

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

Applicant/Program: Lucky Horseshoe Neighborhood Association

Executive Summary of Request: The association is requesting funding to replace existing banners that help beautify and promote the neighborhood association.

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

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

organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required.

<u>15</u>		<u>\$800.00</u>	<u>4-20-15</u>
District #	Primary Sponsor Signature	Amount	Date

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

Approved by:

_____	_____
Appropriations Committee Chairman	Date

Clerk's Office Only:

Request Amount: _____	Committee Amended Appropriation: _____
Original Appropriation: _____	Council Amended Appropriation: _____

**OFFICE OF METRO COUNCIL CLERK
REVIEWED**

DATE 4/20/15 TIME 11:44

NDF NON-PROFIT APPLICATION CHECKLIST

Legal Name of Applicant Organization: <i>Lucy Horseshoe</i>		Yes/No/NA
Program Name: <i>Banner Replacement</i>	Request Amount: <i>\$ 800.-</i>	
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?		✓
Request form: Is the funding proposed less than or equal to the request amount?		✓
Request form: Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?		✓
Application Page 1: Has prior Metro funds committed/granted been disclosed?		✓
Application Page 1: Is the application properly signed and dated by authorized signatory?		✓
Application Page 3: Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?		✓
Application Pages 3 – 5: Is the proposed public purpose of the program well-documented?		✓
Application 4: Is there adequate documentation of how the proceeds of the fundraiser will be spent?		<i>n/a</i>
Application Budget Page 6: Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for “Metro, Non Metro and Total” expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?		<i>y</i>
Faith Based Organizations: Is the signed Faith Based Form signed and included?		<i>n/a</i>
Jefferson County Only: Will all funding be spent in Louisville/Jefferson County?		<i>yes</i>
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?		<i>n/a</i>
Good Standing: Is the entity in good standing with: <ul style="list-style-type: none"> • <u>Kentucky Secretary of State</u> – include Secretary of State website information on organization • <u>Louisville Metro Government</u> – check OMB monthly report filed in Council Financial Reports ✓ • <u>Internal Revenue Service</u> – most recent Form 990 included 		
Separate Taxing Districts: If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?		<i>n/a</i>
Small Cities: Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)		<i>n/a</i>
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?		<i>yes</i>
IRS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?		<i>yes</i>
Operating Budget: Is the organization’s current fiscal year operating budget included?		<i>y</i>
Ordinance Required: Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.		<i>n/a</i>
Board Members: Is the entity’s board member list (with term length/term limits) included?		<i>yes</i>
Staff: Is a list of the highest paid staff included with their expected annual personnel costs?		yes <i>n/a</i>
Annual Audit: Is the most recent annual audit (if required by organization) included?		<i>n/a</i>
Rent Requests: Is a copy of signed lease included?		<i>n/a</i>
Articles of Incorporation: Are the Articles of Incorporation of the organization included?		<i>yes</i>
IRS Form W-9: Is the IRS Form W-9 included?		<i>n/a</i>
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?		<i>n/a</i>
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?		<i>n/a</i>
Prepared by: <i>S. Hughes</i>	Date: <i>April 14, 2015</i>	

APR 16 2015 PM 3:20 M. 23



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization:		Lucky Horseshoe Neighborhood Association	
<i>(as listed on: http://www.sos.ky.gov/business/records)</i>			
Main Office Street & Mailing Address: 1017 Queen Avenue Louisville KY 40215			
Website:			
Applicant Contact:	Kim Wirth	Title:	Treasurer
Phone:	502 363 5739	Email:	kwirth69@twc.com
Financial Contact:	Same	Title:	
Phone:		Email:	
Organization's Representative who attended NDF Training: Kim Wirth reviewed on louisvilleky.gov website			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	4th Street to Taylor Blvd. and Central Ave to Longfield Ave		
Council District(s):	15	Zip Code(s):	40215
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: Replacement of Neighborhood Banners			
Total Request: (\$)	800.00	Total Metro Award (this program) in previous year: (\$)	0.00
Purpose of Request (check all that apply):			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input checked="" type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input type="checkbox"/> IRS Exempt Status Determination Letter <input type="checkbox"/> Current Year Projected Budget <input checked="" type="checkbox"/> List of Board of Directors (include term & term limits) <input checked="" type="checkbox"/> Current financial statement <input type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense		<input type="checkbox"/> Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 <input type="checkbox"/> Evaluation forms if used in the proposed program <input type="checkbox"/> Annual audit (if required by organization) <input type="checkbox"/> Faith Based Organization Certification Form, if required <input type="checkbox"/> Staff including the 3 highest paid staff	
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.			
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Has the applicant met the BBB Charity Review Standards? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

Focus on keeping crime down and keeping our neighborhood safe. Keep the neighborhood clean by picking up trash, making sure rubbish is picked up and finally beautification.

