

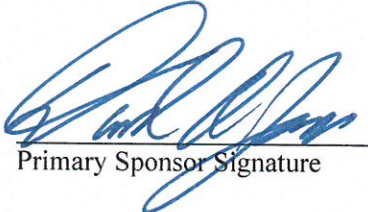
**NEIGHBORHOOD DEVELOPMENT FUND
Not-for-Profit Transmittal and Approval Form**

Applicant/Program: Garvin Gate Association, Inc. / Garvin Gate Improvements
Applicant Requested Amount: \$5000.00
Appropriation Request Amount: 4,500-

Executive Summary of Request
Neighborhood Development Funds will be directed to the Garvin Gate Association, Inc. for costs associated with the improvement of the "Garvin Place Gate" located within the public right-of-way.

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.

6 District #  Primary Sponsor Signature \$4500 Amount 9-11-17 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
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:

Garvin Gate Association, Inc. / Garvin Gate Improvements

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 _____ \$ _____

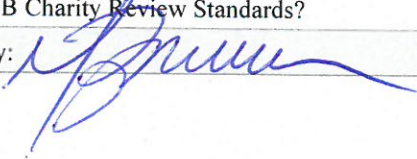
District 26 _____ \$ _____

**LOUISVILLE METRO COUNCIL
NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

Legal Name of Applicant Organization Garvin Gate Association, Inc.

Program Name and Request Amount Garvin Gate Improvements / \$5000

| | 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"/> N/A |
| Is the entity in good standing with: <ul style="list-style-type: none"> ▶ Kentucky Secretary of State? ▶ Louisville Metro Revenue Commission? ▶ Louisville Metro Government? ▶ Internal Revenue Service? ▶ Louisville Metro Human Relations Commission? | <input type="checkbox"/> Yes |
| 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"/> Yes |
| 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"/> No |

Prepared by: 

Date: 8/31/2017

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

| SECTION 1 – APPLICANT INFORMATION | | | |
|---|--|---|--------------------|
| Legal Name of Applicant Organization: | | | |
| <i>(as listed on: http://www.sos.ky.gov/business/records)</i> Garvin Gate Association, Inc. | | | |
| Main Office Street & Mailing Address: 1210 Garvin Place | | | |
| Website: www.garvingatebluesfestival.com | | | |
| Applicant Contact: | Chris Bosson | Title: | President |
| Phone: | 806-470-4939 | Email: | cjbosson@gmail.com |
| Financial Contact: | Jonathan Bevan | Title: | Treasurer |
| Phone: | 502-553-2159 | Email: | bevan.ky@gmail.com |
| Organization's Representative who attended NDF Training: Howard Rosenberg | | | |
| GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED | | | |
| Program Facility Location(s): | Corner of Oak St. and Garvin Place, Louisville, KY | | |
| Council District(s): | 4 | Zip Code(s): | 40203 |
| SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION | | | |
| PROGRAM/PROJECT NAME: Garvin Gate Improvement | | | |
| Total Request: (\$) | 1,500 | Total Metro Award (this program) in previous year: (\$) | 0 |
| 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: | | | |
| IRS Exempt Status Determination Letter Current year projected budget Current financial statement Most recent IRS Form 990 or 1120-H Articles of Incorporation (current & signed) Cost estimates from proposed vendor if request is for capital expense | | Signed lease if rent costs are being requested IRS Form W9 Evaluation forms if used in the proposed program Annual audit (if required by organization) Faith Based Organization Certification Form, if applicable | |
| 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: | Metro Parks, Councilman James | Amount: (\$) | \$20,000 |
| 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | |

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

The Garvin Gate Association was established in 1990 as a neighborhood association in Old Louisville that was bounded on the north by Oak Street, on the east by Fourth Street, on the South by Ormsby Avenue, and on the west by Seventh Street. It was established for the promotion of the harmony, health, and happiness of the inhabitants of the neighborhood including the preservation, improvement and beautification of the public and private buildings and facilities therein, and to that end to adopt by-laws and other rules and regulations appropriate to the aforesaid, and including but not limited to, the establishment of dues and assessments for membership, the promotion of fund raising events for the benefit of the neighborhood.

The purpose of the Garvin Gate Association is for the mutual protection of the members of the association; to work for the continued improvement and proper maintenance of all property within its area, to preserve the unique character of the neighborhood as a livable and attractive part of Old Louisville; and to work with other organizations, private and public, that have as their aims, the improvement and preservation of Old Louisville.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

| Three Highest Paid Staff Names | Annual Salary |
|--------------------------------|---------------|
| | |
| | |
| | |

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.):

For over 20 years, Garvin Place in Historic Old Louisville has been closed to through traffic from bustling Oak Street by a simple iron gate. While this street closing has had the desired effect of reducing street traffic, the original design of the area, which includes ample seating and no lighting, has had the unintended effect of encouraging loitering. This in turn, has made the gate a prime spot for illicit activity, rowdiness, and dumping, discouraging neighbors and visitors to our neighborhood from enjoying all that this Gateway to Old Louisville has to offer.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Bordered by Oak Street to the North and Ormsby Avenue to the South, the Garvin Gate Neighborhood also encompasses Garvin Place and the 1200 block of 6th Street. Though these streets are at the border of the historic Old Louisville neighborhood, in their current state there is no indication to visitors that by crossing Oak Street, they have entered into the largest and foremost Victorian architecture preservation district in America.

