

NDF042022NH05

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

Applicant/Program: Neighborhood House/Purchase an Applicant Requested Amount: \$5,000 Appropriation Request Amount: \$5,000	d Installation of New HVAC System
Executive Summary of Request Funds will be used to assist in the purchase and installation	n of a new HVAC system.
Is this program/project a fundraiser? Is this applicant a faith based organization? Does this application include funding for sub-grantee(s)?	Yes No Yes No Yes No
I have reviewed the attached Neighborhood Development within Metro Council guidelines and request approval of forganization's statement of public purpose to be furthered by purpose is legitimate. I have also completed the disclosure	unding in the following amount(s). I have read the by the funds requested and I agree that the public
District # Primary Sponsor Signature	\$5,000 4/11/2022 Amount Date
Primary Sponsor Disclosure List below any personal or business relationship you, your organization, its volunteers, its employees or members of it	
Approved by:	
Appropriations Committee Chairman Final Appropriations Amount:	Date

Appne	ant/P	rogram	1:					
						 	_	

Neighborhood House/Purchase and Installation of New HVAC System

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	<u></u> \$
District 3	\$
District 4	<u> </u>
District 5	<u></u> \$
District 6	\$
District 7	\$
District 8	\$
District 9	\$
District 10	\$
District 11	\$
District 12	\$
District 13	\$
District 14	\$
District 15	\$

Applicant/Progra	am:	ogra	Pro	nt	a	C	li	gc	A
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Neighborhood House/Purchase and Installation of New HVAC System

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	\$

3 | Page Effective May 2016

Legal Name of Applicant Organization Neighborhood House

Program Name and Request Amount	t Purchase and Installation of New HVAC System	\$5,000
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	Yes/No/NA
s the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	Yes
s the funding proposed by Council Member(s) less than or equal to the request amount?	Yes
s the proposed public purpose of the program viable and well-documented?	Yes
Will all of the funding go to programs specific to Louisville/Jefferson County?	Yes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	Yes
Has prior Metro Funds committed/granted been disclosed?	Yes
s the application properly signed and dated by authorized signatory?	Yes
s proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes
f Metro funding is for a separate taxing district is the funding appropriated for a program outside the egal responsibility of that taxing district?	N/A
s the entity in good standing with: • Kentucky Secretary of State? • Louisville Metro Revenue Commission? • Louisville Metro Government? • Internal Revenue Service? • Louisville Metro Human Relations Commission?	Yes
s the current Fiscal Year Budget included?	Yes
s the entity's board member list (with term length/term limits) included?	Yes
s recommended funding less than 33% of total agency operating budget?	Yes
Does the application budget reflect only the revenue and expenses of the project/program?	Yes
s the cost estimate(s) from proposed vendor (if request is for capital expense) included?	Yes
s the most recent annual audit (if required by organization) included?	Yes
s a copy of Signed Lease (if rent costs are requested) included?	N/A
s the Supplemental Questionnaire for churches/religious organizations (if requesting organization is aith-based) included?	N/A
Are the Articles of Incorporation of the Agency included?	Yes
s the IRS Form W-9 included?	Yes
s the IRS Form 990 included?	Yes
Are the evaluation forms (if program participants are given evaluation forms) included?	N/A
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if equired to do so)?	N/A
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant net the BBB Charity Review Standards?	Yes

Harward, Sonya

From: Bell, LaTonya J. Sent: Wednesday, April 20, 2022 11:24 AM To: Purvis, Donna L.; Harward, Sonya Cc: Blackwell, Rick; Blazis, Heather Subject: **RE: Neighborhood House** CM Purvis, thank you. Sonya, sorry please add this email to the NDF packet because it addresses both items. Thanks. ----Original Message----From: Purvis, Donna L. < Donna. Purvis@louisvilleky.gov> Sent: Wednesday, April 20, 2022 11:21 AM To: Bell, LaTonya J. <LaTonya.Bell2@louisvilleky.gov> Cc: Harward, Sonya <Sonya.Harward@louisvilleky.gov> Subject: Re: Neighborhood House Sorry, yes ma'am, that was the reason. Sent from my iPhone > On Apr 20, 2022, at 11:19 AM, Bell, LaTonya J. <LaTonya.Bell2@louisvilleky.gov> wrote: > You didn't provide a reason for the delay in the submission of the NDF Application. Did the Neighborhood House learn that they can be reimburse through NDF funds for the HVAC in 2022, resulting in its NDF Application being submitted in April 2022 instead of in 2021? > > Thanks. > > ----Original Message-----> From: Purvis, Donna L. < Donna. Purvis@louisvilleky.gov> > Sent: Wednesday, April 20, 2022 11:02 AM > To: Bell, LaTonya J. <LaTonya.Bell2@louisvilleky.gov> > Cc: Harward, Sonya <Sonya.Harward@louisvilleky.gov> > Subject: Neighborhood House > Good Morning, LaTonya, > The check showing payment for the agencies HVAC service was submitted yesterday for appropriations. > > Also, this was an urgent need and they had to act quickly to replace the needed HVAC since they serve various groups of the community. > > Thanks for your assistance.

		SI	ECTION 1 - APPL	ICAN	TINFORMATION		
Legal Name of Applica	_						
(as listed on: http://www.se							8
Main Office Street & I	Mailing A	ddress:	201 N 25th Str	eet, I	ouisville KY 402	12	0
Website: www.nhky.o	org						+
Applicant Contact:	Jennie .	Jean D	avidson	#	Title:	Executive Director	6
Phone:	502-77	4-2322			Email:	jdavidson@nhky.org	E3
Financial Contact:	Beverly	Jones		0	Title:	Director of Finance	
Phone:	502-774				Email:	bjones@nhky.org	
Organization's Repres	entative v	who att	ended NDF Trair	ning:	Kaycee Reed		
GEOG	RAPHICA	AREA(S) WHERE PROG	RAM	ACTIVITIES ARE (V	VILL BE) PROVIDED	
Program Facility Locat	ion(s):	201 N	25th Street, Lo	ouisvi	lle KY 40212		Đ
Council District(s):		5			Zip Code(s):	40212	
	SECTIO	ON 2 – F	ROGRAM REQU	EST 8	FINANCIAL INFOR	RMATION	
PROGRAM/PROJECT N	IAME: HV	'AC Re	placement				
Total Request: (\$)	\$5,000)	Total Metro A	ward	(this program) in	previous year: (\$) 0	
Purpose of Request (c	heck all th	nat appl	y):				
Operating Fu	nds (gene	rally ca	nnot exceed 33%	6 of a	gency's total opera	ting budget)	
Programming	g/services	/events	for direct benef	it to	community or quali	ified individuals	
Capital Proje	ct of the o	organiza	tion (equipment	, furr	ishing, building, et	c)	
The Following are Req	uired Atta	chmen	ts:				
✓ IRS Exempt Status Det	ermination	Letter			Signed lease if rent co	osts are being requested	
Current year projected	l budget				RS Form W9		
Current financial state	ment				Evaluation forms if us	ed in the proposed program	
Most recent IRS Form	990 or 112	0-H			Annual audit (if requi	red by organization)	
Articles of Incorporation	on (curren	t & signe	d)		aith Based Organizat	tion Certification Form, if applicable	e
Cost estimates from processing capital expense	oposed ve	ndor if r	equest is for				
Government for this or	any othe	r progra	ım or expense, ir	ncludi	ng funds received t	eived from Louisville Metro through Metro Federal Grants, ent Funds). Attach additional	More till frem til med en en eft skrivet
Source:	Source: Amount: (\$)						
Source: Amount: (\$)							
Source: Amount: (\$)							
Has the applicant conta	cted the	BBB Cha	rity Review for p	artic	ipation? Yes	No	
Has the applicant met t	he BBB Cl	narity R	eview Standards	? V	/		

SECTION 3 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

Neighborhood House is a community center serving Louisville's West End. Our mission is to connect families with opportunities and experiences that enhance the quality of their lives. Our vision is to break the cycle of poverty for our children and families and empower them to change their lives.

Our Child Development Center serves children as young as 6 weeks old through developmental milestones and prepares them for kindergarten. The Center is a part of the elite Excellence Academy, Stars for Kids Now, and Greater Louisville Head Start.

Our Youth Development Program offers academic support, character development and life skills training, cultural and recreational activities, and college and career readiness services to children ages 6-18. During the 2020-2021 school year, we operated an NTI Academy to provide all-day support to our students.

Our Family Services Department provides a variety of services to our community including young adults, college students, parents and senior citizens. Four Seasons provides seniors with workshops, physical and recreational activities, and meals to address their physical, social and emotional well-being and improve the quality of their lives. Our Food Bank provides emergency food support and referrals for other services.

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Ted Nixon	2024
Debbie Held	2022 -12-31
Kevin Everwine	2023
Daniel Gibson	2023
Celia Manlove	2023
Kate Ward	2023
Allison Stack	2023
Deja Jackson	2022 -12-31
Nubia Bennett	2022 -12-31
Dr. Kelly McCants	2024
Amber Garvey	2022 -12-31
Tom Reith	2022 -12-31
Anne Hoskinson	2022 -12-31
Kelli Morris	2023

Describe the Board term limit policy:

As outlined in our bylaws, our board of directors are limited to three year terms with no more than three consecutive terms.

Three Highest Paid Staff Names	Annual Salary
Jennie Jean Davidson	\$103,472
Martha Fuson	\$77,226
Jill Seelmeyer	\$64,868

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.):

We requested multiple bids from vendors and began raising funds for our HVAC replacement in 2021. The project included the purchase and installation of two new HVAC systems and all labor, equipment and materials associated with such a large project. The project was completed in August 2021, putting a financial strain on our capital improvement funds. The total project expenses was \$42,399.

The families we serve are from some of the poorest zip codes in the city, including 40212, 40211, 40203, 40210, 40202, 40208, 40216, and 40215. Most of our families live in Portland, Russell, Chickasaw, and Shawnee. We also serve families from other West End neighborhoods and downtown.

The neighborhoods in which our members live are among those with the highest rates of substance misuse and poverty and the lowest life expectancy in the city. These were the circumstances prior to Covid-19, and research shows that the negative side effects of necessary social distancing measures will be grave for many.

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

Funding will be toward the total cost of HVAC purchase and installation. All funds were paid to the contractor (Schardein Mechanical). No funds will go to sub grantees.

The final cost of the total HVAC replacement and repair was \$42,399. We received several bids for the work, and this contractor's bid met our needs best.

C: If t	his request is a fundraiser, please detail how the proceeds will be spent:
N/A	
D: For	r Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date
and er	nds 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:
	ha finading narross is a naimh mannamh af tha fallanting ann a dituma that will machall be in a man daftan tha
	he funding request is a reimbursement of the following expenditures that will probably be incurred after the
ap	oplication 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.
	e Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the
gr	ant agreement.
Purch	ase and installation of boiler.
	and modulation of bollott-
-	eimbursements should not be made before application date unless an emergency can be demonstrated
	the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach
in	voices 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.
✓	recent a copy of dancemed checks to provide proof of payment of the invoices of receipts associated with the work
	plan identified in this application.
\$42.30	99 was the final bill. We are requesting \$5,000 to help cover the total expense.
÷,oo	The title the title are requesting \$6,000 to note the total expense.

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:

Neighborhood House is dedicated to providing the highest quality care to our children. This includes making sure that our facilities are comfortable, safe and as up-to-date as possible to meet the needs of the families who trust our Child Development Center to care for their children. In 2021, it became clear that we needed to update our HVAC system to replace outdated units. The AC units were a major expense for our organization, but these updates are vital to ensuring our children, senior members and families are comfortable and that our center is up to code on all facility requirements.

Our specific outcomes for youth and family programming are as follows:

Objective 1 -

Active Youth Development Program members who participate in programs 3 or more days each week on average will demonstrate improvement in reading and math skills.

Neighborhood House tracks outcomes for each of our programs in accordance with our standard operating policies and in alignment with our strategic plan and goal to increase the impact of each of our programs from year to year. Specifically, for our Youth Development Program, we track attendance each day, monitor students academic progress throughout the year through JCPS's Cascades software, perform internal assessments, and progress reports. Our Youth Advocate staff communicate directly with teachers as needed when assessments and progress reports indicate that a student is falling behind.

Expected suitanne 700/ of students who participate in programs 2 or more days each week on average.

see attached pages

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.

Neighborhood House has a long history with partners like Dare to Care, Louisville Metro Government, Metro United Way and Maryhurst. Our Dare to Care partnership allows us to feed kids dinner every day, and 3 meals a day during our summer program. Our Dare to Care Food Bank, open to the community for 3 hours every weekday, distributes over 200 food monthly.

We also partner with Evolve 502, Greater Louisville Head Start, and the Decode Project. When we first began our NTI programming in 2020, we saw that 100% of our students were at least one grade level behind in reading and math. However, we know that with the financial support needed to grow our staff and programming, our families can and will thrive. Our NTI Academy students far exceeded the academic outcomes of the average Jefferson County Public School student – 82% improved or maintained their GPAs. On average, 73% improved or maintained their math grades because of the personalized support they received. In comparison, WDRB News reported in July 2021 that 16,704 out of 90,048 students, or 18.6%, failed at least one course.

