LOUISVILLE METRO COUNCIL **NEIGHBORHOOD DEVELOPMENT FUND APPLICATION CHECKLIST** Legal Name of Applicant Organization: Schnitzelburg Area Community Council Program Name and Request Amount: Operating Expenses \$4.534.12 Yes/No/NA Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding? Yes Is the funding proposed by Council Member(s) less than or equal to the request amount? Yes Is the proposed public purpose of the program viable and well-documented? Yes Will all of the funding go to programs specific to Louisville/Jefferson County? Yes Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet? Yes Has prior Metro Funds committed/granted been disclosed? Yes Is the application properly signed and dated by authorized signatory? Yes Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included? Yes If Metro funding is for a separate taxing district is the funding appropriated for a program outside Yes the legal responsibility of that taxing district? Is the entity in good standing with: Kentucky Secretary of State? ٠ Louisville Metro Revenue Commission? Yes Louisville Metro Government? Internal Revenue Service? Louisville Metro Human Relations Commission? Is the current Fiscal Year Budget included? Yes Is the entity's board member list (with term length/term limits) included? Yes Is recommended funding less than 33% of total agency operating budget? No Yes Does the application budget reflect only the revenue and expenses of the project/program? Is the cost estimate(s) from proposed vendor (if request is for capital expense) included? N/A Is the most recent annual audit (if required by organization) included? IN/A Is a copy of Signed Lease (if rent costs are requested) included? N/A Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is N/A faith-based) included? Are the Articles of Incorporation of the Agency included? Yes Is the IRS Form W-9 included? Yes Is the IRS Form 990 included? Yes Are the evaluation forms (if program participants are given evaluation forms) included? N/A Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if N/A required to do so)? Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant No met the BBB Charity Review Standards? They 201 Prepared by: Date:

3|Page Effective July 2015

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

Applicant/Program: Schnitzelburg Area Community Council

Executive Summary of Request:

The monies from this request will be used to fund the operating expenses of the Schnitzelburg Area Community Council (SACC). SACC is an association of property owners and residents t o encourage and produce civic improvements that are of educational or civic in nature.

Funds will be expended on utilities, office supplies, program materials such as welcome wagon bags and community events such as Light Up Schnitzelburg, Dainty Contest, the 1 Dinner and the like.

Is this program/project a fundraiser?	Yes No
Is this applicant a faith based organization?	🗌 Yes 🛛 Mo
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.

10	Achor	\$4,534.12	August 6, 2015
District #	Council Member Signature	Amount	Date
Primary S	ponsor 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:

1|Page Effective July 2015



SECTION 1 - APPLICANT INFORMATION						
Legal Name of Applica (as listed on: <u>http://www.se</u>	-	Schnit	zelburg Are	a Community Council		
Main Office Street & I	Mailing A	ddress: PO Box 17306 L	ouisville, KY 40217			
Website: http://www.n	eighborh	oodlink.com/schnitzelbu	Irg-area-council-inc			
Applicant Contact:	Mike N	Aike Morris Title: President				
Phone:	637-49	7-4900 Email: mike@mikemorrislav				
Financial Contact:	same		Title:			
Phone:	one:		Email:			
Organization's Repres	entative	who attended NDF Train	ning: Jake Wildstrom	l		
GEOG	RAPHICA	L AREA(S) WHERE PROG	RAM ACTIVITIES ARE	(WILL BE) PROVIDED		
Program Facility Locat	ion(s):	Schnitzelburg				
Council District(s):		10	Zip Code(s):	40217		
	SECTI	ON 2 – PROGRAM REQU	EST & FINANCIAL INF	ORMATION		
PROGRAM/PROJECT N	NAME: Op	perating Expenses				
Total Request: (\$)	45?	54.12 Total Metro A	ward (this program)	in previous year: (\$) 4815.70		
Purpose of Request (c	heck all t	hat apply):				
		erally cannot exceed 339				
		s/events for direct bene				
Capital Proje	ect of the	organization (equipment	t, furnishing, building,	etc)		
The Following are Req	uired Att	achments:	T			
IRS Exempt Status Det		n Letter	Signed lease if ren	t costs are being requested		
Current Year Projecte List of Board of Direct		to torm & torm limits	IRS Form W9			
Current financial state		le term & term mills	Evaluation forms if used in the proposed program			
Most recent IRS Form		20-H	Annual audit (if required by organization)			
Articles of Incorporat				 Faith Based Organization Certification Form, if required Staff including the 3 highest paid staff 		
	proposed v	endor if request is for				
capital expense						
Government for this of	r any othe	er program or expense, i	appropriated and/or in ncluding funds received	eceived from Louisville Metro ed through Metro Federal Grants,		
from any department of				oment Funds). Attach additional		
sheet if necessary.			1			
Source:				0.00		
Source:			Amount: (\$)			
Source:			Amount: (\$)			
Has the applicant contacted the BBB Charity Review for participation?						
Has the applicant met	the BBB (Charity Review Standards	s? 🔄 Yes 📕 No			