Banners have been in place for 3 years and have been noticed by many persons visiting during Derby week. We feel they have made an improvement to our neighborhoods visibility.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 – PROGRAM/PROJECT NARRATIVE

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

As soon as funds are received on of the existing banners will be removed and taken to Oates Flag company and they will remake them.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s):
Spoke with Randy at Oates Flag company he will remake each banner at \$100.00 a piece.



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

n/a

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

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

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

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

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

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



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Occurrences of crime have decreased by neighbors calling LMPD. LMPD tracks crimes monthly, quarterly, and yearly.

Kim Wirth was appointed to the 4th Division 2014 Major's Advisory board and has served as an advocate voicing neighborhood concerns.

This information can be found on the louisvilleky.gov website.

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.

Operation Brightside participation twice a year has helped decrease the amount of trash/junk being set out in the neighborhood.

We support existing Neighborhood Associations within the boundaries of Churchill Downs by attending meetings and special events they hold.

We have participated with 4th Division LMPD National Nite Out event by handing out literature regarding crime prevention and safety tips.

We have participated in crime prevention classes held by Sullivan University and brought back information to our members and neighbors.

Without the banners we feel many of the neighbors in our community would not have know there is a neighborhood association/block watch where they live.



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SECTION 5 – PROGRAM/PROJECT BUDGET SUMMARY

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

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
A: Personnel Costs Including Benefits	0	0	0
B: Rent/Utilities	0	0	0
C: Office Supplies	0	500.00	500.00
D: Telephone	0	0	0
E: In-town Travel	0	0	0
F: Client Assistance (Attach Detailed List)	0	0	0
G: Professional Service Contracts	0	0	0
H: Program Materials	0	0	0
I: Community Events & Festivals (Attach Detail List)	0	0	0
J: Machinery & Equipment	0	200.00	200.00
K: Capital Project	800.00	0	800.00
L: Other Expenses (Attach Detail List)	0	0	0
*TOTAL PROGRAM/PROJECT FUNDS	800.00	700.00	1500.00
% of Program Budget	100 %	100 %	100%

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

Other State, Federal or Local Government	0
United Way	0
Private Contributions (do not include individual donor names)	500.00
Fees Collected from Program Participants	200.00
Other (please specify)	0
Total Revenue for Columns 2 Expenses **	700.00

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

**Must equal or exceed total in column 2.

Entire budget on the budget, 4/1/14



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Dave Tate, Kim Wirth, Rick Mattingly	20 hours a week at \$10.00 an hour	Time
<p align="center"><i>Total Value of In-Kind</i> (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)</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 1 2015**

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

If YES, please explain:



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – CERTIFICATIONS & ASSURANCES

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

Standard Assurances

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

Standard Certifications

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

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

SECTION 7 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:	<i>Kimberly L. Wirth</i>	Date:	<i>Jan 20, 2015</i>
Legal Signatory: (please print):	<i>Kimberly L. Wirth</i>	Title:	<i>Treasurer</i>
Phone:	<i>363-5739</i>	Extension:	
Email:	<i>KWIRTH69@TMC.COM</i>		

Lucky Horseshoe Neighborhood Association Board of Director's

Dave Tate – President April 2013 – April 2015

Rick Mattingly – Vice President April 2014 – April 2016

Kim Wirth – Treasurer April 2013 – April 2015

Donna Rul – Secretary April 2014 – April 2016

Brian Fortwengler – Member at Large April 2013 – April 2015

Joey Epperson – Sgt at Arms April 2014 – April 2016

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

DEPARTMENT OF THE TREASURY

Date: APR 16 2012

LUCKY HORSE NEIGHBORHOOD
ASSOCIATION INC
1017 QUEEN AVE
LOUISVILLE, KY 40215-2625

Employer Identification Number:

DLN:

302047010

Contact Person:

VERONICA PERRY

ID# 52119

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Form 990 Required:

Yes

Effective Date of Exemption:

April 30, 2009

Contribution Deductibility:

No

Addendum Applies:

No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax-exempt status we have determined that you are exempt from Federal income tax under section 501(c)(4) of the Internal Revenue Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Please see enclosed Publication 4221-NC, Compliance Guide for Tax-Exempt Organizations (Other than 501(c)(3) Public Charities and Private Foundations), for some helpful information about your responsibilities as an exempt organization.