In August of 2016 the Garvin Gate Neighborhood Association voted unanimously to move forward with replacing the Garvin Gate and improving the surrounding area. Our Improvements Committee put forward a design for a new gate, enhanced landscaping, and lighting as well as a proposal for Victorian style street lamps on 6th street, and Ormsby Avenue similar to those already found on Garvin Place and around Old Louisville. It is our Neighborhood Association's intention that these improvements benefit not only our residents, but also all residents of Old Louisville as better lit streets are safer streets.

With these improvements, our belief is that the newly redesigned Garvin Gate will serve as the Gateway to Old Louisville welcoming visitors and neighbors alike into one of the country's most beautiful neighborhoods.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

NA

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:

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:

Bordered by Oak St. to the North and Ormsby Ave. to the South, the Garvin Gate Neighborhood also encompasses Garvin Place and the 1200 block of 6th St. Though these streets are at the border of the historic Old Louisville Neighborhood, in their current state there is no indication to visitors that by crossing Oak St., they have entered into the largest and foremost Victorian architecture preservation district in America. In August of 2016, the Garvin Gate Neighborhood Association voted unanimously to move forward with replacing the Garvin Gate and improving the surrounding area. Our Improvements Committee put forward a design for a new gate, enhanced landscaping, and lighting as well as a proposal for Victorian style street lamps on 6th St. and Ormsby Ave. similar to those already found on Garvin Place and around Old Louisville. It is our association's intent that these improvements benefit not only our residents, but also all residents of Old Louisville as better lit streets are safer streets. With these improvements, our belief is that the newly-redesigned Garvin Gate will serve as the Gateway to Old Louisville welcoming visitors and neighbors alike into one of the country's most beautiful neighborhoods. Though difficult to track, our hope is that the loitering around the gate will subside and those wishing to enjoy our streets will once again feel safe to do so. Those members who live close to the gate should be able to report if these things indeed take place.

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.

Our property improvements committee has sought to involve others in the project by giving presentations to those Old Louisville associations who are willing to have us come and speak. To date, we have presented our project to the Second St. Association and the St. James association. We also hosted a cocktail party, inviting several business owners in the area, detailing our plans and how they can support us. At each of these presentations, we distributed fliers that outline the history of the gate as well as the proposed future of the site (see attached). The majority of these partners will be bringing their good will, while we are hopeful that some will provide some financial support.

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.

| | Column 1 | Column 2 | Column (1+2)=3 |
|--|-------------------------|------------------------|-------------------|
| Program/Project Expenses | Proposed Metro Funds | Non- Metro Funds | Total Funds |
| A: Personnel Costs Including Benefits | | | |
| B: Rent/Utilities | | | |
| C: Office Supplies | | | |
| D: Telephone | | | |
| E: In-town Travel | | | |
| F: Client Assistance (See Detailed List on Page 8) | | | |
| G: Professional Service Contracts | | | |
| H: Program Materials | | | |
| I: Community Events & Festivals (See Detailed List on Page 8) | | | |
| J: Machinery & Equipment | | | |
| K: Capital Project | 1,500 | 58,500 | 60,000 |
| L: Other Expenses (See Detailed List on Page 8) | | | |
| *TOTAL PROGRAM/PROJECT FUNDS | | | |
| % of Program Budget | 2.5% | 97.5 | 100% |

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

| | |
|---|----------------------------|
| Other State, Federal or Local Government | |
| United Way | |
| Private Contributions (do not include individual donor names) | |
| Fees Collected from Program Participants | |
| Other (please specify) | 58,500 (GGA budget monies) |
| Total Revenue for Columns 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).

| Donor*/Type of Contribution | Value of Contribution | Method of Valuation |
|---|-----------------------|---------------------|
| | | |
| | | |
| | | |
| | | |
| <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

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.

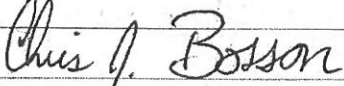
Standard Certifications

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: |  | Date: | July 21, 2017 |
| Legal Signatory: (please print): | Chris J. Bosson | Title: | President |
| Phone: | 806-470-4939 | Extension: | |
| Email: | cjbosson@gmail.com | | |

GARVIN GATE ESTIMATES

| | | | | Part 1 | Part 2 |
|---------------------------|------------|----------------------|--|---------------------|---------------------|
| | | | | PHASE ONE | PHASE TWO |
| Lighting OLP fixed costs | | \$ 7,447.90 | | \$ 1,000.00 | \$ 6,447.90 |
| Electrical allowance only | \$8,500.00 | | | | \$ 8,500.00 |
| masonry CL | | \$ 50,000.00 | | \$ 40,400.00 | \$ 9,600.00 |
| Iron work BOI | | \$ 13,118.00 | | \$ 5,814.00 | \$ 7,304.00 |
| urns LS | | \$ 10,793.00 | | \$ 10,793.00 | |
| Irrigation | \$8,000.00 | | | \$ 7,000.00 | \$ 1,000.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| Sub total | | \$ 97,858.90 | | \$ 65,007.00 | \$ 32,851.90 |
| Mgmt fee 15% ???? | | \$ 14,678.84 | | \$ 9,751.05 | \$ 4,927.79 |
| Total | | \$ 112,537.74 | | \$ 74,758.05 | \$ 37,779.69 |

277694

ARTICLES OF INCORPORATION
OF
GARVIN GATE ASSOCIATION, INC.