We know that lasting impact and change happen when we work together. We are committed to strengthening our existing partnerships and working with new partners to ensure our families are supported and have access to opportunities to improve their lives.

E. Describe the program's benefit 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.

Neighborhood House is dedicated to providing the highest quality care to our children, families and seniors. This includes making sure that our facilities are comfortable, safe and as up-to-date as possible to meet the needs of the families who trust us. In 2021, it became clear that we needed to update our HVAC system to replace outdated units. The AC units were a major expense for our organization, but these updates are vital to ensuring our children, senior members and families are comfortable and that our center is up to code on all facility requirements.

Our specific outcomes for youth and family programming are as follows:

Objective 1

Active Youth Development Program members who participate in programs 3 or more days each week on average will demonstrate improvement in reading and math skills.

Neighborhood House tracks outcomes for each of our programs in accordance with our standard operating policies and in alignment with our strategic plan and goal to increase the impact of each of our programs from year to year. Specifically, for our Youth Development Program, we track attendance each day, monitor students academic progress throughout the year through JCPS's Cascades software, perform internal assessments, and progress reports. Our Youth Advocate staff communicate directly with teachers as needed when assessments and progress reports indicate that a student is falling behind.

Expected outcome – 70% of students who participate in programs 3 or more days each week on average will maintain or demonstrate improvement in reading and math skills.

Objective 2

The Youth Development program will provide all members with continued skill development programs and activities focused on Social-Emotional Learning.

Neighborhood House uses the Staff Rating for Youth Behavior (SRYB) as a tool to measure social-emotional learning (SEL) developed by the Weikart Center for Youth Program Quality. It is a pre/post, observation-based assessment that is designed to assess the behavior of children and youth in OST programs and measure whether youth are making progress on SEL skills such as teamwork, emotion management, responsibility, and problem-solving.

Expected outcome – 75% percent of participants who attend three or more days each week for at least six weeks will demonstrate improvement or maintain SEL skill levels as measured by staff observations and the SYRB.

Objective 3

The Family Coaching Program provides financial coaching and goal-setting, health and wellness activities, family engagement, parental support, access to our emergency food bank to help families focus on other expenses and building savings, connection with other community services, and more. Assist parents with goal setting to improve the overall wellbeing and financial stability of their family.

Our Family Coaching program uses surveys and frequent check-ins with our families to track progress and ensure we are reaching our outlined goals. Our Family Coaches also use Unite Us, which is our Case Management software that helps track client notes. We can make referrals through this software to other organizations. We were one of the Metro United Way pilot sites for this software. We create quarterly reports for our programs based on the goals outlined above, and are happy to report them to the Foundation as requested.

Expected outcomes -

- 60 families will be served
- 75% of families who are engaged in the coaching program will make progress toward their goals.

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			0
B: Rent/Utilities			0
C: Office Supplies			0
D: Telephone			0
E: In-town Travel			0
F: Client Assistance (See Detailed List on Page 8)			0
G: Professional Service Contracts			0
H: Program Materials			0
I: Community Events & Festivals (See Detailed List on Page 8)			0
J: Machinery & Equipment			0
K: Capital Project	\$5,000	\$37,399	Q \$42,399
L: Other Expenses (See Detailed List on Page 8)			0
*TOTAL PROGRAM/PROJECT FUNDS	\$5,000	\$37,399	% \$42,399
% of Program Budget	11.79%	88.21%	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)	\$37,399
Fees Collected from Program Participants	
Other (please specify)	
Total Revenue for Columns 2 Expenses **	\$37,399

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

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

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7	Column 1	Column 2	Column (1 + 2)=3
(circle one and use multiple sheets if necessary)	Proposed Metro Funds	Non- Metro Funds	Total Funds
NOT APPLICABLE			0
			0
			0
			0
			0
			0
			0
			0
			0
			0
			0
			0
			0
			0
			0
			0
			0
Tota	0	0	0

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
ŀ			
l	Total Value of In-Kind	0	
	(to match Program Budget Line Item.		
L	Volunteer Contribution &Other In Kind)		
PEF	FED INDIVIDUALLY, BUT GROUPED TOGETHER RSON PER WEEK PENCY Fiscal Year Start Date: July 1	ON ONE LINE AS A TOTAL NOT	ING HOW MANY HOURS PER
	es your Agency anticipate a significant increased get projected for next fiscal year? NO	e or decrease in your budget fr YES	om the current fiscal year to the
If Y	ES, please explain:		
	-o, p. c. c. p. c		

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.
- 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.

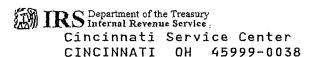
Signatur	e of Legal Signatory:		home	D~~			Date:	April 10, 2022
Legal Sig	natory: (please print):	Jennie Jean Davidson				0	Title:	Executive Director
Phone:	502-774-2322		Extension:		Email:	jda	vidson(@nhky.org



Louisville Metro Government Office of Management and Budget

Neighborhood Development Fund Training Attestation

Grantee Organization Nam	e: Neighborhood House	
Grantee Representative Na	me: Hayree Reed	
I agree that I am an autho having viewed the Neigh	rized representative and/or signatory of the organization named above and attest aborhood Development Fund training presentation. I understand the report Porhood Development Fund grant. Additionally, after viewing the presentation. I h	tine
Please check:		
I viewed the	e NDF training material on the website	
Answer the following quest	ions before signing (Circle or write in the correct answer).	
1. The NDF funding yo	ur agency received is a gift from LMG? True of False	
	dget categories that require a detail list.	
Client Assista	Mce Community Events & Festivals and Other Expenses	
3. If your agency charg	ged gross pay to NDF, you are required to provide additional documentation to quirements. True or False	******
4. Which four question	ns should your financial support documentation answer at all times?	
Mho	wheat when and where	
Your agency is consi	dered noncompliant if you do not account for funds received and/or your financial	
report is missing sup	oport documentation? True or False	
Canceled check, bar	k statement, invoice and receipt are considered proof of payment (True or False.	
Marie 20		
Grantee Representative Sign	lature Date	
NOTE: Please return to Rox	anne Steele	
E-mail address:	Roxanne.Steele@louisvilleky.gov Fax: 502-574-3219	
Mailing Address:	Louisville Metro Government	
	ATTN: NDF Coordinator	
	611 West Jefferson St.	
	Louisville KY 40202	



In reply refer to: 0752161033 Feb. 11, 2013 LTR 4168C 0 61-0445842 000000 00 00014734

BODC: TE

NEIGHBORHOOD HOUSE 201 N 25TH ST LOUISVILLE KY 40212



46127

Employer Identification Number: 61-0445842
Person to Contact: Mr. Perkins
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Jan. 31, 2013, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in Ocother 1972.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

0752161033 Feb. 11, 2013 LTR 4168C 0 61-0445842 000000 00 00014735

NEIGHBORHOOD HOUSE 201 N 25TH ST LOUISVILLE KY 40212

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Stephen E. Paxton

Lagher E. Patton

Operations Manager, AM Operations 3

HOUSE	BUDGET
	2022 OPERATING BUDGET

BUDGET

2021-2022	621,197	149,000	541,200	83,648	8,250	395,000	76,000	000'6	13,200	385	78,120	1,975,000		1,087,633	87,110	250,879	228,903	14,600	34,850	12,210	009	230,046	12,475	15,000	694	1,975,000
	❖	❖	❖	❖	❖	❖	❖	\$	\$	\$	\$	\$		❖	❖	❖	❖	❖	↔	\$	❖	❖	\$	❖	\$	\$
9	Contributions	Special Events	Grants	MUW	Memberships	Childcare Tuition	CDC Sustainment	"STARS" Funding	Nutrition Reimbursement	Miscellaneous Income	Rental Income	TOTAL INCOME	SE	Program Salaries & Benefits	Program Activities & Supplies	Fundraising Salaries & Expenses	Administrative Salaries & Benefits	Staff Hiring & Development	Food & Nutrition Supplies	Office Expense	Board Training & Meetings	Facilities Maintenance	IT Support	Legal & Accounting	Association Fees	TOTAL EXPENSES
INCOME													EXPENSE													

Neighborhood House, Inc. Statement of Financial Position

As of January 31, 2022

Total

Tuesday, Feb 15, 2022 12:21:21 PM GMT-8 - Accrual Basis

Neighborhood House, Inc. Statement of Financial Position

As of January 31, 2022

		Total
ASSETS		
Current Assets		
Bank Accounts		
1020 - Operating Account - Stock Yards		296,250
1025 - PNC Checking Account		3,305
1030 - Money Market Account - Stock Yards		496,959
1085 - Charitable Gaming Account - SYB		550
1090 - Cash on hand		104
Total Bank Accounts	\$	797,169
Total Accounts Receivable	\$	425,321
Other Current Assets		
1310 - Prepaid Expenses		3,119
1320 - Prepaid Insurance		2,425
1350 - Deposits with UST Unemployment)		22,211
Total Other Current Assets	\$	27,756
Total Current Assets	\$	1,250,245
Fixed Assets		
1410 - Land		18,200
1411- Land Purchased for New Building		506,993
1420 - New Building		2,748,383
1421 - Blue Building		397,976
1425 - Improvements		188,924
1430 - Equipment		94,147
1431 - Furniture & Fixtures		300,402
1435 - Vehicles		60,358
1480 - Accumulated Depreciation		(2,615,714)
Total Fixed Assets	\$	1,699,668
TOTAL ASSETS	\$	2,949,913
LIABILITIES AND EQUITY		
Liabilities		
Current Liabilities		
Total Accounts Payable	\$	269
Other Current Liabilities		
2100 - Accrued Payroll		36,568
2200 - Accrued Vacation		46,164
2310 - Dental Insurance WH		(1,829)
2320 - FSA WH		(1,053)
2340 - Supplemental Insurance WH		(607)
2350 - United Way WH		536
2360 - Vision Insurance WH		(509)
2400 - Deferred FICA Taxes (CARES)		34,295
2700 - Refundable Advance		297,873
Total Other Current Liabilities	\$	411,438
Total Current Liabilities	\$	411,707
Total Liabilities	\$	411,707
Equity		
3100 - Unrestricted Assets		(243,800)
3150 - Retained Earnings		513,747
3500 - Net Assets with Donor Restrictions		636,032
3501 3501- Net Assets with Donor Restrictions		121,111
Total 3500 - Net Assets with Donor Restrictions	\$	757,143
Opening Balance Equity	·	1,533,983
Net Revenue		(22,866)
		(,-50)
Total Equity	\$	2,538,207

(Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2019 Open to Public Inspection

