a non-resident of Louisville Metro, Kentucky, leave Line 28, Column B blank	1e	.00

COMPLETE THE APPLICABLE COLUMN AND ATTACH CORRESPONDING FEDERAL SCHEDULES		INDIVIDUAL	PARTNERSHIP	CORPORATION
2.	Non-employee compensation as reported on Form 1099-MISC reported as "other income" on Federal Form 1040 (Attach Page 1 of Form 1040 and Form 1099)	.00		
3.	Net profit or (loss) per Federal Sch. C of Form 1040 (Attach Sch. C, Pg. 1 and 2, or Sch. C-1Z)	.00		
4.	Capital gain from Federal Form 4797 or Form 6252 reported on Schedule D of Form 1040 from sale of business property. (Attach Form 4797, Pages 1 and 2 or Form 6252)	.00		
5.	Rental income or (loss) per Federal Schedule E of Form 1040, only if qualified as a business activity. (See page 1 of instructions) (Attach Schedule E)	.00		
6.	Net farm profit or (loss) per Federal Sch. F of Form 1040, only if qualified as a business activity. (See page 1 of instructions) (Attach Schedule F, pg. 1 and 2)	.00		
7.	Ordinary gain or (loss) on the sale of property used in a trade or business per Federal Form 4797 (Attach Form 4797, Pages 1 and 2)	.00		
8.	Ordinary income or (loss) per Federal Form 1065 (Attach Form 1065, Pages 1, 2, 3, and 4, Schedule of Other Deductions, and Rental Schedule(s), if applicable)		.00	
9.	Taxable income or (loss) per Federal Form 1120 or 1120A or Ordinary income or (loss) per Federal Form 1120S (Attach Form 1120 or 1120A, Pages 1 and 2 or 1120S, Pages 1, 2 and 3, Schedule of other Deductions, and Rental Schedule(s), if applicable)			.00
10.	State Income Taxes and Occupational Taxes deducted on Federal Schedule C, E, or F of Form 1040, or Form 1065, 1120, 1120A, or 1120S	.00	.00	.00
11.	Additions from Schedule K of Form 1065 or Form 1120S (Attach Schedule K of Form 1065 or 1120S and Rental Schedule(s), if applicable)		.00	.00
12.	Net Operating Loss deducted on Form 1120			.00
13.	<b>Total Income</b> - Add lines 2 through Line 12	.00	.00	.00
14.	Subtractions from Schedule K of Form 1065 or Form 1120S (Attach Schedule K of Form 1065 or 1120S and Rental Schedule(s), if applicable)		.00	.00
15.	Alcoholic Beverage Sales Deduction (Attach Computation Sheet)	.00	.00	.00
16.	Other Adjustments (Attach Statement)	.00	.00	.00
17.	Non-Taxable income (Attach Statement)		.00	.00
18.	Professional Expenses not reimbursed by the Partnership (Attach Statement)		.00	
19.	<b>Total Deductions</b> - Add lines 14 through Line 18	.00	.00	.00
20.	<b>Adjusted Net Profit</b> Subtract Line 19 from Line 13 enter here and on Line 25 on page 1 of form. (Do not include the amount from Line 1e)	.00	.00	.00

COPY

COMPUTATION OF APPORTIONMENT PERCENTAGES (Businesses whose total gross receipts and payroll were not confined solely to Louisville Metro, Kentucky, must complete Lines 21-24. All Percentages in Column C must be carried out five (5) decimal places.)				COLUMN C = Column A + Column B	
APPORTIONMENT CALCULATION		COLUMN A LOUISVILLE METRO, KY	COLUMN B TOTAL OPERATIONS EVERYWHERE	COLUMN C LOUISVILLE METRO %	
21.	Gross receipts from sales made and/or services rendered	21a .00	21b .00	21c	
22.	Gross wages, salaries, and other compensation paid to all employees (See instructions before completing)	22a .00	22b .00	22c	
23.	<b>TOTAL APPORTIONMENT PERCENTAGE</b> for Louisville Metro, KY Add lines 21(c) and 22(c)			23c	
24.	<b>APPORTIONMENT PERCENTAGE</b> - If both Lines 21(c) and 22(b) are greater than zero, divide entry on Line 23(c) by 2. Enter here and on Line 26 on page 1. If either Line 21(b) or Line 22(b) is zero, enter the amount from Line 23(c) here and on Line 26 on page 1. EXAMPLE: "22.12345%"			24c	

## Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <span style="font-size: 1.2em; font-family: cursive;">ARBOR CREEK SECTION 2 CONDOMINIUMS</span>	
<b>2</b> Business name/disregarded entity name, if different from above	
<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <small><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small>	Exempt payee code (if any) <u>5</u>  Exemption from FATCA reporting code (if any) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
<input checked="" type="checkbox"/> Other (see instructions) ▶ <span style="font-size: 1.2em; font-family: cursive;">Homeowners Association (1120-H)</span>	
<b>5</b> Address (number, street, and apt. or suite no.) See instructions. <span style="font-size: 1.2em; font-family: cursive;">90 PARKS &amp; WEISBURG   295 N HUBBARDS LN SUITE #102</span>	<b>Requester's name and address (optional)</b>
<b>6</b> City, state, and ZIP code <span style="font-size: 1.2em; font-family: cursive;">LOUISVILLE, KY 40207</span>	
<b>7</b> 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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> </tr> </table>				
or				
<b>Employer identification number</b>				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; text-align: center;">20</td> <td style="width: 25%; border: 1px solid black; text-align: center;">-51</td> <td style="width: 25%; border: 1px solid black; text-align: center;">74</td> <td style="width: 25%; border: 1px solid black; text-align: center;">100</td> </tr> </table>	20	-51	74	100
20	-51	74	100	

### Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶ <span style="font-size: 1.5em; font-family: cursive;">Amanda Kenny</span>	Date ▶ <span style="font-size: 1.5em; font-family: cursive;">7/29/19</span>
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### General Instructions

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

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### 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, later.*

**ARTICLES OF INCORPORATION**  
**OF**  
**ARBOR CREEK, SECTION 2 CONDOMINIUMS COUNCIL**

Trey Grayson  
Secretary of State  
Received and Filed  
05/15/2006 12:50:48 PM  
Fee Receipt: \$8.00

The undersigned incorporator of Arbor Creek, Section 2 Condominiums Council of Co-Owners, Inc. has executed these articles of incorporation for the purpose of forming and does hereby form a non-stock, nonprofit corporation under the laws of the Commonwealth of Kentucky in accordance with the following provisions:

**ARTICLE I**

The name of the corporation is Arbor Creek, Section 2 Condominiums Council of Co-Owners, Inc.

**ARTICLE II**

The purpose of the corporation is (1) to be the "council of co-owners" (as defined in the Kentucky Horizontal Property Law, KRS 381.805 to KRS 381.990, as amended) for the operation and administration of Arbor Creek, Section 2 Condominiums, a condominium project established in Jefferson County, Kentucky, pursuant to the provisions of the Kentucky Horizontal Property Law and the terms of a certain Master Deed of record in the office of the Jefferson County, Kentucky Clerk, by McBride and Son Homes Land Development, Inc. a Missouri corporation, ("Master Deed"); (2) to exercise all the powers and privileges and to perform all of the duties and obligations of the corporation as set forth in the Master Deed, as the same may be amended from time to time as therein provided; (3) to have and to exercise any and all powers, rights and privileges which a corporation organized under the nonprofit corporation law of the Commonwealth of Kentucky by law may now or hereafter have or exercise; and (4) to exercise any other activity necessary, proper, convenient, or desirable in order to fulfill and further the foregoing.

**ARTICLE III**

The corporation is to have perpetual existence.

**ARTICLE IV**

The street address of the initial registered office of the corporation in the Commonwealth of Kentucky is 8311 Shelbyville Road, Louisville, Kentucky 40222, and the name of the initial registered agent of the corporation at such address is William B. Bardenwerper, Attorney at Law. The mailing address of the principal office of the corporation is 331 Townepark Circle, Suite 100, Louisville, Kentucky 40243.

**ARTICLE V**

All owners of record of units in Arbor Creek, Section 2 Condominiums shall be members of the corporation, and membership in the corporation shall be limited to such owners of record of units. Membership in the corporation shall terminate when a person is no longer the owner of

record of a unit. Subject to the foregoing, admission to and termination of membership and the voting rights of members shall be more particularly governed by the Master Deed for Arbor Creek, Section 2 Condominiums and the Bylaws for the corporation.

**ARTICLE VI**

The name and address of the incorporator is William B. Bardenwerper, 8311 Shelbyville Road, Louisville, Kentucky 40222.

**ARTICLE VII**

The initial board of directors of the corporation shall consist of 3 persons who shall serve until the first annual meeting of the members of the corporation. The names and addresses of said directors are:

<u>Name</u>	<u>Address</u>
Scott James	331 Townepark Circle, Suite 100 Louisville, Kentucky 40243
Steve Raiche	331 Townepark Circle, Suite 100 Louisville, Kentucky 40243
Troy Finsel	331 Townepark Circle, Suite 100 Louisville, Kentucky 40243

At the first annual meeting of the members of the corporation, 3 members of the Board of Directors shall be elected. Thereafter, the affairs of the corporation shall be conducted by a Board of Directors of not less than three persons nor more than the number of persons specified in the bylaws for the corporation.