Page 1 Effective April 2014





SECTION 3 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

The vision of the neighborhood association is to unite property owners and residents for community action, serve as a forum for discussion of concerns to area residents, encourage civic improvements and promote community activities that are of educational or civic in nature. Through these activities we promote and preserve the intrinsic values that make our neighbohrood unique.

Page 2 Effective April 2014

Applicant's Initials



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.): see attached list of events	
B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s):	
please see attachments	
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Page 3 Effective April 2014

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Applicant's Initials



nd prograi	the request helps raise funds to be spent offsetting the cost of the #1 Dinne n materials.
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nd ends on Ju unds to be sp	iture Reimbursement Only – The grant award period begins with the Metro Council approval date ne 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for ent before the grant award period, identify the applicable circumstances:
y the primary voices or pro	Detober 24, 2013, reimbursements should not be made unless an emergency can be demonstrated council sponsor. The funding request is a reimbursement of the following expenditures (attach of of payment): a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan
identi	ied in this application. a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work pl ied in this application.
identi	g request is a reimbursement of the following expenditures that will probably be incurred after th
identi The fundia pplication da	g request is a reimbursement of the following expenditures that will probably be incurred after the e, but prior to the execution of the grant agreement: sting this option, the invoice, receipt and payment documentation should not be available as of the date of this
identi I The fundia pplication da ✓ If sele applic	g request is a reimbursement of the following expenditures that will probably be incurred after the e, but prior to the execution of the grant agreement: sting this option, the invoice, receipt and payment documentation should not be available as of the date of this
identi I The fundia pplication da ✓ If sele applic he Grantee wil	g request is a reimbursement of the following expenditures that will probably be incurred after the e, but prior to the execution of the grant agreement: ting this option, the invoice, receipt and payment documentation should not be available as of the date of this tion.

Page 4 Effective April 2014

Applicant's Initials $\frac{\hbar \kappa}{\hbar}$



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: Our many activities give the area residents and business owners a sense of pride and identity in the neighborhood.
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. We are currently working with the German/Paristown Neighborhood Association on a Goss Avenue Beautification project and we meet with presidents of Shelby Park and St. Joseph's to discuss area projects/concerns.



Applicant's Initials



SECTION 5 - PROGRAM/PROJECT BUDGET SUMMARY

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

	Column 1	Column 2	Column (1+2)=3
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits	0	0	0
B: Rent/Utilities	191.52	144.48	336
C: Office Supplies	112.29	84.71	197
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	1608.31	1213.29	2821.60
I: Community Events & Festivals (Attach Detail List)	2622	1978	4600
J: Machinery & Equipment	0	0	0
K: Capital Project	0	0	0
L: Other Expenses (Attach Detail List)	0	0	0
*TOTAL PROGRAM/PROJECT FUNDS	4534.12	3420.48	7954.60
in the former describing to	57 %	43 %	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)	28
Fees Collected from Program Participants	
Other (please specify)	
1 a Reven Sur Canara 2 Cappense	see attachment

*Total of Column 1 MUST match "Total Request on Page 1, Section 2" **Must equal or exceed total in column 2.