<u>A</u>	For t	he 2019 c	alendar year, or tax year beginning 0	7/01/19 , and ending 06/30/	20						
В	Check if	f applicable:	C Name of organization		-	D Employe	r identification number				
	Address	s change	Neighborho	ood House, Inc.							
F	Name c	hanaa	Doing business as			61-0	445842				
님		•	Number and street (or P.O. box if mail is not deliver	red to street address)	Room/suite	E Telephor	e number				
	Initial re		201 N. 25th St.	201999991MM-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	<u> </u>	502-	774-2322				
	Final ref		City or town, state or province, country, and ZIP or for	oreign postal code							
\Box		ed return		KY 40212		G Gross red	eipts\$ 2,312,729				
=			F Name and address of principal officer:				subordinates? Yes X No				
Ш	Applicat	tion pending	Jennie Jean Davidso	n	H(a) Is this a gro	up return for s	subordinates? Yes X No				
			102 North 25th St		H(b) Are all sub	all subordinates included? Yes No					
			Louisville	KY 40212	If "No,"	No," attach a list. (see instructions)					
1	Tax-exe	empt status:	X 501(c)(3) 501(c) () ◀	(insert no.) 4947(a)(1) or 527							
J	Websit	te: W	ww.nhky.org		H(c) Group exer	notion numb	er >				
ĸ	Form of	f organization:		Other ► L	Year of formation: 1		M State of legal domicile: KY				
2222	art I	22222	ımmary				III Oldio di logal dollidio.				
				gnificant activities:							
	'	The	mission of Neighborhood H	louse is to provide individ	uale with						
ည			rtunities to enhance the	quality of their lives							
<u>na</u>	1	· OPPO									
Activities & Governance		Chaok thi	a have if the assessmention discontinue	d its operations or disposed of more than 25%							
ဗိ							18				
∞	3	Number o	or voting members of the governing body (Pa	art VI, line 1a)		. 3					
Ţį.	4	Number o	independent voting members of the govern	ning body (Part VI, line 1b)		. 4	18				
Ξ				r 2019 (Part V, line 2a)			59				
Ac			ber of volunteers (estimate if necessary)	• • • • • • • • • • • • • • • • • • • •		. 6	400				
	7a	Total unre	elated business revenue from Part VIII, colur		. 7a	0					
	b	Net unrela	ated business taxable income from Form 990	0-T, line 39		. 7b	0				
				Prior Yea	r	Current Year					
<u>o</u>						1,062	1,730,080				
Revenue			service revenue (Part VIII, line 2g)			5,332	423,097				
ě	10	Investmen	nt income (Part VIII, column (A), lines 3, 4, a	and 7d)		2,510	-3,739				
Œ	11	Other reve	enue (Part VIII, column (A), lines 5, 6d, 8c, 9	9c, 10c, and 11e)	64	1,413	145,493				
			nue – add lines 8 through 11 (must equal Pa	1,486	5,317	2,294,931					
	13	Grants an	d similar amounts paid (Part IX, column (A),	, lines 1–3)			0				
			aid to or for members (Part IX, column (A),				0				
ဖွာ	15	Salaries, o	other compensation, employee benefits (Part	t IX, column (A), lines 5–10)	1,15	7,510	1,165,433				
Jse	16a	Profession	nal fundraising fees (Part IX, column (A), line	e 11e)			0				
Expenses	b	Total fund	nal fundraising fees (Part IX, column (A), lind raising expenses (Part IX, column (D), line 2	25) ▶ 123,240							
ũ	17	Other exp	enses (Part IX, column (A), lines 11a-11d, 1	11f–24e)	689	, 962	637,905				
			enses. Add lines 13-17 (must equal Part IX,			7,472	1,803,338				
	19		ess expenses. Subtract line 18 from line 12			,155	491,593				
58					Beginning of Curr	ent Year	End of Year				
Net Assets or Fund Balances	20	Total asse	ets (Part X, line 16)		2,045		2,589,195				
AB	21	Total liabil	ities (Part X, line 26)		106	6, 635	159,202				
캶	22	Net assets	s or fund balances. Subtract line 21 from line	e 20	1,938	3,400	2,429,993				
	art li	Sig	nature Block								
Ur	nder pe	enalties of p	erjury, I declare that I have examined this return	n, including accompanying schedules and stateme	ents, and to the bes	t of my kno	wledge and belief, it is				
tru	ue, corr	ect, and co	mplete. Declaration of preparer (other than office	er) is based on all information of which preparer ha	as any knowledge.	•	,				
Sig	ın	Sig	gnature of officer			Date					
He			Jennie Jean Davidson	Execu	tive Dir	ector					
• •	-	Ty	pe or print name and title								
	······································	<u> </u>	preparer's name	Preparer's signature	Date	Check	if PTIN				
Paid	t	1 "		Robert Moreland	1	21 self-em	LJ"				
	parer		. Daldada ODR - 1				20-1416603				
	Only	Firm's nam		tion Road Suite 200	Fi	m's EIN	Z0-1410003				
		Firmt-	T 177 - 7232	40223			859-626-9040				
May	the IP	Firm's add	this return with the preparer shown above?		Pr	one no.	Yes No				
uy	4110 111	.~ www.uoo	and retain with the proparor shown above:	toco monaciono,			Tes No				

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		v	
2	complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1 2	X	ļ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	-	^	
	candidates for public office? If "Vas " complete Schedule C. Part I.	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	-		
•	election in effect during the toy year? If "Vee " complete Cabedula C. Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	 	-	
_	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	-	<u> </u>	
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	İ		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d				3.5
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	<u> </u>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	^	
, 20	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	120		
•	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	le the exemination appeal described in acction 4.70/b\(4\/A\/ii\)2 # ((\/a\/ii\)2 # appeal to C-b at the F	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		_	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		<u>X</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			17
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>

P	art IV Checklist of Required Schedules (continued)						age
202000						Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals of	n		Г		†	+::-
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III				22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the					1	
	organization's current and former officers, directors, trustees, key employees, and highest compensated						
	employees? If "Yes," complete Schedule J				23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than					1	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	24b					
	through 24d and complete Schedule K. If "No," go to line 25a				24a		X
b	Did the executation investors are executed of the execute hands beyond a transport of the execution of the e				24b		1
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year					1	
	to defease any tax-exempt bonds?			1.	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			[·	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess the						
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I				25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a pi	rior					
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E	Z?					Ì
	If "Yes," complete Schedule L, Part I				25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any curr						
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%						
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II				26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, k	кеу					
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee						
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these						
	persons? If "Yes," complete Schedule L, Part III				27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, I						
	IV instructions, for applicable filing thresholds, conditions, and exceptions):						
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?	lf		j ·			
	"Yes," complete Schedule L, Part IV				28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV			7	28b		X
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If						
	"Yes," complete Schedule L, Part IV			:	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N	1		·····	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified						
	conservation contributions? If "Yes," complete Schedule M				30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N	l, Part	1		31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"						
	complete Schedule N, Part II				32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulation	ns					
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I			L	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III	,					
	or IV, and Part V, line 1				34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?				35a		Х
b	If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2			3	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable						
	related organization? If "Yes," complete Schedule R, Part V, line 2				36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	on					ĺ
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	VI			37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b a	nd					
0000000	19? Note: All Form 990 filers are required to complete Schedule O.				38	Х	<u></u>
Pa	Statements Regarding Other IRS Filings and Tax Compliance						
	Check if Schedule O contains a response or note to any line in this Part \	<u>/</u>		<u></u>			
			ı			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	17				
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and						
	reportable gaming (gambling) winnings to prize winners?				1c	Х	ł

P	iff V Statements Regarding Other IRS Filings and Tax Compliance (continue)	nued)				
					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	59			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			3333333		
За				3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other author	•	•			
	a financial account in a foreign country (such as a bank account, securities account, or other financial acc	ount)?		4a		X
b	If "Yes," enter the name of the foreign country ▶					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acco	unts (F	FBAR).			
5a						X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		L
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	•				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods					
	and services provided to the payor?			7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract	:t?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 88			7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization fi		rm 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by	the				
	sponsoring organization have excess business holdings at any time during the year?			8	********	000000000
9	Sponsoring organizations maintaining donor advised funds.					
а						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? \dots			9b		Cocacaca
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	1				
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104	11?		12a	3000000	
	·	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а				13a		000000000
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which					
	the organization is licensed to issue qualified health plans	13b				
C	•••••••••••••••••••••••••••••••••••••••	13c				10000000000000000000000000000000000000
14a						<u> </u>
. b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration					
	excess parachute payment(s) during the year?			15	8588	X
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment incon	ne?		16		X
	If "Yes," complete Form 4720, Schedule O.					

Form 990 (2019) Neighborhood House, Inc. 61-0445842 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 18 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent 18 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х 5 Did the organization have members or stockholders? 6 X 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? X 8a Each committee with authority to act on behalf of the governing body? X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? X If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 X 13 Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records **>** Beverly Jones 201 N. 25th St.

Louisville

502-774-2322

KY 40212

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				than one s both an ir/trustee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and	
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee			related organizations	
(1) Jennie Jean Davi	dson 40.00									
Executive Director	0.00	1		x			53,480	O	4,464	
(2) Dustin Bell										
	1.00									
Board Member	0.00	X					0	0	0	
(3) Nubia Bennet										
Board Member	1.00	x					0	o	0	
(4) Kevin Everwine										
	1.00									
Treasurer	0.00	X		X			0	0	0	
(5) Kevin Fuqua										
Board Member	1.00 0.00	x					0	0	0	
(6) Amber Garvey										
Board Member	1.00	x					o	0	0	
(7) Daniel Gibson										
	1.00									
Resource Development	0.00	X		Х			0	0	0	
(8) Debbie Held										
<u> </u>	1.00									
Vice President	0.00	Х		X			0	0	0	
(9) Vicki Hines-Mart										
Board Member	1.00 0.00	x					ol	o	0	
(10) Anne Hoskinson	0.00	^					U	U	0	
(10)11111111111111111111111111111111111	1.00									
Board Member	0.00	x					o	o	0	
(11) Tom Kokai					\neg				<u> </u>	
	1.00									
Board Member	0.00	X					0	0	0	

Form 990 (2019) Neighborhood House, Inc.
Part VII Section A. Officers, Directors, Trustees, Key Emp

Part VII Section A. Office	ers, Directors, Tru	stee	s, Ke	y E	mplo	yees	s, an	d Highest Compensated	Employees (continued)		
(A) Name and title	(B) Average hours per week (list any	bo	(C) Position (do not check more than or box, unless person is both a officer and a director/truste			is both or/trust	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations	
(12) Celia Manlo		1									
Board Member	0.00	x						o	o	0	
(13) Carol Matti	c		T							<u> </u>	
Secretary	1.00	x		x				o	o	0	
(14) Kelli Morris		Â	T	A	<u> </u>			<u> </u>	<u> </u>	<u> </u>	
Daniel Manhan	1.00		ŀ							_	
Board Member (15) Ted Nixon	0.00	X	-					0	0	0	
	1.00										
President (16) Tom Rieth	0.00	X		X	<u> </u>			0	0	0	
(10) IOM KIECH	1.00										
Board Member	0.00	X	<u> </u>					0	0	0	
(17) Allison Stac	1.00										
At Large	0.00	х		X				0	0	0	
(18) Kate Ward	1 00										
Board Member	1.00	x						0	o	0	
(19) Cheryl White	•										
Board Member	0.00	x						0	o	0	
1b Subtotal						.	•	53,480	<u>U</u>	4,464	
c Total from continuation sh								F2 400			
2 Total number of individuals (i											
3 Did the organization list any for	ormer officer, direc	tor, t	ruste	e, ke	y en	ploye	ee, o	r highest compensated		Yes No	
employee on line 1a? If "Yes,For any individual listed on lin organization and related organization	e 1a, is the sum of	repo	rtable	con	npen	satio	n an	d other compensation from	the	3 X	
individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual										4 X	
for services rendered to the organization? If "Yes," complete Schedule J for such person										5 X	
Section B. Independent Contract Complete this table for your fi	ve highest compens	sated	d inde	epend	dent	contr	acto	rs that received more than \$	S100,000 of		
compensation from the organ	zation. Report com	pens	ation	for t	the c	alend	lar y	ear ending with or within the	organization's tax year.	(C)	
(A) Name and business address								Descripti	(C) Compensation		
						-		W. 11 21 21 21 21 21 21 21 21 21 21 21 21			
2 Total number of independent	ontroctoro (in aliceli	na h	ı+ ·	10		. # -		tod about the			
2 Total number of independent received more than \$100,000	of compensation from	om th	ne org	ganiz	eu (cation	י נווספ ז ▶	e IIS	sieu adove) wno	0		

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (B) Related or exempt (D) Revenue excluded Unrelated from tax under sections 512-514 function revenue business revenue 1a Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts 1a 240,841 **b** Membership dues 2,597 1b **c** Fundraising events _____ 5,095 1c d Related organizations 1d e Government grants (contributions) 1e 36,900 f All other contributions, gifts, grants, and similar amounts not included above 1,444,647 1f 246,101 Noncash contributions included in lines 1a-1f 1a |\$ h Total. Add lines 1a-1f 1,730,080 Business Code Day Care Client Fees 363,252 363,252 44,283 44,283 Food Program Fees 15,562 15,562 Other program fees f All other program service revenue 423,097 g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) -3,431-3,431Income from investment of tax-exempt bond proceeds 5 Royalties (ii) Personal 72,616 6a Gross rents 6a b Less: rental expenses 6b 72,616 c Rental inc. or (loss) 6c Net rental income or (loss) 72,616 72,616 7a Gross amount from (i) Securities (ii) Other sales of assets other than inventory 7a **b** Less: cost or other Other Revenue 7b 308 basis and sales exps. -3087с c Gain or (loss) -308 d Net gain or (loss) -3088a Gross income from fundraising events (not including \$ 5,095 of contributions reported on line 1c). See Part IV, line 18 8a 89,760 **b** Less: direct expenses 8b 17,490 72,270 c Net income or (loss) from fundraising events 72,270 9a Gross income from gaming activities. See Part IV, line 19 9a **b** Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a **b** Less: cost of goods sold 10b c Net income or (loss) from sales of inventory **Business Code** 607 607 11a **d** All other revenue 607 Total. Add lines 11a-11d ... 2,294,931 423,396 0 141,455 Total revenue. See instructions