Sincerely,



Lois G. Lerner
Director, Exempt Organizations

Enclosure: Publication 4221-NC

Term Limits

The Lucky Horseshoe Neighborhood Association allows any member to run for any office without any limit to the number of consecutive years they may hold an office.

**Request for Taxpayer
Identification Number and Certification**

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

Print or type
See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Kimberly L Wirth	
2 Business name/disregarded entity name, if different from above Lucky Horseshoe Neighborhood Association	
3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <small>Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.</small> <input type="checkbox"/> Other (see Instructions) ▶ _____ <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) 1017 Queen Avenue	
6 City, state, and ZIP code Louisville KY 40215	
7 List account number(s) here (optional)	
Requester's name and address (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number	
[] [] [] - [] [] [] - [] [] [] []	
or	
Employer identification number	
[] []	

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

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 on page 3.

Sign Here	Signature of U.S. person ▶ <i>Kimberly L. Wirth</i>	Date ▶ <i>April 2 2015</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

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

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

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

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

- By signing the filled-out form, you:
1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 2. Certify that you are not subject to backup withholding, or
 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.



PERMIT AUTHORIZING TEMPORARY ENCROACHMENT OF R-O-W

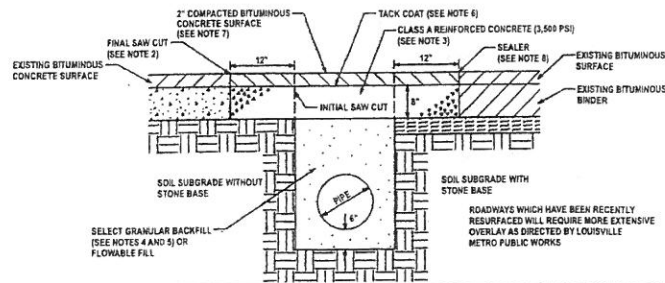
Section 8

Terms and Conditions

- Any person permitted to enter upon the right of way of the public way for the purpose of placing or constructing any encroachment thereon or thereunder, who in so doing disturbs in any way the roadway or the right of way, shall restore the public way, including the roadway or right of way to its original condition or better, except as otherwise specified in the permit.
- Such encroachments shall not interfere with, obstruct, or endanger the travel on and along the highways or roads, nor shall they unreasonably interfere in any way with the convenient, safe and continuous use and maintenance of such highway.
- In the case of pipeline crossings or other utility crossings constructed beneath the pavement, such construction shall be done, by jacking/boring a pipeline underneath the pavement without disturbing the roadway surface. When it is not practical to make the installation as described above and it becomes necessary to make the installation by the open cut method, pavement restoration shall be done in accordance with the standard pavement restoration policy shown on the drawings hereon, approved by the Department of Public Works, and this standard pavement restoration form shall be a part of the encroachment permit.
- The Permittee agrees that any encroachment permitted to be placed upon the right of way of the highway, when and if it unreasonably interferes in any way with the convenient, safe and continuous use of such highway or when it interferes in any way with the maintenance, relocation or reconstruction of such highway, shall remove the encroachment immediately after receipt of written notice from the Director of Works by such person at his own expense. The Permittee further agrees that in the event the Metro Government requires such removal or change in the location of any encroachment and the Department so notifies the Permittee or his agent to remove the same at his own expense to conform with the order within the time stated in the notice, the Department of Public Works may proceed to remove the obstruction. The expense thereby incurred shall be charged against the Permittee and shall constitute a lien and be levied and collected.
- Permittee hereby agrees and accepts the fact that a Permit for temporary use of public property hereunder is in no way to be construed as implying the granting of long-lasting or permanent tenure over the public property. Accordingly, the Permittee shall not transfer or assign any right or interest in the permit. Any attempt to assign or transfer the Permit shall be considered a substantial breach and shall render the Permit null.
- Permittee agrees to comply with all federal, state and local statutes, ordinances, rules and regulations that may apply to its use of the subject property for the duration of this Agreement.
- Permittee agrees that under no circumstances shall any public right-of-way or lands be used for commercial advertising.
- It is expressly understood that no employer/employee relationship is created by this agreement nor does it cause Permittee to be an officer or official of the government. By executing this agreement, the parties hereto certify that its performance will not constitute or establish a violation of any statutory or common law principle pertaining to conflict of interest, nor will it cause unlawful benefit or gain to be derived by either party.
- This Permit shall be governed by and construed in accordance with the laws of the State of Kentucky. In the event of any proceedings regarding this Permit, the Parties agree that the venue shall be the state courts of Kentucky or the U.S. District Court for the Western District of Kentucky, Louisville Division. All parties expressly consent to personal jurisdiction and venue in such Court for the limited and sole purpose of proceedings relating to this Agreement or any rights or obligations arising thereunder. Service of process will be in accordance with the designation of the party if such party is a corporation or association registered with the Kentucky Secretary of State. If such corporation is not required to be registered with the Kentucky Secretary of State due to an exemption provided by Kentucky statute, such corporation shall provide an original certificate of existence for the corporation from the corporation's state of incorporation. In such case, service of process shall be had by serving Kentucky's Secretary of State.