Page 6 Effective April 2014

Applicant's Initials \underline{M}



Donor*/Type of Contribution	Value of Contribution	Method of Valuation
see attachment		
		·
(<i>to match Program Budget Line Item.</i> Volunteer Contribution &Other In Kind)		
DNOR INFORMATION REFERS TO WHO MADE ED INDIVIDUALLY, BUT GROUPED TOGETHER SON PER WEEK		
ncy Fiscal Year Start Date: July 1	· · · · · · · · · · · · · · · · · · ·	
ncy Fiscal Year Start Date: July 1 s your Agency anticipate a significant increase get projected for next fiscal year? NO 🔳 ES, please explain:		om the current fiscal year to
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s your Agency anticipate a significant increase get projected for next fiscal year? NO		om the current fiscal year to

Page 7 Effective April 2014

Applicant's Initials

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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.
- 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.
- Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
 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.
 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
- 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.
- 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.

Extension:

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. List Pisterman works for Metro Government, DAVid Vuderwoods mother works for Metro Corrections.

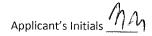
SECTION 7 - CERTIFICATIONS & ASSURANCES

I certify under the penalty of law the inf	ormation in this application (including	z. without limitation. "Certificati	ons and	Assuran	ces") is
accurate to the best of my knowledge. I falsification. If falsification is shown after repaid. I further certify that I am legally application.	am aware my organization will not b r funding has been approved, any alk	e eligible for funding if investiga ocations already received and ex	tion at a pended a	ny time s are subje	shows act to be
Signature of Legal Signatory:		Date:	7	21	15
Legal Signatory: (please print): Mike Morris Title: President					

Email:

Page 8 Effective April 2014

Phone: 637-4900



mike@mikemorrislaw.com

DETAIL FOR COMMUNITY EVENTS

ITEM History Walks	METRO 57	NONMETRO 43	TOTAL \$100
Easter Egg Hunt	171	129	300
Play Date in the Park	114	86	200
Potluck	114	86	200
Dainty Contest	570	430	1,000
Yard Sale	28.50	21.50	50
Dog Walk	28.50	21.50	50
#1 Dinner	1425	1075	2,500
Light Up Schnitzelburg	114	86	200
TOTAL	2622	1978	\$4,600

Expenses for Community Outreach/Operations

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Newsletters:	
Printing Costs	\$885.60
Design and Layout	\$750
Volunteer hours to edit and distribute 216 x 10/hr	\$2160
Lucite Holders	\$60
Magnetic Calendars	\$152
Magnetic Calendars Stickers	\$132
SUCKETS	\$200
Welcome Wagon bags	\$100
Volunteer hours to fill and distribute 30 x 10/hr	\$300
Misc. printing expenses for event fliers	\$50
Volunteer hours to distribute 10 x 10/hr	\$100
Meetings	
Rent	\$336
Food	\$500
Volunteer hours 432 x 10/hr	\$4320
Memberships in other organizations	
Airport Alliance	\$50
Center for Neighborhoods	\$24
Advertising	\$50
Office Expenses	
Secretary of State Renewal	\$15
PO Box	\$86
Stamps	\$46
Paper, envelopes, etc.	\$50
Incoming Funds	
Memberships	
Business	\$540
Family	\$750
, #1 Dinner	\$1700
Yard sale	\$250
Golf scrambles	\$3000

DONATED SPACE

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Light Up Schnitzelburg	\$100
Dog Walk	100
Yard Sale	200
Dainty Contest	200
Easter Egg Hunt	100
History Walks	160
Meetings (Board)	900
TOTAL	\$1760

DONATED TIME (\$10.00/hr.)