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses Do not include amounts reported on lines 6b, (A) Total expenses Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 99,000 29,700 19,800 49,500 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 878,919 728,881 127,484 22,554 Pension plan accruals and contributions (include 8 21,128 16,389 1,557 3,182 section 401(k) and 403(b) employer contributions) Other employee benefits 55,703 43,210 8,389 $4, \overline{104}$ 110,683 85,858 16,670 8,155 Payroll taxes _____ 10 11 Fees for services (nonemployees): Management а b Legal 12,500 12,500 Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column <u>7,</u>058 7,058 (A) amount, list line 11g expenses on Schedule O.) 9,239 9,239 12 Advertising and promotion 31,376 5,801 19,330 6,245 Office expenses 13 Information technology 14 Royalties 15 6,149 83,449 64,731 12,569 Occupancy 16 4,110 2,041 2,069 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 13,339 9,872 2,395 Conferences, conventions, and meetings 1,072 19 3,782 2,934 570 278 20 Payments to affiliates 21 146,719 Depreciation, depletion, and amortization 22,097 10,811 113,811 35,964 27,897 5,417 2,650 23 Insurance Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 241,623 241,623 Program Expenses Contract Labor 17,786 17,786 12,959 Other Expenses 10,992 1,889 78 6,795 1,319 8,760 646 Telephone e All other expenses 7,688 9,241 1,351 202 1,803,338 1,416,009 264,089 123,240 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash—non-interest-bearing 60,247 1 309,760 Savings and temporary cash investments Pledges and grants receivable, net 183,034 501,334 3 3 Accounts receivable, net 32,065 53,721 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 Inventories for sale or use Prepaid expenses and deferred charges 33,266 9 24,711 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 4,315,383 10a 2,615,714 **b** Less: accumulated depreciation 10b 1,736,423 1,699,669 10c Investments—publicly traded securities 11 Investments—other securities. See Part IV, line 11 12 12 Investments—program-related. See Part IV, line 11 13 13 Intangible assets 14 14 15 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 33) 2,045,035 2,589,195 16 16 Accounts payable and accrued expenses 17 106,635 17 106,729 18 Grants payable 18 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, 22 trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 52,473 Total liabilities. Add lines 17 through 25 106,635 159,202 26 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net Assets or Fund Balances Net assets without donor restrictions 1,741,088 1,659,830 27 278,570 28 Net assets with donor restrictions 688,905 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 29 Paid-in or capital surplus, or land, building, or equipment fund 30 Retained earnings, endowment, accumulated income, or other funds 31 31 Total net assets or fund balances 1,938,400 2,429,993 32 32 Total liabilities and net assets/fund balances ... 2,045,035 2,589,195

Form 990 (2019)

orn	m 990 (2019) Neighborhood House, Inc. 61-0	445842		Pa	age 12
P	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,	294,	931
2	Total expenses (must equal Part IX, column (A), line 25)	2		803,	
3	Revenue less expenses. Subtract line 2 from line 1	3		491,	593
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,	938,	400
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	2,4	429,	993
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Othe				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	r			
	reviewed on a separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on	a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs				
	the audit, review, or compilation of its financial statements and selection of an independent accountar	nt?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain	ain on			
	Schedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	ı in the			
	Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits	3b		
			Fr	orm 990	(2019)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Employer identification number

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Neighborhood House, 61-0445842

		neas	son for Public Charity	Status (All organization	s must	complet	e this part.) See instruct	ions.					
Γhe	orgai			it is: (For lines 1 through 12, che	-	,							
1		A church, co	nvention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(A)(i).						
2	Щ	A school des	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E (Form	990 or 99	0-EZ).)							
3				e organization described in section	on 170(b)(1)(A)(iii).								
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) . Enter the hospital's name, city, and state:											
5		•	* * * * * * * * * * * * * * * * * * * *	a college or university owned or	operated b	ov a gover	nmental unit described in						
		section 170((b)(1)(A)(iv). (Complete Part	II.)									
6	1			vernmental unit described in sect									
7	X		ion that normally receives a si section 170(b)(1)(A)(vi). (Co	ubstantial part of its support from omplete Part II.)	a governr	nental uni	t or from the general public						
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part II	l.)								
9			Itural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college ity or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or										
10		receipts from support from	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)										
11		An organization	on organized and operated ex	clusively to test for public safety.	See sect	ion 509(a)(4).						
12				clusively for the benefit of, to per									
		of one or more	e publicly supported organiza x in lines 12a through 12d tha	tions described in section 509(a at describes the type of supporting	i)(1) or se g organiza	ction 509	(a)(2). See section 509(a)(3).	1					
	а			rated, supervised, or controlled by			· · · · · · · · · · · · · · · · · · ·	,					
				er to regularly appoint or elect a m									
		supportin	g organization. You must co	mplete Part IV, Sections A and	B.								
	b			ervised or controlled in connection									
				ng organization vested in the sam	ne persons	that cont	rol or manage the supported						
	С		ion(s). You must complete	Part IV, Sections A and C. Upporting organization operated in	n connect	ion with a	nd functionally integrated with						
	·			uctions). You must complete P									
	d			. A supporting organization opera									
				organization generally must satist ust complete Part IV, Sections									
	е	Check thi	is box if the organization recei	ved a written determination from functionally integrated supporting	the IRS th	at it is a T							
	f		nber of supported organization	, , ,	Jorganizai	ion.			_				
			llowing information about the					L	_				
(i)		of supported	(ii) EIN	(III) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of	_				
`		anization	.,	(described on lines 1–10		ır governing	support (see	other support (see					
				above (see instructions))		ment?	instructions)	instructions)					
					Yes	No			_				
(A)													
B)									_				
				**									
C)													
D)				***************************************									
E)									_				
						***************************************			_				

Page 2

Neighborhood House, Inc. 61-0445842
Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Schedule A (Form 990 or 990-EZ) 2019
Part II Support Sched (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,051,876	986,706	1,346,121	816,616	1,730,080	5,931,399
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	1,051,876	986,706	1,346,121	816,616	1,730,080	5,931,399
6	Public support. Subtract line 5 from line 4						5,931,399
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	1,051,876	986,706	1,346,121	816,616	1,730,080	5,931,399
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	71,756	70,515	70,510	73,179	69,185	355,145
9	Net income from unrelated business activities, whether or not the business is regularly carried on	82,349	87,088	34,758	17,285	72,270	293,750
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						6,580,294
12	Gross receipts from related activities, etc. (s	ee instructions)				12	1,734,442
13	First five years. If the Form 990 is for the o	organization's first, s	econd, third, fourth	, or fifth tax year as	s a section 501(c)(3)	
	organization, check this box and stop here						
<u>Sec</u>	tion C. Computation of Public S						
14	Public support percentage for 2019 (line 6, c	column (f) divided by	y line 11, column (f))	*****	14	90.14%
15	Public support percentage from 2018 Scheo	lule A, Part II, line 1	4			15	81.49%
16a	33 1/3% support test—2019. If the organization	ation did not check t	the box on line 13,				
	box and stop here. The organization qualified		-				▶ X
b	33 1/3% support test—2018. If the organization				33 1/3% or more, cl	heck	
	this box and stop here. The organization qu						▶ ∐
17a	10%-facts-and-circumstances test—2019						
	10% or more, and if the organization meets t						
b	Part VI how the organization meets the "facts organization 10%-facts-and-circumstances test—2018		-				>
	15 is 10% or more, and if the organization m						
	Explain in Part VI how the organization meet supported organization	s the "facts-and-circ	cumstances" test. 1	The organization qu	alifies as a publicly		> \[\]
18	Private foundation. If the organization did r	not check a box on li	ne 13, 16a, 16b, 1	7a, or 17b, check th	nis box and see		· · · · · · · · · · · · · · · · · · ·
	instructions						>

Schedule A (Form 990 or 990-EZ) 2019

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support			, , ,		/	
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	, , , , , , , , , , , , , , , , , , , ,				(-),	(//
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						1000
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b		0 0000000000000000000000000000000000000	000000000000000000000000000000000000000	-00000000000000000000000000000000000000		
8	Public support. (Subtract line 7c from						
200	tion B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(=) 0017	(4) 0040	(-) 0040 I	(C) T
9	Amounts from line 6	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
3	Total support. (Add lines 9, 10c, 11, and 12.)						
4	First five years. If the Form 990 is for the co	organization's first.	second, third, fourth	or fifth tax year as	a section 501(c)(L	
	organization, check this box and stop here			-	, , ,	•	
Sec	tion C. Computation of Public S						
5	Public support percentage for 2019 (line 8, o	column (f), divided	by line 13, column (f))		15	%
6	Public support percentage from 2018 Scheo	lule A, Part III, line	<u> 15 </u>			16	%
Sec	tion D. Computation of Investme						
7	Investment income percentage for 2019 (line	e 10c, column (f), d	livided by line 13, co	lumn (f))		17	%
8	Investment income percentage from 2018 Se	chedule A, Part III,	line 17				%
9a	33 1/3% support tests—2019. If the organization	zation did not chec	k the box on line 14	, and line 15 is mor	e than 33 1/3%, an	d line	ļ
	17 is not more than 33 1/3%, check this box						▶ ∐
	33 1/3% support tests—2018. If the organization						
	line 18 is not more than 33 1/3%, check this						
0	Private foundation. If the organization did r	not check a box on	line 14, 19a, or 19b	, check this box and	d see instructions		🕨 📗

Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If 4a "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? C
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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2		
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3a		
	000000000000000000000000000000000000000	100000000000
3b		
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3c		
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5b		
5c		
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10a		

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990 or 990-EZ) 2019 Neighborhood House, I	nc.	61-0445	58 42 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supp			1 age o
Check here if the organization satisfied the Integral Part Test as a qualifying tr	rust on Nov. 20, 1970 (explain in Part VI). See	
instructions. All other Type III non-functionally integrated supporting organization	ations must complete S	Sections A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			(/
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

6

Schedule A (Form 990 or 990-EZ) 2019

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

instructions).

	ule A (Form 990 or 990-EZ) 2019 Neighborhood H		61-0445	842 Page 7
Par	tt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Organia	ations (continued)	
Sect	tion D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish exempt pu	urposes		
2	Amounts paid to perform activity that directly furthers exempt purp	ooses of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of s	supported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizations	anization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		7	
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2019			
	From 2014			
	From 2015			
^	From 2016			
	From 2017			
	From 2018			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
<u> </u>	Carryover from 2014 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
	Section D, line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
5	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6				
U	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
•	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (For	n 990 or 990-EZ) 2019	Neighborhood	House,	Inc.	61-0445842	Page 8
Part VI	III, line 12; Part IV, B, lines 1 and 2; Pa	ormation. Provide the Section A, lines 1, 2, 3 art IV, Section C, line 1	explanation Bb, 3c, 4b, ; Part IV, S	ns required by 4c, 5a, 6, 9a, Section D, line	Part II, line 10; Part II, line 17a o 9b, 9c, 11a, 11b, and 11c; Part IV s 2 and 3; Part IV, Section E, line	r 17b; Part ', Section s 1c, 2a, 2b,
N	3a, and 3b; Part V, lines 2, 5, and 6. Al	line 1; Part V, Section so complete this part f	B, line 1e; or any add	Part V, Sectional informa	on D, lines 5, 6, and 8; and Part V tion. (See instructions.)	, Section E,
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

N	eighborhood House, Inc.		61-0445842
	art I Organizations Maintaining Donor Advised	Funds or Other Similar Funds or	
1404074447	Complete if the organization answered "Yes" of	on Form 990, Part IV, line 6.	, riododinioi
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that		
	funds are the organization's property, subject to the organization's exclu-	usive legal control?	Yes Ne
6	Did the organization inform all grantees, donors, and donor advisors in		
	only for charitable purposes and not for the benefit of the donor or dono	or advisor, or for any other purpose	
	conferring impermissible private benefit?		Yes No
Pa	Conservation Easements. Complete if the organization answered "Yes" o	on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check		
	Preservation of land for public use (for example, recreation or education of land for public use)	,	mportant land area
	Protection of natural habitat	Preservation of a certified his	
	Preservation of open space	lancered.	
2	Complete lines 2a through 2d if the organization held a qualified conservation	vation contribution in the form of a conservation	on
	easement on the last day of the tax year.		Held at the End of the Tax Yea
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structure inclu-	uded in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/0	06, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, exti	inguished, or terminated by the organization o	luring the
	tax year ▶		
4	Number of states where property subject to conservation easement is lo	ocated >	
5	Does the organization have a written policy regarding the periodic monitor		
	violations, and enforcement of the conservation easements it holds? \dots		
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of	violations, and enforcing conservation easem	nents during the year
			
7	Amount of expenses incurred in monitoring, inspecting, handling of viola	ations, and enforcing conservation easements	during the year
	\$		
8	Does each conservation easement reported on line 2(d) above satisfy the		
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation easeme	•	
	balance sheet, and include, if applicable, the text of the footnote to the o organization's accounting for conservation easements.	rganization's financial statements that describ	bes the
Pa	int III Organizations Maintaining Collections of A	rt. Historical Treasures. or Other	Similar Assets.
engregge	Complete if the organization answered "Yes" or	n Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958, not to re	eport in its revenue statement and balance she	eet works
	of art, historical treasures, or other similar assets held for public exhibition	on, education, or research in furtherance of p	ublic
	service, provide in Part XIII the text of the footnote to its financial statement	ents that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958, to report	t in its revenue statement and balance sheet v	works of
	art, historical treasures, or other similar assets held for public exhibition,	, education, or research in furtherance of publ	lic service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		 \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical treasures, or continuous	other similar assets for financial gain, provide	the
	following amounts required to be reported under FASB ASC 958 relating		
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		