Section 9

DIAGRAM OF REQUIREMENTS FOR PAVEMENT RESTORATION



Repairs occur FROM:
Edge of Pavement (EOP) TO:
Edge of Pavement (EOP)

Section 10

Applicant's Signature of Acceptance of this Permit:

ACCEPTED BY: Daniel A. Metz
DATE: 30 APR 14

REQUIRED SIGNATURES

Metro Government Permit Authorized through the Department of Public Works

and APPROVED BY: [Signature]
DATE: 4/30/14

Section 11

INSPECTOR ASSIGNMENT

INSPECTOR'S NAME: _____ INSPECTOR'S NUMBER: _____

INSPECTOR'S COMMENTS/NOTES:

Section 12

INSPECTOR'S RELEASE: _____

DATE: _____



Louisville-Jefferson County Metro Government
Department of Codes & Regulations

Division of Construction Review
 444 S. 5th Street, Suite 100 - Louisville, KY 40202
 Phone: 502.574.3321 Web Site: louisvilleky.gov/jpl/Construction+Review/

Permit Number: 14RW2772 **Issue Date:** 04/30/2014

Applicant: LUCKY HORSESHOE N'HOOD ASSOC
 3421 TAYLOR BLVD.
 LOUISVILLE, KY 40215

P E R M I T

Location: 3421 TAYLOR BLVD 40215-0000

THIS PERMIT HAS BEEN GRANTED TO DO THE FOLLOWING:

TO PLACE POLE BANNERS IN "THE LUCKY HORSESHOE N'HOOD"

DAVID TATE --- 363-5739

TYPE	# CUTS	CUTLENGTH	CUTWIDTH	OVERLAY
------	--------	-----------	----------	---------

PERIOD OF TIME TEMPORAY PERMIT IS IN EFFECT: 04/30/2014 TO 05/30/2015

THE DEPARTMENT OF PUBLIC WORKS MUST BE NOTIFIED 24 HOURS PRIOR TO STARTING WORK.

Contact Person: DAN WILLEN **Mobile Phone Number:** (502)664-4771

PERMIT SPECIFICS

- § ALL WORK ZONES MUST COMPLY WITH THE LATEST MUTCD (Manual on Uniform Traffic Control Devices) GUIDELINES
- § PEAK HOUR RESTRICTIONS MUST BE OBEYED
 (NO WORK IN ZONES FROM 7 A.M. TO 9 A.M. AND FROM 3 P.M. TO 6 P.M., WITHOUT PERMISSION)

It is understood the above activity is to be Bonded, and the work performance shall be subject to the approval of the Department of Public Works upon completion and is to be completed with the date of this permit, after which this Permit is void.

It is agreed that the party to whom this permit is issued will hold the Metro Government harmless from all damages to persons or property that may result from the work, during its progress or after completion, or which may result from occupancy of the sidewalk, alley, street or movement of a vehicle under this permit.

All obstructions and hazards will be barricaded and will be lighted at night, and shall comply with MUTCD.

The contractor or person to perform the construction work shown on this permit does hereby guarantee the quality of such work and so stipulates the fact that said work will be performed in compliance with Metro Government Standards or Permittee shall remove such defective work and replace it at its own expense. The Permittee further agrees that any and all work to be performed on the subject property shall have the approval and authorization of the Director of the Department of Public Works of the Metro Government.