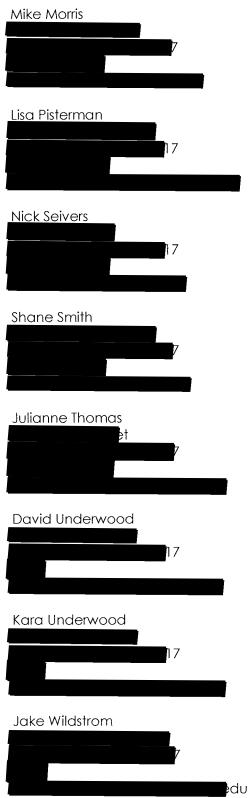
Newsletters	\$2160
Meetings	4320
Welcome Wagon	300
Outreach	200
Office	200
TOTAL	\$7,180

DONATED TIME (COMMUNITY EVENTS) (\$10.00/hr)

History Walks	\$350
Easter Egg Hunt	380
Play Date in the Park	280
Potluck	230
Dainty Contest	340
Yard Sale	280
Dog Walk	160
#1 Dinner	430
Light Up Schnitzelburg	160
TOTAL	\$2,610

2015 SACC Board Member Contact List





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Peers, Carrie G

Subject:FW: SACC NDFAttachments:DETAIL FOR COMMUNITY EVENTS.rtf

From: Mike Morris [mailto:mike@mikemorrislaw.com] Sent: Thursday, August 06, 2015 10:12 AM To: Peers, Carrie G Subject: Re: SACC NDF

I have attached the updated community events page. All Board members terms expire 12/31/15. Will this email suffice for that or do I need to write in down on the list of Board members.

CARBELL COTY FRED AND AECONDED

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ARTICLES OF INCOMPORATION

FOR

Reputes of the source of the second s it play by Birg

The undersigned, the majority of whom are citizens of the United States of America, desiring to form a non-profil corporation is of the Commenwealth of Kentucky, do hereby cortafya

ARTICLE I

The name of the corporation shall be The Schnitzelburg Area Community Council, Inc.

ARTICLE II

Unless sooner terminated as provided by las, the Area Consumity Council shall have perpetual existence from the time the certificate of incorporation has been issued by the Secretary of the State of Kentucky.

ARTICLE III

The objects and purposes of the Area Community Council shall ber

s. To unite property owners, tenants, business people ...

- To encourage clvic improvements and betterments þ., In the area.
- c. To promote community activities and interests of en educational or civic nature.
- d. To encourage residential and business property upkeep in the area, and to climinate wandalise and Littering.
- To encourage better fire and police protection. ø≠ traffic flow and traffic law enforcement in the area.
- f. To be concerned with youth problems of the area, ε . To encourage reasonable and adequate zoning, and
- to ensure uniform enforcement of codes.
- he to encourage a spirit of friendliness and cooperative community spirit in the area and in relations with other groups in the Schnitzelburg free and throughout the City of Lowisvilles
- is To support any other activities which advance the common good and renaral walfare of the community and its people unless these activities are pucluded by INC Sec. 501 (c) (4) or IRS regulation.

465.36

SECRETARY OF STATE

ANFICLE IV

(A.1) The maid Area Community Council is organized exclusively for the preastion of eachel and sivie velfare as described in TRE Spec. 501 (c) (A). In view of that fact, no part of the net sarmings of the Council shall be distributable to its sembers, directors, officers, and other private persons as incomes however, 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 Three hereof.

(5.2) No substantial part of the activities of the Area Community Council chall be the carrying on of propaganda, or otherwise attempting to influence legislation, unless the social volfare and civic objective nequire legislation as per the regulations concerning IRC Sec. 501 (c) (4) or intervene in any political compaign on behalf of any candidate for wable office.

(4.5) Notwithstanding any other provision of these articles, the Area Community Council Chail not carry on any other activities not permitted to be carried on by a corporation anompt from Federal Income Tax under Sec. 501 (c) (4) of the Internal Revenue Code of 1954.

(4.4) Open dissolution of the Area Community Council, the Board of directors shall, after paying or Making provision for the payment of all the lisbilities of the Area Community Council, dispose of all the massis of the Area Community Council exclusively for the parposes of the Area Community Council in such maner, or to such organization or organizations established and operated exclusively for social weifare er alvie purposes as shall at the time qualify as exempt organization or organizations under Sec. 501 (c) (d) Internal Revenue Code of 195% as the Board of Directors shall determine, any such assets not no disposed of shall be disposed of by the Court of Cormon Pleas of the county in which the principal office of the Corporation is them located, such usively for such purposes or to much organizations or organizations, as and four the Stars of the county in which the principal office of the Corporation is them

ASTICLE V

(5.1) The replatered offles and place of business of the corporation aball be: William Keely, STA Manuach, Lapiartize, Jefforson County, Kontucky DO217.