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P	art III — Organizations Maintainii						Asset	s (conti	nued)
3	Using the organization's acquisition, accessic collection items (check all that apply):	on, and other records, o	check any of the follow	wing that make	significant ι	use of its			
а	Public exhibition	d 🗌	Loan or exchange pro	ogram					
b	Scholarly research	e	Other						
C	Preservation for future generations								
4	Provide a description of the organization's col	llections and explain ho	w they further the org	janization's ex	empt purpos	e in Part			
	XIII.								
5	During the year, did the organization solicit or	receive donations of a	rt, historical treasures	s, or other simi	lar				
	assets to be sold to raise funds rather than to	be maintained as part	of the organization's	collection?	· · · · · · · · · · · · · · · · · · ·			. Ye	s No
P	art IV Escrow and Custodial A	_							
	Complete if the organization	on answered "Yes	" on Form 990, f	Part IV, line	9, or rep	orted an a	amoun	t on For	m
	990, Part X, line 21.								
1a	Is the organization an agent, trustee, custodia	-							
	included on Form 990, Part X?							Ye	es No
b	If "Yes," explain the arrangement in Part XIII a	and complete the follow	ing table:						
								Amount	Į .
C	Beginning balance					1c			
d	Additions during the year					1 <u>1d</u>	<u> </u>		
е	Distributions during the year								
f	Ending balance					1 <u>1</u>			
2a	Did the organization include an amount on Fo	rm 990, Part X, line 21	, for escrow or custoo	dial account lia	bility?			Ye	s No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the expla	nation has been prov	ided on Part X	III		<u></u>	<u></u>	
P	ift V Endowment Funds.								
	Complete if the organization	on answered "Yes	<u>" on Form 990, F</u>	Part IV, line	10.			.,	
		(a) Current year	(b) Prior year	(c) Two ye	ars back	(d) Three year	rs back	(e) Four	r years back
	Beginning of year balance							<u> </u>	****
	Contributions							<u> </u>	
С	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships		`.						
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the curre		ne 1g, column (a)) he	ld as:					
а	Board designated or quasi-endowment ▶	%							
b	Permanent endowment ▶ %								
С	Term endowment ▶ %								
	The percentages on lines 2a, 2b, and 2c should	ıld equal 100%.							
3a	Are there endowment funds not in the posses	sion of the organizatior	that are held and ad	ministered for	the			-	
	organization by:								Yes No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organizat	ions listed as required	on Schedule R?					3b	
4	Describe in Part XIII the intended uses of the		ent funds.						
Pε	irt VI Land, Buildings, and Equ	•							
	Complete if the organization	on answered "Yes"	<u>' on Form 990, F</u>	Part IV, line	11a. See	Form 99	<u>0, Part</u>	X, line	10.
	Description of property	(a) Cost or other ba	asis (b) Cost or	other basis	(c) Acc	umulated		(d) Book v	/alue
	4844	(investment)	· · · · · · · · · · · · · · · · · · ·	her)	depr	eciation			
1a	Land			525,193				52	25,193
b	Buildings								
	Leasehold improvements								
d	Equipment					·		<u>-</u>	
	Other			<u>790,190</u>		<u>615,71</u>	4		74,476
Tota	I. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X,	column (B), line 10c.	<u>.) </u>			>	1,69	99,669

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~	_	-	-35	_	u		_

Part VII		1110.	01-0443042	rage .
11000000000000000000000	Complete if the organization answered "Yes" of	on Form 990, Part IV,	line 11b. See Form 990,	Part X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method o	
	(including name of security)		Cost or end-of-year	ar market value
(1) Financial	derivatives			
(2) Closely ne	eld equity interests			
(3) Other				
(B)				
(C)		•		
(D)				
(E)	***************************************			
(H)	***************************************			
Total. (Colum.	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	•			
	Complete if the organization answered "Yes" or			
	(a) Description of investment	(b) Book value	(c) Method of	
(4)			Cost or end-of-year	r market value
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				7,112.17
	n (b) must equal Form 990, Part X, col. (B) line 13.)	•		
Part IX	Other Assets.			
	Complete if the organization answered "Yes" o	n Form 990, Part IV, I	line 11d. See Form 990,	Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				*****
(5)				
(6) (7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)		>	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" o	n Form 990, Part IV, I	line 11e or 11f. See Form	n 990, Part X,
	line 25.			,
1.	(a) Description of liability			(b) Book value
	ncome taxes			
(2) Refun	dable Advances			52,473
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(b) must equal Form 990, Part X, col. (B) line 25.)		<u> </u>	52,473
	uncertain tax positions. In Part XIII, provide the text of the footnot	te to the organization's finan	ncial statements that reports the	32,413
	ability for uncertain tax positions under FASB ASC 740. Check	_	•	X

Schedule D (Form 990) 2019 Neighborhood House, Inc		-0445842	Page
Part XI Reconciliation of Revenue per Audited Financi	al Statements With Rev	enue per Return.	
Complete if the organization answered "Yes" on Fo			
1 Total revenue, gains, and other support per audited financial statements	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	2,294,93
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	2,294,93
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b			
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b		4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12			2,294,93
Part XII Reconciliation of Expenses per Audited Financ			•
Complete if the organization answered "Yes" on Fo			
Total expenses and losses per audited financial statements			1,803,33
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		<u>2e</u>	
3 Subtract line 2e from line 1		3	1,803,338
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b			
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	<i>8</i> .)	5	1,803,338
Part XIII Supplemental Information.			
rovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4			
Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	provide any additional information	l.	
Part X - FIN 48 Footnote			
Manager and the second			
Management has concluded that any tax p	positions that w	ould not mee	t the
111.1 11			
more-likely-than-not criterion of FASB	ASC 740-10 woul	d be immater	ial to
		. •	
the financial statements taken as a who	ole. Accordingly	, the accomp	anying
Simportal ababamanta da unt includa			
financial statements do not include any	provision for	uncertain ta	.X
positions, and no related interest or p	penaities have b	een recorded	in the
statement of activities or accrued in t	the statement of	financial p	osition.

Schedule D (Fo	rm 990) 2019	Neighborhood ntal Information (cont	House,	Inc.	61-0445842	Page 5
Part XIII	Supplemer	ntal Information (con	tinued)			
		• • • • • • • • • • • • • • • • • • • •			 	
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		••••••	**************		 	•••••

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the
organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

ivanii	Neighborhood House	e, Inc.				61-04458	
P	Fundraising Activities. Complete Form 990-EZ filers are not required	if the organiza			ered "Yes" on Forr		
1					eck all that apply.		
а	a Mail solicitations				ernment grants		
b	b Internet and email solicitations	f Solicitatio		-	ŭ		
c	c Phone solicitations	g Special fu	_		_		
d	d In-person solicitations			•			
2a	 Did the organization have a written or oral agreement with or key employees listed in Form 990, Part VII) or entity in 						Yes No
b	b If "Yes," list the 10 highest paid individuals or entities (fur compensated at least \$5,000 by the organization.	ndraisers) pursuant			ts under which the fund	draiser is to be	
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	raise custo cont	d fund- r have ody or rol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5						***************************************	1
6						***************************************	
7						*****	
8			-				
9							
0					***		
ota			· · · · · · · ·	>			
3	List all states in which the organization is registered or lice registration or licensing.	ensed to solicit con	tributior	ns or h	nas been notified it is ex	empt from	

Neighborhood House, Inc. Schedule G (Form 990 or 990-EZ) 2019 61-0445842 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (b) Event #2 (a) Event #1 (c) Other events (d) Total events Night to Rise Play to Learn None (add col. (a) through col. (c)) (event type) (event type) (total number) Revenue 89,211 5,644 94,855 1 Gross receipts 2 Less: Contributions 4,720 375 5,095 3 Gross income (line 1 minus 84,491 5,269 89,760 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs Direct Expenses 7 Food and beverages ... 8 Entertainment 9 Other direct expenses 15,194 2,296 17,490 10 Direct expense summary. Add lines 4 through 9 in column (d) 17,490 11 Net income summary. Subtract line 10 from line 3, column (d) ... Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Sche	edule G (Form 990 or 990-Ez		lghborhood			61-044584	2	Page 3
11	Does the organization cond							Yes No
12	Is the organization a granto	or, beneficiary or trust	ee of a trust, or a me	mber of a part	nership or other entity			
	formed to administer charit	able gaming?						Yes No
13	Indicate the percentage of	gaming activity condu	cted in:					
а	The organization's facility					13a		%
b	An outside facility					13b	!	%
14	Enter the name and address	s of the person who	orepares the organiza	ation's gaming	/special events books and			
	records:							
	Name ▶							
								•
	Address >							
								,
15a	Does the organization have	a contract with a thire	d party from whom th	ne organization	receives gaming			
	revenue?							Yes No
b	If "Yes," enter the amount of	of gaming revenue rec	eived by the organiza	ation 🕨	\$	and the		
	amount of gaming revenue	retained by the third p	oarty ▶ \$					
C	If "Yes," enter name and ad							
	Name >							
					***************************************			•
	Address >							
16	Gaming manager information	on:						
	Name ▶							
	Gaming manager compens	ation > \$						
	Description of services prov	vided ▶						
	Director/officer	Employee	Indep	endent contra	ctor			
17	Mandatory distributions:							
а	Is the organization required				0 0.			
	retain the state gaming licer	nse?						Yes No
b	Enter the amount of distribu	itions required under	state law to be distrib	outed to other	exempt organizations or			
	spent in the organization's o							
Pa					equired by Part I, line 2l			and
			15c, 16, and 17	b, as appli	cable. Also provide any	additional information	on.	
	See instruction	ons.						
<i>.</i>								
	• • • • • • • • • • • • • • • • • • • •							

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						Schedule G (Form 990	or 99	90-EZ) 2019

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

 \blacktriangleright Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open To Public Inspection

Name of the organization

Neighborhood House, Inc.

Employer identification number 61–0445842

P	art I Types of Property					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on	(d) Method of determinin noncash contribution am	-
1	Art — Works of art			Form 990, Part VIII, line 1g		
2	Art — Historical treasures					
3	Art — Fractional interests				WINDOWS	
4	Books and publications					
5	Clothing and household					
3	-					
6	goods Cars and other vehicles					
7	Posts and planes					
8	Boats and planes					
9	Intellectual property Securities — Publicly traded					
10	Securities — Closely held stock					
11	Securities — Partnership, LLC,					
••	or trust interests					
12	Securities — Miscellaneous					
13	Qualified conservation					
	contribution — Historic					
	structures					
14	Qualified conservation					
•	contribution — Other					
15	Real estate — Residential					
16	Real estate — Commercial		***************************************			
17	Real estate — Other					
18	Collectibles					
19	Food inventory	Х	1	160,284		
20	Drugs and medical supplies		_			
21	Taxidermy					
22	Historical artifacts				***************************************	
23	Scientific specimens					
24	Archeological artifacts					
25	Other (Property Improv)	х	1	85,817	V-14444.4.4.4.	
26	Other ►()			,		***************************************
27	Other ►()					
28	Other ►(
29	Number of Forms 8283 received by the	e organizat	ion during the tax year for	contributions for		
	which the organization completed Form				29	
				· · · · · · · · · · · · · · · · · · ·		Yes No
30a	During the year, did the organization re	ceive by c	ontribution any property re	ported in Part I, lines 1 thro	ugh	
	28, that it must hold for at least three ye	ears from t	he date of the initial contri	bution, and which isn't requ	ired	
	to be used for exempt purposes for the	entire hole	ding period?			30a X
b	If "Yes," describe the arrangement in P					
31	Does the organization have a gift accept		cy that requires the review	of any nonstandard		
	contributions?	•	•	•		31 X
32a	Does the organization hire or use third	parties or	related organizations to so	licit, process, or sell noncas	sh	
		-	_	•		32a X
b	If "Yes," describe in Part II.					
33	If the organization didn't report an amount	unt in colui	mn (c) for a type of proper	ty for which column (a) is cl	hecked,	
	describe in Part II.		· · · ·	• •		

Schedule M (Fo	rm 990) 2019	Neighborhoo	d House,	Inc.		61-04458	342	Page 2
Part II	Supplen the organ	nental Information nization is reporting bination of both. Al	. Provide the in Part I, co	e informatio lumn (b), th	e number of c	Part I, lines 30b, contributions, the	32b, and 33, and	whether
							• • • • • • • • • • • • • • • • • • • •	
							• • • • • • • • • • • • • • • • • • • •	
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SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

families.

Neighborhood House, Inc.