**ARTICLE VIII**

A director shall not be liable to the corporation or its members for monetary damages for any act or omission constituting a breach of his duties as a director unless such act or omission (1) is one in which the director has a personal financial interest which is in conflict with the financial interests of the corporation or its members; (2) is not in good faith or involves intentional misconduct or is known to the director to be a violation of law; (3) is a vote for or assent to a distribution made in violation of these articles of incorporation or which renders the corporation unable to pay its debts as they become due in the usual course of business or which results in the corporation's total liabilities exceeding its total assets; or (4) is a transaction from which the director derived an improper personal benefit.

If the Kentucky Revised Statutes are hereafter amended to authorize corporate action further eliminating or limiting the personal liability of directors, then the liability of a director of the corporation shall be eliminated or limited to the fullest extent permitted by the Kentucky Revised



Statutes, as so amended. Any repeal or modification of this Article by the members of the corporation shall not adversely affect any right or protection of a director of the corporation existing at the time of such repeal or modification.

#### ARTICLE IX

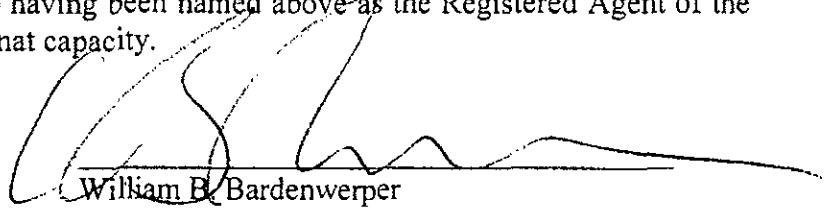
The Corporation shall indemnify any person who was or is a party of, or is threatened to be made a party to, any threatened, pending or completed action, suit or proceeding, whether civil, criminal, administrative or investigative, by reason of the fact that she/he is or was a director or officer of the Corporation, or is or was serving at the request of the Corporation as a director, officer, employee or agent of another corporation, partnership, joint venture, trust or other enterprise, against expenses (including attorneys' fees), judgments, fines and amounts paid in settlement actually and reasonably incurred by him in connection with such action, suit or proceeding if he acted in good faith and in a manner he reasonably believed to be in or not opposed to the best interests of the Corporation, and with respect to any criminal action or proceeding, had no reasonable cause to believe his conduct was unlawful; except that with respect to an action by or in the right of the Corporation, no indemnification shall be made in respect of any claim, issue or matter as to which such person shall have been adjudged to be liable for negligence or misconduct in the performance of his duty to the Corporation, unless and only to the extent that the court in which such action or suit was brought shall determine upon application that, despite the adjudication of liability, but in view of all circumstances of the case, such person is fairly and reasonably entitled to indemnification for such expenses which such court shall deem proper. Such indemnification shall be made to the full extent permitted by Kentucky law.

#### ARTICLE X

The Corporation may enter contracts or transact business with one or more of its directors, officers or members, or with any firm and with which one or more of them are members, or with any corporation or association in which any of them is a member, director or officer, and such contract or transaction shall not be invalidated or affected by the fact that such director, officer or member has, or may have, an interest therein which is or might be adverse to the interests of the Corporation, even though the vote of the director, officer or member having such adverse interest shall be necessary to obligate the Corporation upon such contract or transaction; and no director, officer or member having such adverse interest shall be liable to the Corporation or to any member or creditor thereof, or to any person for any loss incurred by it, or them, under or by reason of, any such contract or transaction; nor shall any such director, officer or member be accountable for any gain or profit realized thereon; PROVIDED, HOWEVER, that such contract or transaction shall, at the time it was entered into, have been a reasonable one and shall have been upon such terms as, at that time, were fair.

Any contract, transaction or act of the Corporation or of the directors which shall be ratified by a majority of a quorum of the members then entitled to vote at any annual meeting or at any special meeting called for such purpose shall, insofar as permitted by law and by these Articles of Incorporation, be as valid and binding as those ratified by every member of the Corporation.


IN TESTIMONY WHEREOF, witness the signature of the sole incorporator this 12 day of May, 2006, who having been named above as the Registered Agent of the company, hereby consents to serve in that capacity.

  
William B. Bardenwerper

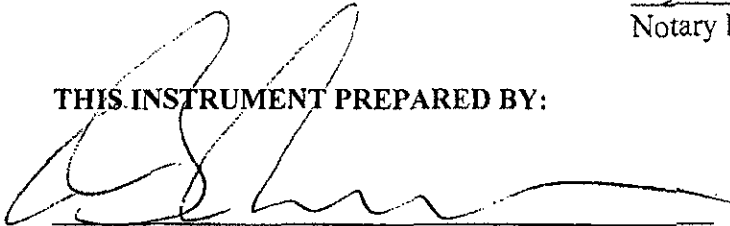
COMMONWEALTH OF KENTUCKY )  
 ) SS:  
COUNTY OF JEFFERSON )

I, the undersigned notary public in and for the State and County aforesaid, do hereby certify that William B. Bardenwerper personally appeared before me and, after having been duly sworn, declared, acknowledged, and verified the foregoing to be the Articles of Incorporation of Arbor Creek, Section 2 Condominiums Council of Co-Owners, Inc., this 12 day of May, 2006.