RECEIVED & FILED

8.00

SEP 25 8 33 AM '90

WE, THE UNDERSIGNED, having associated for the purpose of forming a non-profit, non-stock corporation, under and pursuant to the laws of the Commonwealth of Kentucky, and more particularly Chapter 275 of the Revised Statutes (KRS), hereby certify as follows:

SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY
BY *[Signature]*

ARTICLE I

The name of the Corporation shall be "Garvin Gate Association, Inc."

ARTICLE II

The duration of the Corporation shall be perpetual.

ARTICLE III

613069

The address of the registered office of the corporation is:
1208 South Sixth Street, Louisville, Kentucky 40203.

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

John Sistarenik
1208 South Sixth Street
Louisville, Kentucky 40203

The principal office of the Corporation is located at:

1208 South Sixth Street
Louisville, Kentucky 40203

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

RECEIVED

SEP 25 1990

ARTICLE IV

The Corporation is organized and shall be operated exclusively for the promotion of social welfare within the meaning of Section 501(c)(4) of the Internal Revenue Code of 1954 (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 to establish and maintain a neighborhood association in Louisville, Kentucky, in the Old Louisville area of said city with particular reference to that portion thereof bounded on the north by Oak Street, on the east by Fourth Street, on the south by Ormsby Avenue and on the west by Seventh Street, and for the promotion of the harmony, health and happiness of the inhabitants of the neighborhood including the preservation, improvement and beautification of the public and private buildings and facilities therein; and to that end to adopt by-laws and other rules and regulations appropriate to the objects and purposes aforesaid, and including but not limited to, the establishment of dues and assessments for membership, the promotion of fund raising events for the benefit of the corporation, and the right to take title to, hold, manage, and dispose of property, real and personal, both as principal or agent, including the right to incur indebtedness and to enter into any and all types of contracts consistent with the purposes of the corporation.

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 Kentucky Statutes, except as follows and as otherwise stated in these Articles.

Notwithstanding any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from Federal income tax under Section 501(c)(4) of the Internal Revenue Code of 1954, or the corresponding provisions of any subsequent Federal tax laws.

ARTICLE VII

The names and addresses of the incorporators are:

| INCORPORATORS | ADDRESS |
|-----------------------|---|
| Robert B. Laufer, Jr. | 1215 Garvin Place Louisville, Kentucky 40203 |
| John Shircliffe | 1237 Garvin Place Louisville, Kentucky 40203 |

ARTICLE VIII

The initial Board of Directors shall consist of three (3) Directors. The names and addresses of the members of the initial Board of Directors are:

| | |
|-----------------------|--|
| Jean Crowe | 605 West Ormsby Avenue Louisville, Kentucky 40203 |
| Robert B. Laufer, Jr. | 1215 Garvin Place Louisville, Kentucky 40203 |
| John Shircliffe | 1237 Garvin Place Louisville, Kentucky 40203 |

ARTICLE IX

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

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

ARTICLE X

a) The directors, officers, 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. The Corporation may make any indemnification permitted by law as authorized by its Articles of Incorporation, its By-Laws, or by a resolution adopted by the Corporation's Board of Directors.

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 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.

This paragraph b) applies only to acts or omissions or breaches of duty occurring after July 15, 1988.

ARTICLE XI

Any director or officer or former director or officer of the Corporation, may be indemnified by 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 s/he is made a party by reason of being or having been such director or officer, except in relation to matters as to which s/he 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, or its By-Laws or a 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), 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(2) (or corresponding provision of any later State statute).

IN TESTIMONY WHEREOF, witness the signatures of the Incorporators of the Corporation, this 21 day of SEPTEMBER, 1990.

John S. Sitarovich
Robert B. Lauffer, Jr.

STATE OF KENTUCKY)
)
COUNTY OF JEFFERSON)

Before me, the undersigned authorities, personally appeared and being first duly sworn, acknowledged that they were the Incorporators of the aforementioned Corporation, and that they signed the foregoing Articles of Incorporation as their free act and deed.

Witness my signature and seal of office this 21st day of September, 1990.

Notary Public, State at Large, KY.
My commission expires Feb. 8, 1994

My Commission Expires: _____

This Document Prepared By:

Cari Parlane
Notary Public

John Sitarovich
John Sitarovich
1208 South Sixth Street
Louisville, Kentucky 40203

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

DEPARTMENT OF THE TREASURY

Date:

DEC 09 2016

GARVIN GATE ASSOCIATION INC
1210 GARVIN PL
LOUISVILLE, KY 40203

Employer Identification Number:

DLN:

17053195311046

Contact Person:

DIANE M GENTRY

ID# 31361

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Public Charity Status:

509(a)(2)

Form 990/990-EZ/990-N Required:

Yes

Effective Date of Exemption:

July 11, 2016

Contribution Deductibility:

Yes

Addendum Applies:

Yes

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947

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. GARVIN GATE ASSOCIATION, INC | | |
| | 2 Business name/disregarded entity name, if different from above | | |
| | 3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ 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. <input type="checkbox"/> Other (see instructions) ▶ _____ | | 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small> |
| | 5 Address (number, street, and apt. or suite no.) 1210 GARVIN PL | | Requester's name and address (optional) |
| | 6 City, state, and ZIP code LOUISVILLE, KY 40203 | | |
| | 7 List account number(s) here (optional) | | |

Part I Taxpayer Identification Number (TIN)

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

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

| | | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|--|--|
| Social security number | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table> | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| or | | | | | | | | | | | | |
| Employer identification number | | | | | | | | | | | | |
| | | | | | | | | | | | | |

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

| | | |
|------------------|----------------------------|--------|
| Sign Here | Signature of U.S. person ▶ | Date ▶ |
|------------------|----------------------------|--------|

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:

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

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

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

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

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships* above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code* on page 3 and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

| IF the payment is for . . . | THEN the payment is exempt for . . . |
|--|---|
| Interest and dividend payments | All exempt payees except for 7 |
| Broker transactions | Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012. |
| Barter exchange transactions and patronage dividends | Exempt payees 1 through 4 |
| Payments over \$600 required to be reported and direct sales over \$5,000 ¹ | Generally, exempt payees 1 through 5 ² |
| Payments made in settlement of payment card or third party network transactions | Exempt payees 1 through 4 |

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code* earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. **Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.
2. **Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
3. **Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.
4. **Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
5. **Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

| For this type of account: | Give name and SSN of: |
|---|---|
| 1. Individual | The individual |
| 2. Two or more individuals (joint account) | The actual owner of the account or, if combined funds, the first individual on the account ¹ |
| 3. Custodian account of a minor (Uniform Gift to Minors Act) | The minor ² |
| 4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law | The grantor-trustee ¹ The actual owner ¹ |
| 5. Sole proprietorship or disregarded entity owned by an individual | The owner ³ |
| 6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A)) | The grantor ⁴ |
| For this type of account: | Give name and EIN of: |
| 7. Disregarded entity not owned by an individual | The owner |
| 8. A valid trust, estate, or pension trust | Legal entity ⁴ |
| 9. Corporation or LLC electing corporate status on Form 8832 or Form 2553 | The corporation |
| 10. Association, club, religious, charitable, educational, or other tax-exempt organization | The organization |
| 11. Partnership or multi-member LLC | The partnership |
| 12. A broker or registered nominee | The broker or nominee |
| 13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments | The public entity |
| 14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B)) | The trust |

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 2.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

Short Form

Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2015

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2015 calendar year, or tax year beginning , 2015, and ending , 20

B Check if applicable:

Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
GARVIN GATE ASSOCIATION, INC.

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
1208 S 6th St

City or town, state or province, country, and ZIP or foreign postal code
Louisville, KY 40203

D Employer identification number
 [REDACTED]

E Telephone number
502-413-5721

F Group Exemption Number ▶

G Accounting Method: Cash Accrual Other (specify) ▶

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ www.garvingatebluesfestival.com

J Tax-exempt status (check only one) — 501(c)(3) 501(c) (4) ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **71,352**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