61-0445842

Form 990 - Organization's Mission

The mission of Neighborhood House is to provide individuals with
opportunities to enhance the quality of their lives. Our vision is to
break the cycle of poverty for the children and families with whom we
serve. We know the key is through education and that by strengthening the
parents/ family leaders, we have a greater impact on the child. So our
programs are educationally focused, which is broader than just the academic
component. And our work is to engage the parents/ grandparents in order to
strengthen the future for our children. We serve infants through senior
adults, approximately 220 people/ day from Portland and surrounding areas
of West Louisville. We work toward our mission and vision by addressing
daily needs as well as making a lifelong impact in meeting Life Needs,
teaching Life Skills and inspiring Life Dreams for our children and

Form 990, Part III, Line 4c - Third Accomplishment

Our Family Services Department engages with many other community partners
to provide a variety of services to our community including young adults,
college students, parents and senior citizens. We know that strengthening
the entire family and community is key to having a great impact on the
future of their children. Four Seasons provides senior adults with
supports, workshops, physical and recreational activities, and meals to
address their physical, social and emotional well-being and improve the
quality of their lives. Our Emergency Food Bank provides for immediate,
basic needs as well as providing referrals for other services. Partner

Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization

Neighborhood House, Inc.

Employer identification number

61-0445842

agencies help provide health services, workshops and basic needs. Parents and young adults can participate in financial workshops, life coaching, parenting support and leadership training. We also provide family and intergenerational activities such as cultural events, cooking and exercise classes, and recreation and holiday activities.

Form 990, Part III, Line 4d - All Other Accomplishments

Our Four Seasons Senior Adult Program improves the quality of life for some of our city's most vulnerable citizens. Our seniors receive a nutritious lunch each day as well as recreation, socialization and opportunities for developing new skills and engaging in new activities they wouldn't have otherwise. Activities vary including exercise and cooking classes, field trips, holiday events, health screenings and intergenerational opportunities.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The 990 tax return is prepared by an independent CPA firm based on the information obtained from the audit and inquiries of management. Before the return is filed, a draft of the return is reviewed by the Finance Committee. The Finance Committee reports their approval to the Board of Directors. A copy is provided to all board members, then the tax return is filed with the IRS.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

On an annual basis each member of the board of directors are required to sign a conflict of interest form. If the form indicates a possible conflict of interest, the incident is thoroughly investigated. If there is

Name of the organization

Employer identification number

Neighborhood House, Inc. 61-0445842 a perceived conflict, the member will not be able to participate (including serving on a committee) on any decision relating to the conflict. If a major conflict is noted the Board Member will be asked to resign. Periodically throughout the year possible conflicts are investigated and resolved as necessary. Form 990, Part VI, Line 15a - Compensation Process for Top Official The Executive Director's performance and compensation are reviewed annually. The President of the Board names an ad hoc committee of at least three Board members to perform this review. The Committee meets with the Executive Director to review performance criteria and progress toward goals set the previous year. New performance goals are also set for the upcoming year. The Committee then discusses and determines compensation. The compensation decision is communicated to the Director of Human Resources (this position is included in the Deputy Director's duties.) Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents are available upon request. The Form 990 is available via Guidestar's website or upon request. Page 2 of 2

103004 Neighborhood House, Inc. 61-0445842 FYE: 6/30/2020	Eederal Statements	2/8/2021 3:17 PM
<u>F</u>	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)	
Description	Total Program Management & General \$ 7,058 \$ 7,058 \$ 7,058 \$ 7,058	nent & Fund ral Raising 7,058 \$ 7,058 \$ 0
	Form 990, Part IX, Line 24e - All Other Expenses	
Description support Licenses, & Fees	Total Program Expenses Service 5,557 \$ 5,557 3,684 2,131	Fund Raising \$ 351
	\$ 9,241 \$ 7,688 \$ 1,	351 \$ 202

Federal Statements

103004 Neighborhood House, Inc. 61-0445842 FYE: 6/30/2020

Schedule A, Part II, Line 1(e)

Description		Amount
Metro United Way	\sh	240,841
Membership Dues and Assessments		2,597
Government Grants or Contributions		36,900
Other Contributions		1.358.830
Other Contributions		85.817
Play to Learn		1000
Cash Contribution		375
Night to Rise)
Cash Contribution		4,720
Total	\$	1,730,080

Schedule A, Part II, Line 8(e)	103004 Neighborhood House, Inc. 61-0445842 FYE: 6/30/2020	Federal Statements	2/8/2021 3:17 PM
Description otal Schedule A, Part II, Line 12 - Current year Description re Client Fees program Fees program Fees otal		Schedule A, Part II, Line 8(e)	
otal Schedule A. Part II, Line 12 - Current year Description re Client Fees program Fees program Fees otal otal		Description	Amount
Schedule A, Part II, Line 12 - Current year The Client Fees Program Fees Program Fees Program Fees Program Fees Otal	stment 1		
Schedule A, Part II, Line 12 - Current year Description re Client Fees program Fees program fees otal	Total		
re Client Fees rogram Fees program fees program fees otal		Schedule A, Part II, Line 12 - Current year	
re Client Fees rogram Fees program fees otal		Description	Amount
	re Client rogram Fee program feotal		

103004 Neighborhood House, Inc.

61-0445842 FYE: 6/30/2020

Federal Statements

2/8/2021 3:17 PM

Accounts payable - EOY

Description	Amount						
Accrued Payroll & WH Accounts payable & Accrued Exp	\$	97,579 9,150					
Total	\$	106,729					

AMENDED ARTICLES OF INCORPORATION.

The undersigned, Lucy Belknup, Helchen B. Barret, Fortha K. Sacha, Emily E. Einmigorode, Emil S. Tachau, Henry Elauber, Lafon Allen, Edward Sacha, Bernard Flexmer, Leon P. Lewis, Bernard Sellignan and Percy E. Booth, being all of the members of the Board of Trustees or Eanagers of "Neighborhood House," a corporation herotofore established in conformity to section 879 of the Kentucky Statutes, do hereby smend their articles of incorporation which have been filed in the office of the County Clerk of Jefforson County and in the office of the Secretary of State of Montucky by adding thereto the following provisions and by giving said corporation the additional powers hereinafter enumerated.

Said corporate body shall have power to becrow money with which to pay for property obtained by purchase or with which to carry on its purposes generally and shall have power to plodge or mortgage its property, roal or personal, to secure the payment of the money so becrowed or to secure the fulfillment of any of its contracts. So pledges or mortgages or other creditor of said corporation shall be bound to look to the application of the proceeds of any loan made to said corporation. The corporators above maned and their associates and successors shall be and remain the Board of Trustees of Beighborhood House.

In witness of these purposes we have affixed our signatures to these articles of incorporation in duplicate on this 19th day of January, 1912, that they may be filed in the office of the Secretary of State of Montucky and recorded in the office of the County Clerk of Jofferson County.

STATE OF YETUCZY COULTY OF JEFFERSON I. Markay SCT.

COULTY OF JIFFERSON:

I. Matheway M. Mark. . a notary public in and for the county and state aforesaid, do certify that the foregoing instrument of writing was on the 18th day of January, 1912, produced to me in my office and acknowledged and delivered by Lucy Belkmap, Helchen B. Barret, Berthe Z. Sachs, Emily R. Minnigerode, Emil S. Edchau, Henry Klauber, Lafon Allon, Bernard Flormer, Loon P. Lewis, Pernard Selligmen and Percy R. Booth, parties thereto, to be their act and deed and the act and deed of each of them, and that said instrument of writing was also produced to me in my that said instrument of writing was also produced to me in my office on the low day of Jaruary, 1912, and acknowledged and delivered by livered Suchs, party thereto, to be his act and load.

Titness my hand and notarial soal this Total day of

1. P. S. Ti.!?, Clark of the County Court of Arlanton County in the State of Asserting, do earlify that on this day at 10 50 Clock N. the foregoing Assista of Incomercian were produced to me in my Office and that I have recorded them. This aily the torsysting certificate in my said office.

Mitness my band this

A H E N D M E N T TO ARTICLES OF INCORPORATION OF NEIGHBORHOOD HOUSE

KNOW ALL MEN BY THESE PRESENTS:

That the undersigned, MARSHALL P. ELDRED, MRS. THOMAS

A. BALLANTINE, WILLIAM M. COTTON, MRS. CARL BERG,

MRS. KERVIN BULLITT, MRS. GEORGE COHN, MRS. J. DONALD DINNING,

ASA W. FULLER, A. READ HENRY, RUTH HIGGINS, WILLIAM H. LANGLEY,

FRANCIS J. PEAK, P. EUGENE SANFORD and MRS. HUGH SHVAB, JR.,

being members of the Board of Trustees of NEIGHBORHOOD HOUSE,

428 South First Street, Louisville, Kentucky, a charitable

corporation heretofore organized under the laws of the Commonwealth of Kentucky, do hereby amend the Articles of Incorporation

of said NEIGHBORHOOD HOUSE in the following particular, to-wit:

The affairs of this Corporation shall be conducted by a Board of Directors which shall consist of not less than seven (7) nor more than twenty-five (25), to be determined in the discretion of said Board. Said Board of Directors shall have the power, and authority heretofore vested in the Board of Trustees or Board of Managers of the said NEIGHBORHOOD HOUSE, together with such other power and authority as may be given by law.

IN WITNESS WHEREOF, the undersigned have set their hands
this 2 day of March, 1955

Marchael P. Eldred

Mrs. Thomas A. Ballantine

William M. Cotton

Was Coul Page

Mrs. Carl Berg

2. Hugh Shuab de Mrs. Hugh Shwab, Jr.

COMMONWEALTH OF KENTUCKY : 35 COUNTY OF JEFFERSON

I, the undersigned Notary Public in and for the State and County aforesaid, do hereby certify that the foregoing AMENDMENT TO ARTICLES OF INCORPORATION of NEIGHBORHOOD HOUSE was this day produced before me in my county by MARSHALL P. ELDRED; MRS. THOMAS A. BALLANTINE, WILLIAM M. COTTON, MRS. CARL BERG, MRS. KERVIN BULLITT, MRS. GEORGE COHN, MRS. J. DONALD DINNING, ASA W. FULLER, A. READ HENRY, RUTH HIGGINS, WILLIAM H. LANGLEY, FRANCIS J. PEAK, F. ENGENE SANFORD and MRS. HUGH SHWAB. JR.. who acknowledged same F. EUGENE SANFORD and MRS. HUGH SHWAB, JR., who acknowledged same to be their true act and deed for the uses and purposes therein

WITNESS my hand and notarial seal, this 21 day of March, 1955.

My commission expires Let 4-14.18

ORIGINAL COPY

FILED AND RECORDED

OCT 3 - 1955

Notary Public Jefferson County

Kentucky

ARTICLES OF AMENDMENT TO THE ARTICLES OF INCORPORATION OF NEIGHBORHOOD HOUSE

SECRETARY OF STATE

THIS AMENDMENT, dated 26 September 1972, to the Articles of Incorporation of Neighborhood House.

Commonwealth of Hentucky

WITNESSETH:

WHEREAS, it has become necessary and proper to amend the Articles of Incorporation of Neighborhood House, a charitable and educational corporation of Louisville, Kentucky, in the manner hereinafter set forth, and WHEREAS, there are no shareholders in the corporation and no members

entitled to vote upon such amendments;

......

NOW, THEREFORE, we, the President and Secretary, respectively, of Neighborhood House, do hereby certify that by a vote of and by resolution of the majority of the directors in office at their regular meeting held on 19 September 1972, Neighborhood House duly amended its Articles of Incorporation in the following respects:

1. The word, "exclusively," is added to the description of the purposes of the corporation, so that they now read "... form a corporation for charitable and educational purposes exclusively...";

2. A new paragraph is added to the said Articles, which provides:

Upon dissolution or liquidation of the corporation, the directors shall, after paying or making provision for the payment of all the liabilities of the corporation, dispose of all of the assets of the corporation exclusively for the purposes of the corporation and in such a manner or to such organization(s) as shall at the time qualify as exempt under section 501(c)(3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States' Internal Revenue Law). Any assets not so disposed of shall be disposed of by any court having proper jurisdiction in accordance with the purposes of the corporation and exclusively to such organizations as are described in the preceding sentence.

IN TESTIMONY WHEREOF, the President and Secretary of Neighborhood House have hereunto signed their names; and Neighborhood House has caused these Articles of Amendment to be signed by its President and Secretary, all this 28 day of September 1972.

President

Secretary James

NEIGHBORHOOD HOUSE
By Julie College House
President

Attest: Rath C. Diggins
Secretary

COMMONWEALTH OF KENTUCKY)

COUNTY OF

a Notary Public in and for the County and Commonwealth aforesaid, do hereby certify that the foregoing Articles of Amendment to the Articles of Incorporation of Neighborhood House were produced before me in the County and Commonwealth aforesaid by John St. Lawrence and Ruth Higgins, President and Secretary, respectively, of Neighborhood House, and were acknowledged by them to be their act and deed; and to be the act and deed of Neighborhood House,

Witness, my hand and seal, this and day of September, 1972.

County, Kentucky

My commission expires:

ORIGINAL COPY FILED

SECRETARY OF STATE OF PENTUCKY

MAY 1 8 1973

Minne La Storice

This document was prepared by Charles M. Hassett, Attorney at Law, whose address is 2114 Edgehill Road, Louisville, Kentucky 40205.