REVOCACTION: The Metro Government may revoke this Permit at any time in the interest of public health and safety. If the Permittee violates any of the terms of this Permit or otherwise endangers public health and safety, the Metro Government may proceed in any manner it concludes is appropriate including but not limited to: issuing a warning to the Permittee, assessing a penalty against the Permit Bond executed by the Permittee, or suspending or revoking this Permit, without compensating the Permittee in any manner, including, but not limited to, replacement value or fair market value of any improvement placed on this property, including losses or damages that may be suffered by Permittee as a result of noncompliance with the Louisville and Jefferson County Zoning District Regulations. In the event such a determination is made, the Metro Government shall forward written notice to Permittee, whereupon Permittee shall commence restoration as soon as possible.

APPEAL: The Permittee may appeal any suspension or revocation of this permit to the Director of Public Works, or his designee, within 48 hours of the suspension or revocation.

Any person permitted to make an encroachment on Metro Government-owned right of way must notify the Department of Public Works' office of the time the encroachment is to be started, and agrees that no openings or obstructions on the roadway or right of way that might constitute a hazard to the traveling public be left over night without specific approval, and then only with warning lights and signals, as may be prescribed by the Department of Public Works.

**Articles of Incorporation
of
Lucky Horseshoe Neighborhood Association, Inc.**

WE, THE UNDERSIGNED, having associated for the purposes of forming a non-profit, non-stock corporation, under and pursuant to the laws of the Commonwealth of Kentucky, and more particularly Chapter 273, Kentucky Revised Statutes (KRS), hereby certify as follows:

Article I

The name of the corporation shall be:
Lucky Horseshoe Neighborhood Association, Inc.

Article II

The duration of the corporation shall be perpetual.

Article III

The address of the registered and principal office of the corporation is:

1017 Queen Avenue
Louisville, KY 40215

The name of the initial registered agent for service of process, located at such address is:

Kim Wirth
1017 Queen Avenue
Louisville, KY 40215

Other places of business in said city or elsewhere may be designated by resolution of the board of directors.

Article IV

The corporation is organized and shall be operated exclusively for the promotion of social welfare as described within Section 501(c)(4) of the Internal Revenue Code (or corresponding provisions of any later federal tax laws), including for such purposes the making of distributions to organizations and individuals for the purpose of engaging in activity falling within the purposes of the corporation and permitted for an organization exempt under said Section 501(c)(4).

The purposes of the corporation shall be more specifically stated as follows:

- 1) enhance the health, safety and welfare of the members of the community;
- 2) provide a forum wherein neighborhood issues and concerns may be publicly expressed and discussed;
- 3) improve the economic life of the Lucky Horseshoe area;
- 4) encourage a spirit of friendliness and cooperation with other groups in the Lucky Horseshoe neighborhood and throughout Louisville/Jefferson County Metro and District 15;
- 5) foster cooperation and unity between property owners, tenants and others;
- 6) meet the educational and cultural needs of the members of the community;
- 7) encourage improvement in municipal services through public involvement and cooperation with local government;
- 8) encourage, plan and coordinate the beautification, preservation, rehabilitation and revitalization of all residential and public properties, structures and physical environment;
- 9) seek the assistance and cooperation from governmental agencies and other neighborhood associations to resolve neighborhood problems, achieve neighborhood objectives and goals, and to maintain and improve the quality of life for all residents of the neighborhood.
- 10) support other charitable, educational and cultural activities that advance the general well being of the community and its people.

Article V

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

Article VI

In carrying out the corporate purposes described in Article IV, the corporation shall have all the powers granted by the laws of the State of Kentucky, including in particular those listed in KRS 273.171 (or corresponding provision of any later State statute), except as follows and as otherwise stated in these Articles:

- a) Notwithstanding any other provision of these Articles, the corporation shall not carry on any other activities not permitted to be carried on:

- b) by a corporation exempt from Federal income tax under Section 501(c)(4) of the Internal Revenue Code, or the corresponding provisions of any subsequent Federal tax laws.