(5.3) The annu and address of its resident agent for the service of present shall be: William Keely, President, Sic Knewton, Lowisville, Newtocky 40217.

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ARTICLE VI

The officers, directors, or members of the Area Community Conucil shall not be personally liable for payment of debts, liablitizes, or obligations of the Council to any extent whatsoever.

ARTICLE VII

 $\{7,1\}$ The initial board of directors shall consist of . thirteen members on the board and four officers selected from the board.

(7.2) The following individuals will serve in the capacity of officers until the selection of their successors:
Fresident: William Keely, 819 Keswick, Louisville, Ky., 40217
Vice-President: Gregory Sarjent, 942 Mulberry, Louisville, Ky., 40217
Secretary: James Peak, 1021 Wagner, Louisville, Ky., 40217
Treasurer: William Tinker, 1245 Milton, Louisville, Ky., 40217

IN WITNESS thereof, we have hereunto subscribed our names this _____day of _____t 1977.

William Keely William Keely Jame Quak Jame Piak Jame Piak

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Trey Grayson Secretary of State Received and Filed 11/09/2005 11:22:11 AM Fae Receipt: \$8,00

ARTICLES OF AMENDMENT

OF

SCHNITZELBURG AREA COMMUNITY COUNCIL, INC.

ARTICLE XIII: Amendment

Section 1

Pursuant to a meeting of the members of this corporation held on Monday, September 26, 2005, of which a quorum was present at said meeting, the following amendment was received and unanimously adopted and accepted by the quorum present. The amendment adopted is set forth below:

Section 2: The original Articles of Incorporation for the Schnitzelburg Area Community Council, Inc., are hereby amended to reflect that Article 3, Section I, is hereby amended to read that:

To support any activities which advance the common good and general of the community and its people unless these activities are excluded by IRS Sec. 501(c)(3).

APPROVED AND SUBMITTED by William W. Tinker, Jr. Treasurer and Director for the Schnitzelburg Area Community Council, Apc.

William W. Tinker, Director

APPROVED: September 26, 2005

William W. finker, Ex.

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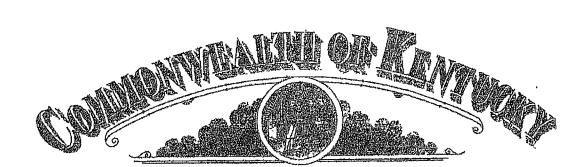
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Trey Grayson

Secretary of State

Certificate of Existence

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

THE SCHNETZELBURG AREA COMMUNITY COUNCIL, INC.

has eliminated all the grounds for dissolution, paid all fees and penalties owed to the Secretary of State, and met all other requirements for reinstatement. The effective date of reinstatement is October 7, 2004.

I further certify that THE SCHINTIZELBURG AREA COMMUNITY COUNCIL, INC. is a corporation duly organized and existing under the laws of the Commonwealth of Kentucky, whose data of incorporation is February 7, 1977, and whose period of duration is perpetual.

IN WITNESS WHINKHOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this ^{7th} day of October, 2004.