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Amended Articles of Incorporations	
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1810 Outer Loop

Louisville, Kentucky 40219
(502) 368-7678 • Fax (502) 814-5270

 Invoice Number
 : 186608

 Invoice Date
 : 08/13/2021

 Customer Number
 : NEIGHB

 Job Number
 : 21SG4452

 Due Date
 : 08/13/2021

NEIGHBORHOOD HOUSE ACCOUNTS PAYABLE 201 N. 25TH ST LOUISVILLE, KY 4021 Attn: MARTHA FUSON NEIGHBORHOOD HOUSE 201 N. 25TH ST LOUISVILLE, KY

08/13/2021		42,399.00
	LABOR, MATERIAL, EQUIPMENT AND SUPERVISION FOR THE FOLLOWING:	
	REPLACED (2) HVAC SYSTEMS PER QUOTE	
	GROSS BILLINGS :	42,399.00
	NET BILLINGS :	42,399.00

4/18/22, 2:36 PM

Statement Description:

Check

Date:

8/31/2021

Type:

Debit - Check 8556

Stock Yards Bank

	NATIONAL MARKET INC.	STOCK YARDS HANK & TRUST COMPANY 1005 E221 War Styeol Levievie KY 40216	0085
	HEIGHBORHOOD HOUSE INC. 201 N 25th St Louistailo, KY 40212-1401	21-56-650	08/27/2021
PAY TO THE ORDER OF	Schardein Mechanical		\$ "42,399,00
Forty-two	thousand three hundred ninoty-nine and 00/	100	DOLLA
1	chardeln Mechanical 810 Outer Loop outsville, KY 40219		
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	**OO8556* **OB30005	641: N' 1699458N'	

Page totals: Credits: [0] \$0.00 | Debits: [1] - \$42,399.00

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Statement Description:

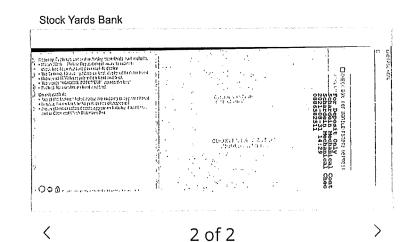
Check

Date:

8/31/2021

Type:

Debit - Check 8556



Page totals: Credits: [0] \$0.00 | Debits: [1] - \$42,399.00

Form **W-9**(Rev. October 2018)

(Rev. October 2018) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

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

	1 Name (as shown on your income tax return). Name is required on this line; do	o not leave this line blank.											
	Neighborhood House, Inc. 2 Business name/disregarded entity name, if different from above												
	2 Business name/disregarded entity name, it different from above												
age 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.								4 Exemptions (codes apply only to certain entitles, not individuals; see				
on p	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate								page :	•			
on o	single-member LLC							yee c	ode (it	any)	,		
Print or type. See Specific Instructions on page	Umited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.						Exemption from FATCA reporting code (if any)						
eci	✓ Other (see instructions) ► 501c3					(Арріі	s to acco	ounts i	maintaine	d outsic	le the U.S	()	
g	5 Address (number, street, and apt. or sulte no.) See instructions.		Request	er's	name a	and ac	dress	(opti	ional)				
Şee	201 N 25th Street												
-	6 City, state, and ZiP code												
	Louisville, KY 40212												
	7 List account number(s) here (optional)												
Pari													
	our TIN in the appropriate box. The TIN provided must match the name withholding. For individuals, this is generally your social security num			Soc	cial sec	urity	numb	er				_	
	o withholding. For includuals, this is generally your social security hum nt allen, sole proprietor, or disregarded entity, see the instructions for F		ora			_	.		_				
entitles	, it is your employer identification number (EIN). If you do not have a n		a		<u> </u>					Щ	\perp		
TIN, la		Or Also see What Name and Employer Identification number											
	f the account is in more than one name, see the instructions for line 1. To Give the Requester for guidelines on whose number to enter.	Also see What Name a	ind [Em	ployer	Ident	TICATIO	n ni	Jmber		_		
rvarribe	in to dive the hequester for guidelines of whose fulfibor to effect.			6	1	- o	4	4	5 8	4	2		
Part	Certification					i							
	penalties of perjury, I certify that:												
	•	ner (or I am waiting for a	numbei	r to	he iss	ued t	n mel	: an	d				
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have no Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividen no longer subject to backup withholding; and						otifie	d by tĺ	ne la	nterna			m	
3. I am	a U.S. citizen or other U.S. person (defined below); and												
4. The	FATCA code(s) entered on this form (if any) indicating that I am exemp	ot from FATCA reporting	j is corre	ect.									
you hav acquisi other th	Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must-provide your correct TIN. See the instructions for Part II, later.								se				
Sign Here	Signature of U.S. person ► Med	100	ate ► (\mathcal{L}	ug	2	4,	2	202	2(
Gen	eral Instructions	 Form 1099-DIV (divi funds) 	idends, i	incl	uding	those	from	sto	cks o	r mut	ual		
Section noted.	references are to the Internal Revenue Code unless otherwise	Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)											
related	developments. For the latest information about developments to Form W-9 and its instructions, such as legislation enacted ey were published, go to www.irs.gov/FormW9.	Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)											
		•	roceeds from real estate transactions)										
-	ose of Form	• Form 1099-K (merci					-				•		
informa	vidual or entity (Form W-9 requester) who is required to file an ition return with the IRS must obtain your correct taxpayer	 Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition) 											
	cation number (TIN) which may be your social security number individual taxpayer identification number (ITIN), adoption	• Form 1099-C (cance		•									
taxpay	er identification number (ATIN), or employer identification number	Form 1099-A (acquis								• • •	1		
amoun	o report on an information return the amount paid to you, or other t reportable on an information return. Examples of information include, but are not limited to, the following.	Use Form W-9 only alien), to provide your	correct	TIN	١.	•	·		_				
	1099-INT (interest earned or paid)		If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding,										

later.



Neighborhood House, Inc.

Financial Statements and
Independent Auditors' Report
For the Years Ended
June 30, 2021 and 2020

Contents

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Statements of Financial Position	3
Statements of Activities	4
Statements of Functional Expenses	5
Statements of Cash Flows	7
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Independent Auditors' Report

Board of Directors Neighborhood House, Inc. Louisville, Kentucky

Opinion

We have audited the accompanying financial statements of Neighborhood House, Inc. (a nonprofit organization), which comprise the statements of financial position as of June 30, 2021 and 2020, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Neighborhood House, Inc. as of June 30, 2021 and 2020, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Neighborhood House, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Correction of an Error

As discussed in Note 12 to the financial statements, an error resulting in the understatement of the amounts previously reported for prepaid expenses and contribution and grant revenue and the overstatement of amount previously reported as payroll tax expense as of June 30, 2020, was discovered during the current year. Accordingly, amounts reported for prepaid expenses, contribution and grant revenue and payroll tax expense have been restated in the 2020 statements now presented, and an adjustment has been made to net assets as of June 30, 2020, to correct the error. Our opinion is not modified with respect to this matter.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Neighborhood House, Inc.'s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists.

The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to
 fraud or error, and design and perform audit procedures responsive to those risks. Such
 procedures include examining, on a test basis, evidence regarding the amounts and disclosures
 in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit
 procedures that are appropriate in the circumstances, but not for the purpose of expressing an
 opinion on the effectiveness of Neighborhood House, Inc.'s internal control. Accordingly, no such
 opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Neighborhood House, Inc.'s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Baldwin CPAs, PLLC

Louisville, Kentucky February 7, 2022

Neighborhood House, Inc. Statements of Financial Position June 30, 2021 and 2020

	2021	2020
Assets		
Cash	\$ 705,750	\$ 309,760
Accounts receivable, net	37,743	53,721
Grants receivable	19,366	-
Promises to give, net	520,701	501,334
Prepaid expenses	75,850	93,111
Land, building and equipment, net	 1,680,158	 1,699,669
Total Assets	\$ 3,039,568	\$ 2,657,595
Liabilities and Net Assets		
Liabilities		
Accounts payable	\$ 11,711	\$ 9,150
Payroll accruals and withholding	161,481	97,579
Refundable advances	 -	 52,473
Total Liabilities	 173,192	 159,202
Net Assets		
Without donor restrictions	2,242,622	1,809,488
With donor restrictions	623,754	688,905
	 020,707	 000,000
Total Net Assets	 2,866,376	 2,498,393
Total Liabilities and Net assets	\$ 3,039,568	\$ 2,657,595

Neighborhood House, Inc. Statements of Activities For the Years Ended June 30, 2021 and 2020

		2021			2020	
	Without Donor	With Donor		Without Donor	With Donor	
	Restrictions	Restrictions	Total	Restrictions	Restrictions	Total
Revenue and Support						
Contributions and grants	\$ 1,240,355	\$ 484,149	\$ 1,724,504	\$ 912,418	\$ 844,170	\$ 1,756,588
Program fees	535,260	•	535,260	425,694		425.694
Rental income	78,120	3	78,120	72.616	1	72,616
Investment and miscellaneous income	633	i	633	(3,132)	•	(3.132)
Special event income	50,500	•	50,500	94,855	•	94.855
Special event expense	(2,000)	•	(5,000)	(17,490)	•	(17,490)
	1,899,868	484,149	2,384,017	1,484,961	844,170	2,329,131
Net Assets Released from Restrictions	549,300	(549,300)	1	433,835	(433,835)	*
Total Revenue, Support and Releases	2,449,168	(65,151)	2,384,017	1,918,796	410,335	2,329,131
Expenses Program services	1 606 568	,	1 606 568	2000		7000
Management and general	305,681		305,681	758 938		1,309,400
Fund raising	103,785	•	103,785	120,720		120,720
Total Expenses	2,016,034	1	2,016,034	1,769,138	1	1,769,138
Change in Net Assets	433,134	(65,151)	367,983	149,658	410,335	559,993
Net Assets at Beginning of Year	1,809,488	688,905	2,498,393	1,659,830	278,570	1,938,400
Net Assets at End of Year	\$ 2,242,622	\$ 623,754	\$ 2,866,376	\$ 1,809,488	\$ 688,905	\$ 2,498,393

The accompanying notes are an integral part of these financial statements.

Neighborhood House, Inc. Statements of Functional Expenses For the Year Ended June 30, 2021

				Progra	Program Services						Support Services	Servic	es		
	Child	γ ο	Youth	Ù	Four		1 2	-	Total	Σ	Management				
	Center	Pre	Program	מֿ מֿ	Seasons	- ŭ	Services	_ 0,	Program Services	Ū	and General	_	Fund Raising		Total
Salaries	\$ 520.215	ь	173.337	€	15.925	€9	209 641	€.	919 118	€	169 831	4	F.4 836	6	1 1 1 2 7 0 5
Payroll taxes	49,037		16,339		1.501	٠	19.761	•	86 638	,	15,826	•	5 110)	107,574
Employee benefits	36,305		12,097		1,111		14,631		64,144		11,852		3,827		79,823
Total personnel expenses	605,557		201,773		18,537		244,033		1.069.900		197,509		63.773		1 331 182
Professional fees	1										38 913		,		38 913
Office supplies	2,072		1,490		126		6,194		9,882		21,138		16,796		47,816
Program events and supplies	122,446		206'06		1,605		25,976		240,934		. •		. •		240,934
Contract services	•		39,058		í		1,410		40,468		250		5,000		45,718
Marketing	•		1						•		ı		3,716		3,716
Insurance	16,607		5,534		208		6,693		29,342		5,422		1,750		36,514
Staff development	1,130		1,964		1		93		3,187		3,651		1,082		7,920
Utilities	17,144		5,712		525		6,909		30,290		5,597		1,807		37,694
Transportation	ı		74		342		ı		416		1,015				1,431
Telephone	3,729		1,243		114		1,503		6,589		1,217		393		8,199
Property maintenance	20,432		6,808		625		8,234		36,099		6,670		2,155		44,924
Licenses and fees	1,516		40		∞		,		1,564		949		40		2,553
Other expenses	13,676		222				7		13,905		965		46		14,916
Client support	•		643		417		1,786		2,846		•		•		2,846
Depreciation	68,568		22,847		2,099		27,632		121,146		22,385		7,227		150,758
Special events direct costs	ı		1				,		1		1		2,000		5,000
Total expenses	872,877		378,315		24,906		330.470		1.606.568		305 681		108 785		2 021 034
Less: direct cost of special events	1				1						ı		(5,000)		(5,000)
		€	7.00	•		,		,		,					
iotal Expenses	\$ 612,811	A	3/8,315	A	24,906	م ا	330,470	JA	1,606,568	es l	305,681	နှ	103,785	₩	2,016,034

The accompanying notes are an integral part of these financial statements.