| | | 1 | 2 | 3 | 4 | 5a | 5b | 5c | 6a | 6b | 6c | 6d | 7a | 7b | 7c | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 |
|------------|--|--|---|---|---|----|----|----|----|----|----|----|----|----|----|---|---|----|----|----|----|----|----|----|----|----|--------|--------|----|
| Revenue | 1 | Contributions, gifts, grants, and similar amounts received | | | | | | | | | | | | | | | | | | | | | | | | | | 55,400 | |
| | 2 | Program service revenue including government fees and contracts | | | | | | | | | | | | | | | | | | | | | | | | | | 10,767 | |
| | 3 | Membership dues and assessments | | | | | | | | | | | | | | | | | | | | | | | | | | 525 | |
| | 4 | Investment income | | | | | | | | | | | | | | | | | | | | | | | | | | 60 | |
| | 5a | Gross amount from sale of assets other than inventory | | | | | | | | | | | | | | | | | | | | | | | | | | -0- | |
| | 5b | Less: cost or other basis and sales expenses | | | | | | | | | | | | | | | | | | | | | | | | | | -0- | |
| | 5c | Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) | | | | | | | | | | | | | | | | | | | | | | | | | | -0- | |
| | 6 | Gaming and fundraising events | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 6a | Gross income from gaming (attach Schedule G if greater than \$15,000) | | | | | | | | | | | | | | | | | | | | | | | | | | -0- | |
| | 6b | Gross income from fundraising events (not including \$ -0- of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) | | | | | | | | | | | | | | | | | | | | | | | | | | -0- | |
| 6c | Less: direct expenses from gaming and fundraising events | | | | | | | | | | | | | | | | | | | | | | | | | | -0- | | |
| 6d | Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) | | | | | | | | | | | | | | | | | | | | | | | | | | -0- | | |
| 7a | Gross sales of inventory, less returns and allowances | | | | | | | | | | | | | | | | | | | | | | | | | | 4,600 | | |
| 7b | Less: cost of goods sold | | | | | | | | | | | | | | | | | | | | | | | | | | 2,406 | | |
| 7c | Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) | | | | | | | | | | | | | | | | | | | | | | | | | | 2,194 | | |
| 8 | Other revenue (describe in Schedule O) | | | | | | | | | | | | | | | | | | | | | | | | | | -0- | | |
| 9 | Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶ | | | | | | | | | | | | | | | | | | | | | | | | | | 68,946 | | |
| Expenses | 10 | Grants and similar amounts paid (list in Schedule O) | | | | | | | | | | | | | | | | | | | | | | | | | | 3,750 | |
| | 11 | Benefits paid to or for members | | | | | | | | | | | | | | | | | | | | | | | | | | -0- | |
| | 12 | Salaries, other compensation, and employee benefits | | | | | | | | | | | | | | | | | | | | | | | | | | -0- | |
| | 13 | Professional fees and other payments to independent contractors | | | | | | | | | | | | | | | | | | | | | | | | | | 140 | |
| | 14 | Occupancy, rent, utilities, and maintenance | | | | | | | | | | | | | | | | | | | | | | | | | | 2,881 | |
| | 15 | Printing, publications, postage, and shipping | | | | | | | | | | | | | | | | | | | | | | | | | | 1,173 | |
| | 16 | Other expenses (describe in Schedule O) | | | | | | | | | | | | | | | | | | | | | | | | | | 52,436 | |
| 17 | Total expenses. Add lines 10 through 16 ▶ | | | | | | | | | | | | | | | | | | | | | | | | | | 60,380 | | |
| Net Assets | 18 | Excess or (deficit) for the year (Subtract line 17 from line 9) | | | | | | | | | | | | | | | | | | | | | | | | | | 8,566 | |
| | 19 | Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) | | | | | | | | | | | | | | | | | | | | | | | | | | 53,980 | |
| | 20 | Other changes in net assets or fund balances (explain in Schedule O) | | | | | | | | | | | | | | | | | | | | | | | | | | -0- | |
| | 21 | Net assets or fund balances at end of year. Combine lines 18 through 20 ▶ | | | | | | | | | | | | | | | | | | | | | | | | | | 62,546 | |

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

| | | Yes | No |
|-----|--|-----|----|
| 33 | Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O | | ✓ |
| 34 | Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) | | ✓ |
| 35a | Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? | | ✓ |
| b | If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O | | |
| c | Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III | | ✓ |
| 36 | Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N | | ✓ |
| 37a | Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a <u> </u> -0- | | |
| b | Did the organization file Form 1120-POL for this year? | | ✓ |
| 38a | Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? | | ✓ |
| b | If "Yes," complete Schedule L, Part II and enter the total amount involved 38b <u> </u> | | |
| 39 | Section 501(c)(7) organizations. Enter: | | |
| a | Initiation fees and capital contributions included on line 9 39a <u> </u> | | |
| b | Gross receipts, included on line 9, for public use of club facilities 39b <u> </u> | | |
| 40a | Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ <u> </u> ; section 4912 ▶ <u> </u> ; section 4955 ▶ <u> </u> | | |
| b | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | | ✓ |
| c | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ <u> </u> -0- | | |
| d | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ <u> </u> -0- | | |
| e | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T | | ✓ |
| 41 | List the states with which a copy of this return is filed ▶ <u> </u> | | |
| 42a | The organization's books are in care of ▶ <u>Matthew Fontaine</u> Telephone no. ▶ <u>502-413-5721</u> Located at ▶ <u>1237 Garvin Pl. Louisville, KY</u> ZIP + 4 ▶ <u>40203-3005</u> | | |
| b | At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ <u> </u> See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | Yes | No |
| | | | ✓ |
| c | At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶ <u> </u> | | ✓ |
| 43 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 <u> </u> | | |
| | | Yes | No |
| 44a | Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ | | ✓ |
| b | Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ | | ✓ |
| c | Did the organization receive any payments for indoor tanning services during the year? | | ✓ |
| d | If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | | ✓ |
| 45a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | ✓ |
| b | Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) | | ✓ |

| | | | |
|--|-----------|-----|-------------------------------------|
| 46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | | Yes | No |
| | 46 | | <input checked="" type="checkbox"/> |

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

| | | | |
|--|------------|-----|----|
| 47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | | Yes | No |
| | 47 | | |
| 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | | | |
| | 48 | | |
| 49a Did the organization make any transfers to an exempt non-charitable related organization? | | | |
| | 49a | | |
| b If "Yes," was the related organization a section 527 organization? | | | |
| | 49b | | |

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

| (a) Name and title of each employee | (b) Average hours per week devoted to position | (c) Reportable compensation (Forms W-2/1099-MISC) | (d) Health benefits, contributions to employee benefit plans, and deferred compensation | (e) Estimated amount of other compensation |
|-------------------------------------|--|---|---|--|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

| (a) Name and business address of each independent contractor | (b) Type of service | (c) Compensation |
|--|---------------------|------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A ▶ Yes No

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

| | | |
|------------------|--|------|
| Sign Here | ▶ Signature of officer | Date |
| | ▶ Matthew Fontaine, Treasurer Type or print name and title | |

| | | | | | |
|-------------------------------|----------------------------|----------------------|------|---|------|
| Paid Preparer Use Only | Print/Type preparer's name | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN |
| | Firm's name ▶ | Firm's EIN ▶ | | | |
| | Firm's address ▶ | Phone no. | | | |