My commission expires: Oct 22, 2008.

  
Notary Public, State at Large, Kentucky

THIS INSTRUMENT PREPARED BY:



**BARDENWERPER, TALBOTT & ROBERTS, PLLC**  
8311 Shelbyville Road  
Louisville, Kentucky 40222  
(502) 426-6688

E:\CLIENT\FOLDER\McBride\Arbor Creek Sec. 2\Arbor Creek, Section 2 - Art 020106  
JTR - Rev.05/11/2006 11:49 AM

Document No.: DN2886879429  
Lodged By: bardenwerper law firm  
Recorded On: 05/18/2006 03:42:25  
Total Fees: 11.00  
Transfer Tax: .00  
County Clerk: BOBBIE HOLSCAW-JEFF CO KY  
Deputy Clerk: ANASHD

**END OF DOCUMENT**

**AMENDMENT TO THE BYLAWS  
OF THE ARBOR CREEK, SECTION 2 CONDOMINIUMS  
COUNCIL OF CO-OWNERS**

This amendment to the Bylaws of Arbor Creek, Section 2 Condominiums Council of Co-Owners, Inc. (hereafter called the "Council"), is made and entered into as of MARCH 29, 2012, by the undersigned member of the Board of Directors of the Council and a majority of the Unit Owners.

WHEREAS the Bylaws of the Arbor Creek, Section 2 Condominiums Council of Co-Owners is dated October 26, 2008.

WHEREAS KRS 381.860 provides that said Bylaws may be amended by a vote of a majority of the Council.

WHEREAS a meeting was called for the purpose of amending the bylaws and by the ratification by execution of this instrument by the requisite majority of Unit Owners of Arbor Creek, Section 2 Condominiums, to adopt the following amendment, to modify and change the Bylaws as hereinafter set out;

WHEREAS Article III (D) of the Bylaws stated as follow:

**Election and term of office:** The directors shall be elected at each annual meeting of the unit owners. Directors shall hold office for a term of one year and subsequently until their respective successors shall have been duly elected, or until such director is removed pursuant to section III(E) of these bylaws; provided, however, that a director shall be deemed to have resigned whenever such director, such director's spouse, or firm, corporation, or other entity with which he or she is associated, conveys the unit which qualified such individual to become a director or terminates such director's relationship with that unit owner which qualified such individual to become a member of the board of directors. Except as to vacancies created by removal of directors by unit owners, vacancies in the board of directors occurring between annual meetings of unit owners shall be filled by vote of the majority of the remaining directors, whether or not such a majority constitutes a legal quorum of the board of directors. If such directors are unable to agree, such vacancy shall be filled by vote of the unit owners at a special meeting called by the president for such purpose promptly after the meeting at which it is finally determined by the remaining directors that they are unable to agree.

WHEREAS Article III (D) of the Bylaws is hereby amended to read as follows:

**Election and term of office:** At the February 2013 annual meeting the Board will be elected to staggered terms. By drawing, two of the five Directors shall be selected for a one year term, and the remaining three Directors shall be assigned a two year term (each Annual Meeting thereafter, will elect Board Members to 2 year terms) and subsequently until their respective successors shall have been duly elected, or until such director is removed pursuant to section III(E) of these bylaws; provided, however, that a director shall be deemed to have resigned whenever such director, such director's spouse, or firm, corporation, or other entity with which he or she is associated, conveys the unit which qualified such individual to become a director or terminates such director's relationship with that unit owner which qualified such individual to become a member of the board of directors. Except as to vacancies created by removal of directors by unit owners, vacancies in the board of directors occurring between annual meetings of unit owners shall be filled by vote of the majority of the remaining directors, whether or not such a majority constitutes a legal quorum of the board of directors. If such directors are unable to agree, such vacancy shall be filled by vote of the unit owners at a special meeting called by the

president for such purpose promptly after the meeting at which it is finally determined by the remaining directors that they are unable to agree.

IN TESTIMONY WHEREOF, witness the signature the President of the Arbor Creek, Section 2 Condominium Council of Co-Owners, Inc. on behalf of the requisite majority of Unit Owners of the Arbor Creek, Section 2 Condominium Council on the dates as indicated below.

**ARBOR CREEK, SECTION 2 CONDOMINIUMS  
COUNCIL OF CO-OWNERS**

Mary Anne Givens

Signature

By: MARY ANNE GIVENS

Title: President, Arbor Creek, Section 2 Condominiums  
Council of Co-Owners, Inc.

COMMONWEALTH OF KENTUCKY)

) ss.

COUNTY OF JEFFERSON )

The foregoing instrument was subscribed, sworn to and acknowledged before me this

29th day of March 2012, by Mary Anne Givens

President of the Arbor Creek, Section 2 Condominiums Council of Co-Owners, Inc.