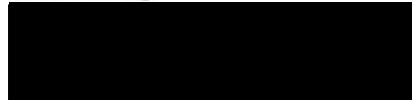
Article VII

The name and address of the incorporator is:

Incorporator

Kim Wirth

Address



Article VIII

The initial board of directors shall consist of three directors. The names and addresses of the members of the initial board of directors are:

Director

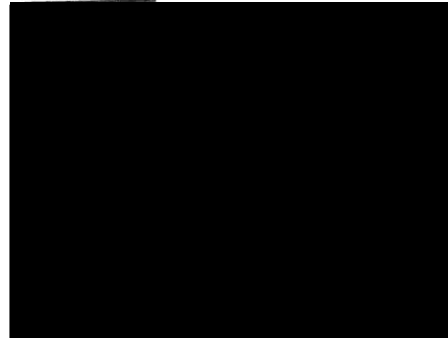
Address

David Tate, President

Lawrence Swessel, Vice President

Kim Wirth, Secretary

Brian Fortwengler, Treasurer



Article IX

The original bylaws shall be adopted by the initial board of directors. Thereafter, the corporation shall be governed by the bylaws.

Any director may be removed for cause pursuant to bylaws provisions regarding grounds and procedures for such removal.

Article X

a) The directors, officers and at-large members, employees and members of this corporation shall not be held personally liable for any debt or obligation of the corporation solely because of their position in the corporation.

b) Any person serving on the board of directors of this corporation shall not be held personally liable for monetary damages resulting from the breach of his/her duties as a director unless such act, omission or breach:

- 1) concerned or concerns a transaction in which the director's personal financial interest was or is in conflict with the financial interests of the corporation;

- 2) was not in good faith or involved or involves intentional misconduct on the part of the director;
- 3) was known by the director to be a violation of law; or
- 4) resulted in an improper personal benefit to the director.

Article XI

The corporation may indemnify any director, officer and at-large member, or former director, officer and at-large member, of the corporation against any expenses actually and reasonably incurred by him/her in connection with the defense of any action, suit or proceeding, civil or criminal, in which he/she is made a party by reason of being or having been such director, officer and at-large member, except in relation to matters as to which he/she shall be adjudged in such action, suit or proceeding, to be liable for negligence or misconduct in the performance of duty to the corporation. The corporation may make any other indemnification permitted by law and authorized by its articles of incorporation, by-laws or resolution adopted after notice to members entitled to vote.

Article XII

In the event of dissolution of the corporation, the board of directors shall, after paying or making provision for the payment of all liabilities of the corporation, dispose of all assets of the corporation exclusively for the purposes of the corporation, in such manner, or to such organizations organized and operated exclusively for the promotion of social welfare as shall at the time qualify as an exempt organization under Section 501(c)(4) or 501(c)(3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), or to a state or local government for a public purpose as the Board of Directors shall determine.

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

Article XIII

Amendments to these articles shall be made pursuant to the provisions of KRS 273.263 (or corresponding provision of any later State statute).

IN TESTIMONY WHEREOF, witness the signature of the incorporator of this corporation, this 14th day of April 2009.


Kim Wirth, Incorporator

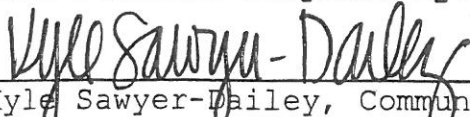
STATE OF KENTUCKY)
) SS
COUNTY OF JEFFERSON)

Before me, the undersigned authority, personally appeared and being duly sworn, acknowledged that she is the incorporator and agent of process of the aforementioned corporation, and that she signed the aforementioned articles of incorporation as her free act and deed.

Witness my signature and seal of office this 16th day of April, 2009.

My Commission Expires: 4-12-2012 
Notary Public
State At Large, Kentucky

This Document Prepared By:



Kyle Sawyer-Dailey, Community Outreach Liaison
Department of Neighborhoods

Document No.: DN2009065997
Lodged By: TATE
Recorded On: 05/11/2009 11:57:36
Total Fees: 20.00
Transfer Tax: .00
County Clerk: BOBBIE HOLSCLOW-JEFF CO KY
Deputy Clerk: EVERAY

Account Details XXXXXXXXXX Prime(REG) Share

You can filter your history using the form below.

Balance:

\$100.11

Available:

\$0.11

Account Holds

Any holds on your account are displayed here.

Date	Expires On	Description	Debit	Credit
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There are no holds to display at this time.

Transaction History

Select a date range below and click "Search". You can also filter by transaction type.

Date	Effective	Description	Debit	Credit	Balance
12/31/2014	12/31/2014	Dividend APYE: 0.16% on average balance of \$100.07 for 92 days		\$0.04	\$100.11

Account Details [REDACTED] Classic Share Drafts

You can filter your history using the form below.