May the IRS discuss this return with the preparer shown above? See instructions ▶ Yes No

GGA Proposed Budget Calendar Year 2017

| | | | |
|--------------------------------------|-----------|----------------|---------------|
| Income | \$ | 108,950 | |
| GGNA | | \$ | 7,850 |
| Dues | | \$ | 350 |
| Donations | | \$ | 7,500 |
| GGBF | | \$ | 54,500 |
| Food & Beverages | | \$ | 6,000 |
| Shirt Sales | | \$ | 2,500 |
| Sponsors & Grants | | \$ | 45,000 |
| Vendor Permits | | \$ | 1,000 |
| Prior Years Retained Earnings | | \$ | 46,600 |

| | | | |
|---------------------------|-----------|----------------|---------------|
| Expenses | \$ | 108,950 | |
| GGNA | | \$ | 57,800 |
| Donations | | \$ | 5,000 |
| LG&E Lights | | \$ | 1,500 |
| Member Meals | | \$ | 1,000 |
| OLNC Dues | | \$ | 25 |
| Administration | | \$ | 275 |
| Neighborhood Improvements | | \$ | 50,000 |
| GGBF | | \$ | 51,150 |
| Advertising | | \$ | 2,000 |
| Bands | | \$ | 20,000 |
| Design | | \$ | 5,500 |
| Facilities | | \$ | 10,000 |
| Hotels-Bands | | \$ | 1,000 |
| Insurance | | \$ | 1,000 |
| LG&E Electric | | \$ | 1,500 |
| Permits | | \$ | 1,500 |
| Printing | | \$ | 1,500 |
| Rentals | | \$ | 1,500 |
| Security | | \$ | 4,000 |
| Shirts | | \$ | 1,600 |
| Water | | \$ | 50 |

Garvin Gate Association, Inc.
Profit & Loss
 January through December 2016

Jan - Dec 16

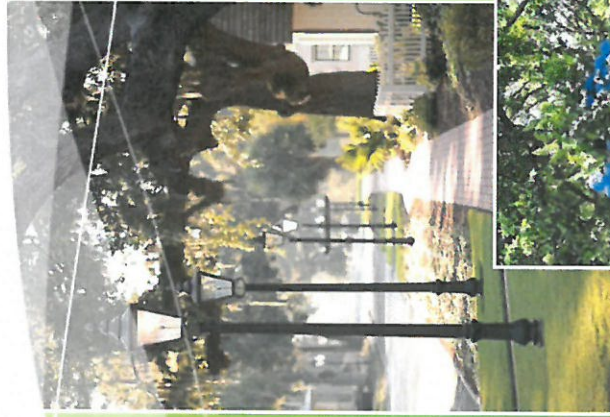
| | | |
|----------------------------|-----------|--|
| Ordinary Income/Expense | | |
| Income | | |
| Blues Fest Income | | |
| BF-Food and Beverage Sales | 7,116.84 | |
| BF-Merchandise | 3,704.25 | |
| BF-Other | 1,118.03 | |
| BF-Sponsorships | | |
| BF-Grants | 20,000.00 | |
| BF-Sponsorships - Other | 45,550.00 | |
| Total BF-Sponsorships | 65,550.00 | |
| BF-Vendor Fees | 1,200.00 | |
| Total Blues Fest Income | 78,689.12 | |
| Donation Income | 422.00 | |
| Interest Income | 120.00 | |
| Membership Dues | 420.00 | |
| Merchandise | 1,662.44 | |
| Total Income | 81,313.56 | |
| Expense | | |
| Bank Fees | 42.39 | |
| Blues Fest Expenses | | |
| BF-Advertising | 5,279.38 | |
| BF-Bands | 22,987.96 | |
| BF-Bank Fees | 54.96 | |
| BF-Design | 5,862.00 | |
| BF-Electric Meters | 397.87 | |
| BF-Facilities | 10,020.86 | |
| BF-Hotels | 1,676.37 | |
| BF-Insurance | 1,326.60 | |
| BF-Meals | 254.86 | |
| BF-Merchandise | 1,708.67 | |
| BF-Permits | 1,165.50 | |
| BF-Printing | 1,637.96 | |
| BF-Rentals | 1,520.00 | |
| BF-Security | 3,650.00 | |
| Total Blues Fest Expenses | 57,542.99 | |
| Donations | 6,500.00 | |
| Honoraria | 53.00 | |
| Meals and Entertainment | 1,552.66 | |
| Merchandise Expense | 2,081.99 | |
| Neighborhood Improvements | 4,734.30 | |
| OLNC Dues | 25.00 | |
| Postage / Admin | 265.54 | |
| Professional Fees | 1,563.00 | |
| Street Lights | 1,417.06 | |

Garvin Gate Association, Inc.
Profit & Loss
January through December 2016

| | Jan - Dec 16 |
|---------------------|-----------------|
| Total Expense | 75,777.93 |
| Net Ordinary Income | 5,535.63 |
| Net Income | 5,535.63 |

The History of the Garvin Gate

For over 20 years, Garvin Place in historic Old Louisville has been closed to through traffic from bustling Oak Street by a simple iron gate. While this street closing has had the desired effect of reducing street traffic, the original design of the area, which includes ample seating and no lighting, has had the unintended effect of encouraging loitering. This, in turn, has made the Gate a prime spot for illicit activity, rowdiness, and dumping, discouraging neighbors and visitors to our neighborhood from enjoying all that this Gateway to Old Louisville has to offer.