My Commission Expires: 10/25/12

NOTARY PUBLIC: Jeanette Pollett

\_\_\_\_\_

IN TESTIMONY WHEREOF, witness the signature the Secretary as representative of the Board of Directors for the Arbor Creek, Section 2 Condominiums Council of Co-Owners, Inc. in the approval of the second amendment to the Bylaws of the Arbor Creek, Section 2 Condominiums Council on the dates as indicated below.

**ARBOR CREEK, SECTION 2 CONDOMINIUMS  
COUNCIL OF CO-OWNERS**

*Shirley Ryan*

Signature

By: SHIRLEY RYAN

Title: Secretary, Arbor Creek, Section 2 Condominiums Council of Co-Owners, Inc.

COMMONWEALTH OF KENTUCKY)

) ss.

COUNTY OF JEFFERSON )

The foregoing instrument was subscribed, sworn to and acknowledged before me this 29<sup>th</sup> day of March 2012, by Shirley Ryan,

Secretary of the Arbor Creek, Section 2 Condominiums Council of Co-Owners, Inc.

My Commission Expires: 10/25/12

NOTARY PUBLIC: Jeanette Pollett

DB 9867PG0384

This Instrument Prepared for the Arbor Creek, Section 2 Condominium  
Council of Co-Owners by:

*Nan Gillespie*

*05-29-2012*

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Paragon Management Group  
Nan Gillespie, Association Manager  
5151 Jefferson Blvd., Suite 103  
Louisville, KY 40219

Date

# Arbor Creek, Section 2 Condominiums

(Villas at Arbor Creek, Section 2)

2018  
0.0%

2019  
7.00%

2019	Annual Budget	Amounts	
	Total Maintenance Fees	\$166,300.00	\$177,941.00
	<b>Total Income =</b>	<b>\$166,300.00</b>	
<b>Expenses:</b>			
Utilities:			
	Electricity: Street Lights & Fountain	\$7,284.00	\$7,684.00
	Electricity: Entrance	\$890.00	\$500.00
	<b>Utilities Total =</b>	<b>\$8,174.00</b>	<b>\$8,184.00</b>
Landscaping & Upkeep:			
	Mowing & Landscape - Contract	\$34,685.00	\$42,400.00
	Shrubs and Tree Replacements		\$5,000.00
	Landscaping/Erosion - Other	\$6,000.00	\$6,000.00
	Snow Removal	\$5,000.00	\$4,300.00
	Maintenance-Pond/Fountain	\$2,300.00	\$2,500.00
	Irrigation Entrance	\$2,650.00	
	Pond Concrete Removal	\$2,500.00	\$2,500.00
	<b>Landscaping Totals =</b>	<b>\$53,135.00</b>	<b>\$62,700.00</b>
General Repairs			
	General Repairs/Maintenance	\$19,000.00	\$19,000.00
	Road Patching		\$2,500.00
	<b>Total General Repairs =</b>	<b>\$19,000.00</b>	<b>\$21,500.00</b>
Housekeeping			
	Trash Collection/Removal	\$9,000.00	\$9,000.00
	Pest Control	\$1,000.00	\$1,000.00
	Entrance Irrigation Water	\$5,000.00	
	<b>Total Housekeeping =</b>	<b>\$15,000.00</b>	<b>\$10,000.00</b>
	Insurance - Master Policy	\$33,433.00	\$36,000.00
	Professional Management Fee	\$12,528.00	\$13,884.00
	Audit & Tax Filing Fee (Compilation)	\$875.00	\$450.00
	Attorney Fees	\$2,100.00	\$3,000.00
	Postage/Copies	\$850.00	\$850.00
	<b>Administrative Totals =</b>	<b>\$49,786.00</b>	<b>\$54,184.00</b>
Taxes			
	Federal Taxes		
	KY Corporation Filing (Annual Report)	\$15.00	\$15.00
	<b>Tax Totals =</b>	<b>\$15.00</b>	<b>\$15.00</b>
	<b>Total Expenses</b>	<b>\$145,110.00</b>	<b>\$156,583.00</b>
	<b>Reserve Contributions</b>	<b>\$21,190.00</b>	<b>\$21,353.00</b>
	<b>Total Expense Plus Reserve Contribution</b>	<b>\$166,300.00</b>	<b>\$177,936.00</b>
	<b>% Reserve Contribution</b>	<b>13%</b>	<b>12%</b>