Trey Grayson Secretary of State Commonwealth of Kentucky MACCARDOT 072058

Depart	W-9 December 2011) ment of the Treasury Revenue Service	Identification Num	or Taxpayer ber and Certifica	ation	Give Form to the requester, Do not send to the IRS.	
		your Income tax return)		·····		
to.		RG AREA COMMUNITY COUNCIL, INC.		-		
page						
uo s	Check appropriate b	ox for federal tax classification: proprietor C Corporation S Corporation	🗌 Partnership 🗌 Trus	t/estate		
Print or type Instruction	Limited flability	company. Enter the tax classification (C=C corporation,	S=S corporation, P=partnership) ►	Exempt payee	
Prir c Ing	Other (see instr					
licifi		eet, and apt. or sulte no.)	Re	quester's name and address	(optional)	
Spi	P. O. Box 17306 City, state, and ZIP of					
See	Louisville KY 4					
	List account number		I			
2010.0000000000000000000000000000000000		•				
Ran		er Identification Number (TIN)				
to avoi	d backup withhold	opriate box. The TIN provided must match the na ing. For individuals, this is your social security nur	nber (SSN) However for a	8 Social security numb	er	
entitles	nt alien, sole propri	etor, or disregarded entity, see the Part I instruction ridentification number (EIN). If you do not have a	ins on page 3. For other		-	
	• =	nore than one name, see the chart on page 4 for	guidelines os whose	Employer identification	n number	
numbe	r to enter.	nore than one hame, see the order of page 4 for	guidennes on whose			
Part	Certific:	ation				
1041012-01-100-01-1000-01	penalties of perjury			·····		
		this form is my correct taxpayer Identification nur	nber (or I am waiting for a n	umber to be issued to me), and	
Sen	NCO (IHS) that I am	kup withholding because: (a) I am exempt from b subject to backup withholding as a result of a fail ckup withholding, and	ackup withholding, or (b) I h ure to report all interest or d	ave not been notified by t ividends, or (c) the IRS ha	the Internal Revenue as notified me that I am	
3. Ian	a U.S. citizen or o	ther U.S. person (defined below).				
Certific becaus interest general Instruct	cation instructions to you have failed to t paid, acquisition o	You must cross out item 2 above if you have be preport all interest and dividends on your tax retu in abandonment of secured property, cancellation than interest and dividends, you are not required	m. For real estate transactic of debt, contributions to an	ons, item 2 does not apply	/. For mortgage	
Sign Here	Signature of U.S. person ►	14flehn m Smy	Date ►	10/14/13		
	eral Instruct	ons he Internal Revenue Code unless otherwise	Note. If a requester gives your TIN, you must use t			
noted.	ose of Form		to this Form W-9. Definition of a U.S. pers	son. For federal tax purpo	ses, you are	
-			 considered a U.S. persor An individual who is a I 		nt silon	
obtain y	A person who is required to file an information return with the IRS must obtain your correct taxpayer Identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest		 An individual who is a U.S. citizen or U.S. resident alien, A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, 			
you pai	d, acquisition or ab	andonment of secured property, cancellation	An estate (other than a foreign estate), or			
	or contributions yo	u are a U.S. person (including a resident	 A domestic trust (as de 	fined in Regulations secti	on 301.7701-7).	
alien), te request	o provide your com er) and, when appli	ect TIN to the person requesting it (the cable, to:	Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business.			
number	to be issued),	u are giving is correct (or you are waiting for a	Further, in certain cases v	where a Form W-9 has no	t been received, a	
			and pay the withholding t	ax. Therefore, if you are a	U.S. person that is a	
allocable is not su	f applicable, you ar e share of any parti ibject to the withho	2. Certify that you are not subject to backup withholding, or 3. Claim exemption from backup withholding if you are a U.S. exempt ayee. If applicable, you are also certifying that as a U.S. person, your llocable share of any partnership income from a U.S. trade or business not subject to the withholding tax on foreign partners' share of ffectively connected income.				

Cat. No. 10231X

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201 DEPARTMENT OF THE TREASURY

Date: FEB 23 2007

SCHNITZELBURG AREA COMMUNITY COUNCIL 1343 HICKORY ST LOUISVILLE, KY 40217

	_	
DLN:		
307044022		
Contact Person:		
EDWARD S SCHLAACK	ID#	31536
Contact Telephone Number:		
(877) 829~5500		
Accounting Period Ending:		
December 31		
Form 990 Required:		
Yes		
Effective Date of Exemption:		
February 7, 1977		
Contribution Deductibility:		
No		

Dear Applicant:

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We are pleased to inform you that upon review of your application for taxexempt 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.

5

Please see enclosed Information for Organizations Exempt Under Sections Other Than 501(c)(3) for some helpful information about your responsibilities as an exempt organization.

Sincerely, Sis S. Cherne

Lois G. Lerner Director, Exempt Organizations Rulings and Agreements

Enclosure: Information for Organizations Exempt Under Sections Other Than 501(c) (3)

Letter 948 (DO/CG)

Information copy. Do not send to IRS.