The Future of the Garvin Gate

Bordered by Oak Street to the North and Ormsby Avenue to the South, the Garvin Gate Neighborhood also encompasses Garvin Place and the 1200 block of 6th Street. Though these streets are at the border of the historic Old Louisville neighborhood, in their current state there is no indication to visitors that by crossing Oak Street, they have entered into the largest and foremost Victorian architecture preservation district in America.

In August of 2016 the Garvin Gate Neighborhood Association voted unanimously to move forward with replacing the Garvin Gate and improving the surrounding area. Our Improvements Committee put forward a design

for a new gate, enhanced landscaping, and lighting as well as a proposal for Victorian style street lamps on 6th street, and Ormsby Avenue similar to those already found on Garvin Place and around Old Louisville. It is our Neighborhood Association's intention that these improvements benefit not only our residents, but also all residents of Old Louisville as better lit streets are safer streets.

With these improvements, our belief is that the newly redesigned Garvin Gate will serve as the Gateway to Old Louisville welcoming visitors and neighbors alike into one of the country's most beautiful neighborhoods. Please turn the page to find out how to help!



COMMONWEALTH OF KENTUCKY
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings
 Business Filings
 PO Box 718
 Frankfort, KY 40602
 (502) 564-3490
 www.sos.ky.gov

Articles of Amendment
 (Domestic Nonprofit Corporation)

NPA

Pursuant to the provisions of KRS 14A and KRS Chapter 273, the undersigned applies to amend articles and, for that purpose, submits the following statements:

1. The name of the corporation on record with the Office of the Secretary of State is:

Garvin Gate Association, Inc.

(The name must be identical to the name on record with the Secretary of State.)

2. The text of each amendment adopted: (See Attached)

/
/
/
/
/

3. The date of adoption of each amendment was April 18, 2016

4. Check either a, b or c (whichever is applicable):

- a. The amendment(s) was (were) duly adopted by a quorum present at such meeting and that such amendment received at least two-thirds (2/3) of the votes which members present at such meeting or represented by proxy were entitled to cast.
- b. The amendment(s) was (were) duly adopted by consent in writing and was (were) signed by all members entitled to vote with respect thereto.
- c. The amendment(s) was (were) duly adopted by the board of directors and such amendment(s) received the vote of a majority of the directors in office since there are no members or members entitled to vote.

5. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is N/A
 (Delayed effective date and/or time)

I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.

Chris J. Bosson
 Signature of Officer or Chairman of the Board

Chris J. Bosson
 Printed Name

President
 Title

5/2/16
 Date

12. to encourage reasonable and adequate zoning and zoning code enforcement;
13. to encourage friendliness and cooperative community spirit in the area and in relations with other neighborhood groups in the Old Louisville Neighborhood Council and throughout the City of Louisville;
14. to support other charitable, educational and cultural activities which advance the general welfare of the community and its people; and
15. to adopt by-laws and other rules and regulations appropriate to the objects and purposes aforesaid, and including but not limited to, the establishment of dues and assessments for membership, the promotion of fund raising events for the benefit of the corporation, and the right to take title to, hold, manage, and dispose of property, real and personal, both as principal or agent, including the right to incur indebtedness and to enter into any and all types of contracts consistent with the purposes of the corporation.

The entire language in Article VI shall be removed and replaced as follows:

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, Kentucky Statutes, except as follows and as otherwise stated in these Articles.

Notwithstanding any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from Federal income tax under Section 501 (c)(3) of the Internal Revenue Code of 1954, or the corresponding provisions of any subsequent Federal tax laws.

The entire language in Article XII shall be removed and replaced as follows:

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 charitable or educational purposes as shall at the time qualify as an exempt organization under Section 501(c) (3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), or to the Federal government 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,

GARVIN GATE ASSOCIATION, INC.

General Information

Organization Number 0277694
Name GARVIN GATE ASSOCIATION, INC.
Profit or Non-Profit N - Non-profit
Company Type KCO - Kentucky Corporation
Status A - Active
Standing G - Good
State KY
File Date 9/25/1990
Organization Date 9/25/1990
Last Annual Report 3/19/2017
Principal Office 1210 GARVIN PLACE
LOUISVILLE, KY 40203
Registered Agent CHRISTOPHER BOSSON
1210 GARVIN PLACE
LOUISVILLE, KY 40203

Current Officers

President [Christopher Bosson](#)
Vice President [Tom Nance](#)
Secretary [Joan Williams](#)
Treasurer [Jonathon Bevan](#)
Director [Christopher Bosson](#)
Director [Jonathon Bevan](#)
Director [Howard Rosenberg](#)

Individuals / Entities listed at time of formation

Director [JEAN CROWE](#)
Director [ROBERT B LAUFER JR](#)

Director

[JOHN SHIRCLIFFE](#)