**Arbor Creek Condominiums**  
**Profit & Loss**  
**March 2019**

Cash Basis

	Mar 19
<b>Ordinary Income/Expense</b>	
<b>Income</b>	
Late Fees	175.00
Maintenance Fees	14,909.04
Transfer Fees	400.00
<b>Total Income</b>	15,484.04
<b>Gross Profit</b>	15,484.04
<b>Expense</b>	
<b>Administrative</b>	
BOD Class	90.10
<b>Insurance Expense</b>	
General Liability	3,154.03
<b>Total Insurance Expense</b>	3,154.03
Postage/Copies	57.50
<b>Professional Fees</b>	
Legal Fees	270.00
Property Management Fees	1,157.00
Tax Preparation	450.00
<b>Total Professional Fees</b>	1,877.00
<b>Total Administrative</b>	5,178.63
<b>Housekeeping</b>	
Trash Removal	755.61
<b>Total Housekeeping</b>	755.61
<b>Landscaping and Groundskeeping</b>	
Contract Maintenance	6,321.44
<b>Landscaping/Erosion</b>	
Bird Cages	162.03
Landscaping	1,196.85
<b>Total Landscaping/Erosion</b>	1,358.88
<b>Total Landscaping and Groundskeeping</b>	7,680.32
<b>Taxes</b>	
Federal Taxes	779.00
<b>Total Taxes</b>	779.00
<b>Utilities</b>	
<b>Electric</b>	
Entrance	34.98
Street Lights & Fountain	486.92
<b>Total Electric</b>	521.90
<b>Total Utilities</b>	521.90
<b>Total Expense</b>	14,915.46
<b>Net Ordinary Income</b>	568.58
<b>Other Income/Expense</b>	
<b>Other Income</b>	
Interest Income	243.68
<b>Total Other Income</b>	243.68



**Arbor Creek Condominiums**  
**Profit & Loss**  
March 2019

Cash Basis

---

	Mar 19
Other Expense	
Allocate to Reserve	2,515.00
Move to Reserve	-2,515.00
	<hr/>
Total Other Expense	0.00
	<hr/>
Net Other Income	243.68
	<hr/>
Net Income	<u>812.26</u>

**ARBOR CREEK, SECTION 2 CONDOMINIUMS COUNCIL OF CO-OWNERS, INC.****General Information**

<b>Organization Number</b>	0638720
<b>Name</b>	ARBOR CREEK, SECTION 2 CONDOMINIUMS COUNCIL OF CO-OWNERS, INC.
<b>Profit or Non-Profit</b>	N - Non-profit
<b>Company Type</b>	KCO - Kentucky Corporation
<b>Status</b>	A - Active
<b>Standing</b>	G - Good
<b>State</b>	KY
<b>File Date</b>	5/15/2006
<b>Organization Date</b>	5/15/2006
<b>Last Annual Report</b>	6/10/2019
<b>Principal Office</b>	C/O CEDAR PROPERTY MANAGEMENT 4506 BARDSTOWN RD. #1 LOUISVILLE, KY 40218
<b>Registered Agent</b>	MICHAEL R CURTIS 4506 BARDSTOWN RD #1 LOUISVILLE, KY 40218

**Current Officers**

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

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**Images available online**

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

<a href="#">Annual Report</a>	6/10/2019	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	6/6/2018	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	6/15/2017	1 page	<a href="#">PDF</a>
<a href="#">Registered Agent name/address change</a>	12/29/2016 2:47:00 PM	1 page	<a href="#">PDF</a>
<a href="#">Principal Office Address Change</a>	12/29/2016 2:43:32 PM	1 page	<a href="#">PDF</a>
<a href="#">Annual Report</a>	5/17/2016	1 page	<a href="#">PDF</a>



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August 20, 2018

The Arbor Creek Condominium Council Board of Directors  
6822 Arbor Manor Way  
Louisville, Kentucky 40228

**Re: Arbor Creek Consultation**

Dear Members of the Board:

*This letter is to update you about our research regarding development bonds and ownership of roadways.*

**Development Bond Issue:**

In July 2018, we conducted preliminary research regarding required Development Bonds. Our research indicated the following.

In Jefferson County, the Louisville-Metro Land Development Code ("LDC") governs land development for most areas. More specifically, Chapter 7 of the LDC regulates the development of subdivisions. This chapter appears to require two bonds from the developer, a performance bond and an encroachment bond, and one bond from the builder. *The purpose of the performance bond seems to be to ensure that the developer fulfills its commitment. 7.2.45(B) states that:*

*There shall be filed with the Director of Works a bond instrument(s) approved by the Planning Commission and in the amounts determined by the Director of Works and MSD to insure fulfillment of the subdivider's commitment as set out above. Reduction of bond requirements shall not alter the subdivider's liability for fulfilling the obligations set out in Section 7.2.45(1).*

LDC 7.2.45(B). The preceding subsection appears to impose a duty on the developer to create a subdivision that complies with the recorded plat and city ordinances. 7.2.45(A). Additionally, this subsection suggests that the developer must complete the development project within a timely manner. *Id.* If the developer fails to keep this commitment then it seems as though the bond will not be released.