Electronic Notice (e-Postcard)

for Tax-Exempt Organizations not Required To File Form 990 or 990-EZ OMB No. 1545-2085



Open in Production

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: <u>SCHNITZELBURG AREA COMMUNITY</u> <u>COUNCIL</u> d/b/a: <u>PO Box 17306</u> Louisville, KY, US, 40217	D Employer Identification Number
E Website: http://www.schnitzelburg.org/	F Name of Principal Officer: <u>David Underwood</u> <u>PO Box 17306</u> <u>Louisville, KY, US, 40217</u>	

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.

This Form 990-N (e-Postcard) was accepted by the IRS on 6/11/2015.

THE SCHNITZELBURG AREA COMMUNITY COUNCIL, INC.

General Information

Organization Number	0078158
Name	THE SCHNITZELBURG AREA COMMUNITY COUNCIL, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	2/7/1977
Organization Date	2/7/1977
Last Annual Report	7/22/2015
Principal Office	P. O. BOX 17306 LOUISVILLE, KY 40217
Registered Agent	DAVID UNDERWOOD 876 FETTER AVE LOUISVILLE, KY 40217

Current Officers

President	MIKE MORRIS
Vice President	SUSAN BRUNTON
Secretary	JAKE WILDSTROM
Treasurer	DAVID UNDERWOOD
Director	MIKE MORRIS
Director	SUSAN BRUNTON
Director	DAVID UNDERWOOD
Director	JAKE WILDSTROM

Individuals / Entities listed at time of formation

Director	WILLIAM KEELY
Director	GREGORY SARJENT
Director	JAMES PEAK
Director	WILLIAM TINKER
Incorporator	WILLIAM KEELY
Incorporator	JAMES PEAK
Incorporator	WILLIAM TINKER
Incorporator	<u>GREGORY SARJENT</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.

Registered Agent

7/22/2015 3:56:58 PM 1 page

<u>PDF</u>

name/address change				
Annual Report	7/22/2015	1 page	<u>PDF</u>	
Annual Report	3/18/2014	1 page	<u>PDF</u>	
Registered Agent name/address change	3/18/2013 1:57:09 PM	1 page	<u>PDF</u>	
Annual Report	3/18/2013	1 page	PDF	
Principal Office Address Change	3/4/2013 10:48:55 AM	1 page	PDF	
Annual Report	2/24/2012	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	4/7/2011	1 page	tiff	<u>PDF</u>
Annual Report	4/13/2010	1 page	tiff	<u>PDF</u>
<u>Principal Office Address</u> <u>Change</u>	9/1/2009	1 page	<u>tiff</u>	<u>PDF</u>
<u>Registered Agent</u> name/address change	9/1/2009	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	8/17/2009	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	4/14/2008	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	2/26/2007	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	3/27/2006	1 page	<u>tiff</u>	<u>PDF</u>
Amendment	11/9/2005	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	3/18/2005	1 page	<u>tiff</u>	<u>PDF</u>
Administrative Dissolution	11/2/1993	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1992	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1991	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1991	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1990	2 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	9/1/1989	1 page	<u>tiff</u>	<u>PDF</u>
<u>Sixty Day Notice</u>	9/1/1989	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1988	1 page	<u>tiff</u>	<u>PDF</u>
Statement of Change	10/3/1978	2 pages	tiff	<u>PDF</u>
Annual Report	6/28/1978	3 pages	<u>tiff</u>	PDF
Articles of Incorporation	2/7/1977	5 pages	<u>tiff</u>	<u>PDF</u>

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Registered agent address change	7/22/2015 3:56:58 PM	7/22/2015 3:56:58 PM	
Annual report	7/22/2015 2:20:55 PM	7/22/2015 2:20:55 PM	
Annual report	3/18/2014 1:13:25 PM	3/18/2014 1:13:25 PM	
Annual report	3/18/2013 2:05:27 PM	3/18/2013 2:05:27 PM	
Registered agent address change	e 3/18/2013 1:57:09 PM	3/18/2013 1:57:09 PM	
Principal office change	3/4/2013 10:48:55 AM	3/4/2013 10:48:55 AM	