Balance:

\$19.76

Available:

\$19.76

Account Holds

Any holds on your account are displayed here.

Date	Expires On	Description	Debit	Credit
------	------------	-------------	-------	--------

There are no holds to display at this time.

Transaction History

Select a date range below and click "Search". You can also filter by transaction type.

Date	Effective	Description	Debit	Credit	Balance
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No records found

LUCKY HORSESHOE NEIGHBORHOOD ASSOCIATION, INC.**General Information**

Organization Number	0728906
Name	LUCKY HORSESHOE NEIGHBORHOOD ASSOCIATION, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	4/30/2009
Organization Date	4/30/2009
Last Annual Report	2/21/2014
Principal Office	1017 QUEEN AVENUE LOUISVILLE, KY 40215
Registered Agent	KIM WIRTH 1017 QUEEN AVENUE LOUISVILLE, KY 40215

Current Officers

President	<u>DAVID A. TATE</u>
Vice President	<u>RICHARD MATTINGLY</u>
Secretary	<u>DONNA RUHL</u>
Treasurer	<u>KIM WIRTH</u>
Director	<u>RICHARD MATTINGLY</u>
Director	<u>DAVID TATE</u>
Director	<u>KIMBERLY WIRTH</u>
Director	<u>DONNA RUHL</u>

Individuals / Entities listed at time of formation

Director	<u>KIM WIRTH</u>
Director	<u>DAVID TATE</u>
Director	<u>LAWRENCE SWESSEL</u>
Director	<u>BRIAN FORTWENGLER</u>
Incorporator	<u>KIM WIRTH</u>

Images available online

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

<u>Annual Report</u>	2/21/2014	1 page	<u>PDF</u>
<u>Annual Report</u>	5/24/2013	1 page	<u>tiff</u> <u>PDF</u>
<u>Annual Report</u>	7/2/2012	1 page	<u>tiff</u> <u>PDF</u>

Articles of Correction	5/2/2011	2 pages	tiff	PDF
Annual Report	3/1/2011	1 page	tiff	PDF
Annual Report	6/23/2010	1 page	tiff	PDF
Articles of Incorporation	4/30/2009	6 pages	tiff	PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	2/21/2014 3:37:09 PM	2/21/2014 3:37:09 PM	
Annual report	5/24/2013 1:25:31 PM	5/24/2013	
Annual report	7/2/2012 8:10:06 AM	7/2/2012	
Articles of Correction	5/2/2011 10:12:27 AM	5/2/2011	
Annual report	3/1/2011 10:36:27 AM	3/1/2011	
Annual report	6/23/2010 3:28:26 PM	6/23/2010	
Add	4/30/2009 10:19:30 AM	4/30/2009	

Microfilmed Images

Information copy. Do not send to IRS.

Form **990-N**
Department of the Treasury
Internal Revenue Service

Electronic Notice (e-Postcard)
for Tax-Exempt Organizations not Required To File Form 990 or
990-EZ

OMB No. 1545-2085

2014

Open to Public
Inspection

A For the 2014 calendar year, or tax year beginning 1/1/2014, and ending 12/31/2014.

B Check if applicable

- Terminated, Out of Business
- Gross receipts are normally \$50,000 or less

C Name of organization: LUCKY HORSESHOE NEIGHBORHOOD ASSOCIATION INC
d/b/a:

% Kim Wirth
1017 Queen Ave
Louisville, KY, US, 40215

D Employer
Identification
Number



E Website:

F Name of Principal Officer: Kim Wirth

1017 Queen Avenue
Louisville, KY, US, 40215

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in Code section 6104.

The time needed to complete and file this form and related schedules will vary depending on individual circumstances. The estimated average times is 15 minutes.

Note: This image is provided for your records only. Do NOT mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.

Hughes, Susan

From: Butler, Marianne
Sent: Monday, April 20, 2015 11:03 AM
To: Hughes, Susan
Subject: RE: signature- Lucky Horseshoe

Please sign for Lucky Horseshoe so their paperwork will get on the agenda this Thursday - thanks!

From: Hughes, Susan
Sent: Monday, April 20, 2015 11:01 AM
To: Butler, Marianne
Subject: signature- Lucky Horseshoe

Marianne, Please provide written permission for signature on the NDF for Lucky Horseshoe NDF for \$800.00
Thank you,
Susan

Susan W. Hughes

Legislative Assistant to
Councilwoman Marianne Butler
District 15
502-574-1115