This performance bond may also be released if certain requirements are met. 7.2.60 states:

A subdivider may request a release from responsibility for the good repair and proper functioning of required improvements by the Planning Commission in accordance with the following procedures:

A. A written request for release shall be submitted to the Director of Works with copies sent to Metropolitan Sewer District, the Board of Health, the agency or official having jurisdiction with respect to fire protection, and the Mayor or designee if the subdivision is located within an incorporated city. This release may be requested after primary buildings have been built on 80% of all lots shown on *the record plat and the street improvements (public and private), drainage facilities*, but not including sidewalks on unimproved lots, have been installed in a good and workmanlike manner and are functioning in accordance with the approved construction plans.

B. After eighty percent (80%) of the lots shown on the record plat have primary structures built on them, the subdivider may request bond release. Upon receipt of a written request from a subdivider, the appropriate agencies must inspect the subdivision and inform the subdivider in writing of approval or deficiencies within thirty (30) days. If deficiencies are noted, the subdivider shall have forty-five (45) days to complete the repairs and request re-inspection. The agency shall re-inspect and advise the subdivider of approval or further deficiencies *within two weeks*. Each agency shall provide original inspection reports and release approvals to Public Works. If the subdivider disagrees with the written comments received, an appeal may be filed with the Planning Commission. The Commission shall review this request through the Land Development and Transportation Committee.

C. Upon obtaining a written release from all appropriate agencies, the Director of Works may release the subdivision bond completely or reduce the bond to an amount necessary to insure the installation of sidewalks, related drainage and any other right-of-way and easement improvements. This bond shall be considered as if it were a separate bond designed solely for that purpose to be released by the approval of the Director of Works with the approval of the appropriate agencies. If a sidewalk only, pavement only, or drainage only bond is required, it shall be of a limited time period to insure that all such improvements are constructed and fully functioning within two years of date of said bond. The eighty percent (80%) figure referred to above may be increased or reduced by the Director of Works, as specified in Section 7.2.45 (1).

LDC 7.2.60. If these conditions are not met then it appears that the Director of Works will not release the bond. The LDC does not indicate that there are any additional consequences for the developer failing to complete the subdivision project.

In addition to the performance bond, an encroachment bond must also be posted with Public Works *“if the subdivision construction entrance is accessed from a roadway classified as a local street.”*

LDC 7.2.25. This bond is a minimum of \$5,000 but may be more. *Id.* The encroachment bond is for potential damage caused to existing public roads as a result of the construction of the subdivision. *Id.* This bond is not required “for construction entrances located off collector or arterial level roadways.” *Id.* The LDC does not appear to discuss how the encroachment bond is released.

The third bond Chapter 7 of the LDC appears to require is a builder’s bond. 7.2.70 of the LDC states:

At the time of the subdivider’s release from guaranteeing proper functioning of required improvements pursuant to Section 2.60, each builder is required to post with the Director of Works and/or M.S.D. a Builder’s Bond prior to the issuance of the building permit to insure the fulfillment of the obligations set out in Section 7.2.65 and to insure compliance with the tree canopy requirements and sidewalk requirements in accordance with Part 4. The bond shall be in the amount of \$2,500.00 or an appropriate amount as determined by the Director of Works, the Director of Planning, and/or M.S.D. In the event a building permit has been issued on unimproved lots that are sensitive to generation of drainage related damages to existing development at the time of release of the subdivider’s performance bond, a \$2,500.00 bond or an appropriate amount shall be posted on those lots by the builder. “Unimproved lots” refers to those on which no primary building has been constructed.

LDC 7.2.70. Once the developer has fulfilled its commitment, it appears that the LDC imposes a similar duty on the builder by requiring the Builder’s Bond. LDC 7.2.65.

In order for a builder’s bond to be released, the LDC provides that:

Application for release of a builder's bond (7.2.70) may be made by filing a certificate with the Planning Commission and the Director of Works or M.S.D. in conformance with Section 7.9.42 bearing notice that false statements made therein are punishable. Within 60 days of receipt of application for release of a builders bond, the Director of Planning, Director of Works or M.S.D. may make an inspection of the subdivision and shall grant the release where it appears to his reasonable satisfaction that the required improvements are installed and are in good repair and functioning properly on and adjacent to the lot and that there is no reason to believe that construction on the lot has or will cause malfunctioning of installed improvements in other areas.

LDC 7.2.75.

The issue presented by the Board for Arbor Creek is whether the new developers are legally obligated to complete items that previous developer had left unfinished. Under the LDC, it appears that the developer and builders are only obligated to complete the project if they do not wish to lose the bond they have posted. Additionally, there did not seem to be a statute in KRS Chapter 100 Planning and Zoning creating liability for failure to finish a development project.

In addition to this research, our office called the Louisville Metro Department of Planning and Zoning in an effort to confirm that Stony Arbor Development, LLC had posted a development bond and to determine how much of a bond had been posted. Unfortunately, our call went unanswered for a number of days.