Incorporator

[ROBERT B LAUFER JR](#)

Incorporator

[JOHN SHIRCLIFFE](#)

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.

| | | | |
|--|----------------------|---------|--|
| Annual Report | 3/19/2017 | 1 page | PDF |
| Amendment | 5/6/2016 | 4 pages | tiff PDF |
| Registered Agent name/address change | 4/15/2016 4:26:27 PM | 1 page | PDF |
| Principal Office Address Change | 4/15/2016 4:23:19 PM | 1 page | PDF |
| Annual Report | 4/15/2016 | 1 page | PDF |
| Annual Report | 5/26/2015 | 1 page | PDF |
| Annual Report | 2/17/2014 | 1 page | PDF |
| Annual Report | 4/12/2013 | 1 page | PDF |
| Annual Report | 4/28/2012 | 1 page | PDF |
| Annual Report | 5/19/2011 | 1 page | PDF |
| Annual Report | 6/1/2010 | 1 page | PDF |
| Annual Report | 6/1/2009 | 1 page | PDF |
| Annual Report | 6/5/2008 | 1 page | tiff PDF |
| Annual Report | 5/24/2007 | 1 page | tiff PDF |
| Annual Report | 6/22/2006 | 1 page | tiff PDF |
| Annual Report | 4/13/2005 | 1 page | tiff PDF |
| Annual Report | 8/7/2003 | 1 page | tiff PDF |
| Annual Report | 8/28/2002 | 1 page | tiff PDF |
| Annual Report | 8/16/2001 | 1 page | tiff PDF |
| Annual Report | 8/8/2000 | 1 page | tiff PDF |
| Annual Report | 7/21/1999 | 1 page | tiff PDF |
| Annual Report | 7/6/1998 | 1 page | tiff PDF |
| Annual Report | 7/1/1997 | 1 page | tiff PDF |
| Annual Report | 7/1/1996 | 1 page | tiff PDF |
| Annual Report | 7/1/1995 | 1 page | tiff PDF |
| Annual Report | 7/1/1994 | 1 page | tiff PDF |
| Annual Report | 7/1/1993 | 1 page | tiff PDF |

[Annual Report](#)
[Annual Report](#)
[Articles of Incorporation](#)

7/1/1992
7/1/1991
9/25/1990

1 page
1 page
6 pages

[PDF](#)
[PDF](#)
[PDF](#)

[tiff](#)
[tiff](#)
[tiff](#)

Assumed Names

Activity History

| Filing | File Date | Effective Date | Org. Referenced |
|--------------------------------------|-----------------------|-----------------------|-----------------|
| Annual report | 3/19/2017 10:11:21 PM | 3/19/2017 10:11:21 PM | |
| Amendment - Miscellaneous amendments | 5/6/2016 9:33:47 AM | 5/6/2016 | |
| Annual report | 4/15/2016 4:40:27 PM | 4/15/2016 4:40:27 PM | |
| Registered agent address change | 4/15/2016 4:26:27 PM | 4/15/2016 4:26:27 PM | |
| Principal office change | 4/15/2016 4:23:19 PM | 4/15/2016 4:23:19 PM | |
| Annual report | 5/26/2015 9:59:18 AM | 5/26/2015 9:59:18 AM | |
| Annual report | 2/17/2014 9:25:12 AM | 2/17/2014 9:25:12 AM | |
| Annual report | 4/12/2013 9:52:55 AM | 4/12/2013 9:52:55 AM | |
| Annual report | 4/28/2012 10:26:56 AM | 4/28/2012 10:26:56 AM | |
| Annual report | 5/19/2011 12:49:35 PM | 5/19/2011 12:49:35 PM | |
| Annual report | 6/1/2010 10:46:43 AM | 6/1/2010 10:46:43 AM | |
| Annual report | 6/1/2009 3:18:23 PM | 6/1/2009 3:18:23 PM | |
| Annual report | 6/5/2008 3:47:09 PM | 6/5/2008 | |
| Annual report | 5/24/2007 11:31:22 AM | 5/24/2007 | |
| Annual report | 6/22/2006 2:32:40 PM | 6/22/2006 | |

Microfilmed Images

Microfilm images are not available online. They can be ordered by faxing a [Request For Corporate Documents](#) to the Corporate Records Branch at 502-564-5687.

| | | |
|---------------------------|-----------|---------|
| Annual Report | 3/14/2005 | 1 page |
| Annual Report | 8/30/2004 | 1 page |
| Annual Report | 8/7/2003 | 1 page |
| Annual Report | 8/28/2002 | 1 page |
| Annual Report | 8/16/2001 | 1 page |
| Annual Report | 8/8/2000 | 1 page |
| Annual Report | 7/21/1999 | 1 page |
| Annual Report | 7/6/1998 | 1 page |
| Annual Report | 7/1/1997 | 1 page |
| Annual Report | 7/1/1996 | 1 page |
| Annual Report | 7/1/1995 | 1 page |
| Annual Report | 7/1/1994 | 1 page |
| Annual Report | 7/1/1993 | 1 page |
| Annual Report | 7/1/1992 | 1 page |
| Annual Report | 7/1/1991 | 1 page |
| Articles of Incorporation | 9/25/1990 | 6 pages |