*On July 30, 2018 we finally received a call from Cheryl Woods of Planning and Zoning. Ms. Woods confirmed that developers were required to post a development bond. We also asked her whether she could tell us if a bond had been posted for Arbor Creek. Ms. Woods searched for a bond under: Arbor Creek Condominiums, Arbor Creek Section 2 Condominiums, Stony Arbor, LLC, Stony Arbor Development, LLC, and McBride Builders. Ms. Woods was not able to find that a development bond had been posted. When we asked Ms. Woods why there would not be a bond she informed us that it was either not posted or listed under another name. She informed us that if the Condominium Association has not gone by another name then the next step would be for us to reach out to her supervisor.*

#### **Issues pertaining to the roads:**

We also conducted research pertaining to who owned the roads for Arbor Creek and who bears the responsibility for finishing, maintaining, and/or repairing the roads.

Under KRS § 178.420, “[t]he county works department shall maintain a road, street, or highway which is has acquired pursuant to the provisions of KRS 178.405 to 178.425 in the same manner as it maintains any other county road.” A private road will become public, “When any private road, street, or highway in an unincorporated area in any county has been used by the general public openly, continuously, and notoriously for a period of at least fifteen (15) years, it shall be implied that such road, street, or highway may be dedicated to public use; Provided, that fifty-five percent (55%) of all property owners abutting the private road, street, or highway sign a petition stating that they are willing to dedicate the road, street, or highway to public use.” KRS § 178.405.

Based on this statute, our office placed a call to the Department of Public Works to determine whether the roads were owned and/or maintained by the government. The individual we spoke with informed us that the government did not own or maintain the roads and that, as a general rule condominiums are responsible for the cost of upkeeping the roads.

*Given that the department of Public Works informed us that the roads for Arbor Creek were not in their system, it is reasonable to assume that the roads are most likely private. This would mean that the Board would be responsible for maintenance and/or repair. Thus, the Master Deed and Bylaws would control.*

Pursuant to the Master Deed for Arbor Creek, the roads are a common element. *See* Master Deed Article I (E). Additionally, the Master Deed provides that the Board is responsible for maintaining and repairing the Common Elements. *Id.* at Article III (F). The problem arising here is that the roads remain unfinished because the developers have not completed the project. Which raises the question as to who has the duty to finish the roads.

November 19, 2018

April

Mayor Fischer,

I am writing this letter regarding concerns within our community, Arbor Creek Section 2, which is in dire need of your assistance. We are currently enduring poor road conditions, and degrading surface areas are getting worse.

I moved into my development in 2006. In 2012 the builders, McBride Builders filed for a DEED WARRANTY, which actually means they filed for bankruptcy. Bank of America took the property back. I then started trying to get us help by contacting Bank of America with no success of getting the roads within our community resurfaced or repaired.

February 3, 2014 and on June 25, 2014 I called MSD regarding the deterioration of the roads and the water runoff grates being higher than the original surface level, which causes the water to stand and freeze in the winter months worsening the problem. They said they could not help us with our situation. I then called Public Works and spoke with Jim Mimms in Inspections, Permits, and License for some type of assistance or directing me to an appropriate source of communication. During the last few years we have continued to endure the deteriorating road conditions and our homeowners association paid to patch and repair the roads to the best of our ability. The current road surface distance in need of resurfacing is 0.5216 of a mile. The remaining roads have been resurfaced. They are currently in new condition from the new developer which had to comply with permits and licenses department to be able to continue to build new construction housing.

The investment group that purchased the remaining lots from the Bank of America, was the Marion Group. They kept lots for 2 years without doing any construction at all, nor had they done any repairs to the roads. The Marion Group then sold the empty lots along with the roads to Stony Farms, Arbor Creek LLC., approximately mid 2016. In 2017-2018 Stony Farms, Arbor Creek LLC built on two of the available lots. In August of 2018 two more units have began construction and they have not been completed, leaving 15 available lots.

I have been the President of our Board of Directors since McBride turned the responsibilities over to the homeowners. I am hoping you can help our community improve the living conditions and the safety of our roadways. Currently it is not in safe condition for a bicyclist to travel throughout our community on these portions that are in need of resurfacing. As a homeowners association we have patched the roads when it was not our responsibility, because the builders refused. They were the responsible party for road repairs. We bought into this community not knowing we would be in this situation 12-13 years later. Several of our homeowners are retired and they are afraid if something isn't done soon our property values will go down. Many of our residents are also worried that they will not be able to sell their properties due to the current road conditions.

Mayor Fischer, I'm hoping you can help the residents of our community with some type of road improvement assistance or takeover of the roads within our Arbor Creek Section II, which the total distance of roads is 0.8680 including the newly resurfaced distance and the current degraded road surface area.

Attached is a map of our development along with a few pictures of our roads. The highlighted area on the map is where the current builder recently paved.

Thank you for reviewing the above communication as I know that your time is valuable within the entire metro community.

Pamela Dunn Hudson  
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