Neighborhood House, Inc. Statements of Functional Expenses For the Year Ended June 30, 2020

			Program Services			Support	Support Services	
	Child	Youth	Four		Total	Management		
	Development	Development	Seasons	Family	Program	and	Fund	
	Center	Program	Program	Services	Services	General	Raising	Total
Salaries	\$ 402,606	\$ 166,088	\$ 14,613	\$ 175,274	\$ 758,581	\$ 147,284	\$ 72,054	\$ 977.919
Payroll taxes	31,488	12,990	1,143	13,708	59,329	11,519		
Employee benefits	31,631	13,049	1,148	13,771	59,599	11,571	5,661	76,831
Total personnel expenses	465,725	192,127	16,904	202,753	877,509	170,374	83,350	1.131.233
Professional fees	ı	•	1	1		19,558	,	19,558
Office supplies	3,121	519	310	1,851	5,801	19,330	6,245	31,376
Program events and supplies	157,815	56,394	7,820	19,594	241,623	ī	. •	241,623
Contract services	1	14,918	1	2,868	17,786	1	1	17,786
Marketing	1	•	1	ı	1	1	9,239	9,239
Insurance	14,806	6,108	537	6,446	27,897	5,417	2,650	35,964
Staff development	1,598	1,572	1	6,702	9,872	2,395	1,072	13,339
Utilities	17,269	7,124	627	7,518	32,538	6,318	3,091	41,947
Interest	1,557	642	22	678	2,934	570	278	3,782
Transportation	299	715	629	1	2,041	2,069	•	4,110
Telephone	3,606	1,488	131	1,570	6,795	1,319	646	8,760
Property maintenance	17,086	7,049	620	7,438	32,193	6,251	3,058	41,502
Licenses and fees	2,109	4	80	Ì	2,131	1,351	202	3,684
Other expenses	10,820	143	•	29	10,992	1,889	78	12,959
Client support	•	1,321	72	4,164	5,557	•	1	5,557
Depreciation	60,404	24,918	2,192	26,297	113,811	22,097	10,811	146,719
Special events direct costs	1	-	1	1	ſ	•	17,490	17,490
Total expenses	756,583	315,052	29,937	287,908	1,389,480	258,938	138.210	1.786.628
Less: direct cost of special events	i	1	ı	į	1	1	(17,490)	(17,490)
Total Expenses	\$ 756,583	\$ 315,052	\$ 29,937	\$ 287,908	\$ 1,389,480	\$ 258,938	\$ 120,720	\$ 1,769,138

The accompanying notes are an integral part of these financial statements.

Neighborhood House, Inc. Statements of Cash Flows For the Years Ended June 30, 2021 and 2020

	2021	2020
Cash Flows from Operating Activities		
Change in net assets	\$ 367,983	\$ 559,993
Adjustments to reconcile change in net assets		
to net cash provided by operating activities		
Depreciation	150,758	146,719
In-kind donations of building and equipment	-	(85,817)
Loss on disposal of equipment	-	308
(Increase) decrease in operating assets		
Accounts receivable, net	15,978	(21,656)
Grants receivable	(19,366)	_
Promises to give, net	(19,367)	(318,300)
Prepaid expenses	17,261	(59,845)
Increase (decrease) in operating liabilities		
Accounts payable	2,561	(4,396)
Payroll accruals and witholding	63,902	4,490
Refundable advances	 (52,473)	 52,473
Net Cash Provided by Operating Activities	527,237	 273,969
Cash Flows from Investing Activities		
Purchase of land, building and equipment	 (131,247)	 (24,456)
Net Cash Used by Investing Activities	 (131,247)	(24,456)
Net Increase in Cash	395,990	249,513
Cash at Beginning of Year	 309,760	 60,247
Cash at End of Year	\$ 705,750	\$ 309,760
Supplemental Disclosures		
Cash paid for interest	\$ 	\$ 3,782

Note 1 - Summary of Significant Accounting Policies

Neighborhood House, Inc. (the Organization) is a not-for-profit community center serving the Portland neighborhood of Louisville, Kentucky. The Organization's mission is to provide individuals with opportunities to enhance their lives. The Organization offers four core program areas:

<u>Child Development Center</u> – provides children ages six weeks through twelve years with a safe, nurturing learning environment.

<u>Youth Development Program</u> – provides a safe place for children and teens to develop positive and meaningful relationships.

Four Seasons Program – provides services to improve the quality of life for senior adults.

Family Services - provides community activities and an Emergency Food Bank.

Funds to provide these services are provided by individuals, corporations, foundations, private and government grants and earned income.

Basis of Accounting

The Organization prepares its financial statements on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

Basis of Presentation

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) with regards to financial statements of Not-for-Profit Organizations. Under this guidance, the Organization is required to report information regarding its financial position and activities according to two classes of net assets. A description of the net assets categories follows:

<u>Net assets without donor restrictions</u>: expendable funds that are not subject to donor-imposed stipulations or invested in land, building and equipment.

<u>Net assets with donor restrictions</u>: stipulated by donors for specific operating purposes or are restricted by time. These include donor restrictions requiring that the corpus to be invested in perpetuity and only the income be made available for operations in accordance with donor restrictions.

Estimates

Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenues and expenses. Actual results could differ from those estimates.

Cash

The Organization considers all checking accounts and money market accounts to be cash equivalents.

Note 1 – Summary of Significant Accounting Policies - Continued

Accounts Receivable

Accounts receivable consist primarily of amounts due from US government for unemployment claims, the Kentucky Child Care Assistance Program, a food reimbursement program, private pay childcare clients and grants where the service has already been performed and reimbursement has been requested or billed. Management records an allowance for doubtful accounts when receivables are over 90 days past due or receipt of payment is unlikely. Bad debt expense was \$6,000 and \$0 for the years ended June 30, 2021 and 2020, respectively. The Organization writes off receivables after exhaustion of all collection efforts.

Grants Receivable

Grants receivable are stated at unpaid balances, less an allowance for doubtful accounts. No accounts are considered by management to be uncollectable at June 30, 2021 and 2020, therefore, no allowance is considered necessary.

Promises to Give

Promises to give are recognized when the donor makes a promise to give to the Organization that is, in substance, unconditional. Promises to give becoming due in the next year are recorded at net realizable value. Conditional promises to give are recognized when the conditions on which they depend are substantially met. Promises to give due in more than one year are recognized at fair value, using present value techniques and a discount rate of the Treasury Bill rate (0.05% as of June 30, 2021). No allowance for doubtful accounts is necessary, as management believes that all amounts are collectible.

Prepaid Expenses

Prepaid expenses represent expenditures that have not been recorded as an expense but paid in advance of their due date. Prepaid expenses consist of unemployment and errors and omissions insurance. The prepaid expense was \$75,850 and \$93,111 for the years ended June 30, 2021 and 2020, respectively.

Land, Building and Equipment

Land, building, and equipment is recorded at cost, or if donated, at the approximate fair value at the date of donation. The cost of property and equipment purchased in excess of \$1,000 is capitalized. Depreciation is computed using primarily the straight-line method over the estimated lives of the assets from 3 to 40 years.

Payroll Accruals and Withholding

During the year ended June 30, 2021, the Organization deferred payment of \$38,612 of the employer's share of social security taxes in accordance with the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) stimulus bill passed. The legislation allows all entities to defer the employer's share of social security payments between March 27, 2020 and December 31, 2021; 50% of the deferred payments must be paid by December 31, 2021 and the remaining 50% must be paid by December 31, 2022.

Refundable Advances

Refundable advances are funds received from a third party for which services have yet to be provided, or for which donor conditions have yet to be met, and the grantor has a right of return.

Note 1 - Summary of Significant Accounting Policies - Continued

In-Kind Donations

The Organization receives various types of in-kind donations including services and food. FASB ASC 958-605-25 requires recognition of professional services received if those services (a) create or enhance long-lived assets or (b) require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation. Most of the services received by the Organization do not meet these criteria. Contributions of tangible assets are recognized at fair value when received and are recorded as part of contributions on the statements of activities. The amounts reflected as in-kind support are offset by like amounts included in expenses or assets.

Revenue Recognition

Contributions and grants are recognized when cash, securities or other assets, an unconditional promise to give, or notification of a beneficial interest, is received and are recorded as net assets without donor restrictions or net assets with donor restrictions, depending on the existence and/or nature of any donor-imposed restrictions. Contributions and grants that are restricted by the donor are reported as an increase in net assets without donor restrictions if the restriction expires in the reporting period in which the contribution or grant is recognized. All other donor restricted contributions and grants are reported as an increase in net assets with donor restrictions, depending on the nature of restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions. Conditional promises to give, that is, those with a measurable performance or other barriers, and a right of return, are not recognized until the conditions on which they depend have been substantially met.

Program revenue and special event revenue are recognized when the program or event takes place.

Rental revenue is recognized over the term of the rental agreement.

Expense Allocation

The costs of providing the various programs and supporting activities have been summarized on a functional basis in the statements of functional expenses. Accordingly, costs have been allocated among the program and supporting services benefited. Directly identifiable expenses are charged to program and supporting services. All other expenses are allocated on the basis of estimates of time and effort.

Income Tax Status

The Organization is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. In addition, the Organization qualifies for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization other than a private foundation under Section 509(a)(2).

Management has concluded that any tax positions that would not meet the more-likely-than-not criterion of FASB ASC 740-10 would be immaterial to the financial statements taken as a whole. Accordingly, the accompanying financial statements do not include any provision for uncertain tax positions, and no related interest or penalties have been recorded in the statement of activities or accrued in the statement of financial position.

Note 1 - Summary of Significant Accounting Policies - Continued

Reclassifications

Certain reclassifications have been made in the prior year's amounts to conform with current year statement presentation.

Note 2 - Concentrations of Credit Risk

<u>Cash</u> - The Organization maintains its cash balance in several financial institutions in Louisville, KY. The cash balances are insured by the Federal Deposit Insurance Corporation. At various times during the year, the cash balance may exceed amounts federally insured. Risk is mitigated by the high quality of the financial institution. As of June 30, 2021 and 2020, cash balances exceeded the federally insured amount by \$472,092 and \$59,296, respectively.

Accounts receivable and promises to give - Financial instruments that are exposed to credit risk consist of accounts receivable and promises to give. Accounts receivable and promises to give are principally with the State of Kentucky, and foundations and corporations based in the Louisville area. Realization of these accounts is dependent on various economic conditions.

Note 3 - Promises to Give

Unconditional promises to give will all be collected in one to five years and consist of the following as of June 30:

	 2021	 2020
Metro United Way Capacity building General operations Other	\$ 59,149 250,000 160,000 51,552	\$ 110,629 375,000 - 16,105
	\$ 520,701	\$ 501,734
Receivable in less than one year Receivable in one to five years	\$ 425,701 95,000	\$ 376,734 125,000
Total promises to give Less discounts to net present value	520,701 -	 501,734 (400)
Promises to give, net	\$ 520,701	\$ 501,334

During the year ended June 30, 2021, the Organization also received a conditional promise of \$100,000 from C.E. and S. Foundation contingent upon sufficient completion of year one (of two) objectives and the development of a detailed plan for integrating the cost of the development function into their operating budget. Additionally, the Organization received a conditional promise of \$11,499 from Metro United Way contingent upon amounts received from a third party payor.

Note 4 - Land, Building, and Equipment

Land, building, and equipment consist of the following at June 30:

	2021	2020
Land	\$ 525,193	\$ 525,193
Building and improvements	3,268,852	3,178,147
Furniture and equipment	435,091	394,549
Vehicles	60,358	60,358
Total costs	4,289,494	4,158,247
Less accumulated depreciation	(2,609,336)	(2,458,578)
	1,680,158	1,699,669
Building under lease	157,136	157,136
Less accumulated depreciation	(157,136)	(157,136)
Land, building and equipment, net	\$ 1,680,158	\$ 1,699,669

Note 5 - Line of Credit

The Organization has available a credit line of \$150,000 with a maturity date of January 15, 2023. Advances on the line of credit incur interest at the Wall Street prime rate (3.25% as of June 30, 2021) with a floor of 4%. The credit line is secured by an interest in the property located at 201 North 25th Street, Louisville, KY. As of June 30, 2021 and 2020, there is no outstanding balance on the credit line.

Note 6 - Refundable Advances

In April 2020, the Organization received \$245,400 in loan funding from the Paycheck Protection Program (PPP), established pursuant to CARES Act and administered by the U.S. Small Business Administration. The loan proceeds have been used to cover payroll and utility costs. As of June 30, 2020, the Organization met a portion of the PPP forgiveness requirements for headcount, limitations on compensation reductions, as well as spending the money on permitted expenses. Based on the forgiveness requirements met, \$192,927 was recognized as a grant in the statement of activities for the year ended June 30, 2020 and the remainder amount of \$52,473 was recorded as a refundable advance as of June 30, 2020 until the rest of the forgiveness requirements were met. During the year ending June 30, 2021, the Organization recognized the remaining \$52,473 as a grant in the statement of activities. The loan was fully forgiven in April 2021.

In February 2021, the Organization received an additional \$245,400 in loan funding from the second draw of PPP. The Organization continues to evaluate the requirements of the CARES Act that allow for forgiveness; and anticipates the loan to be entirely forgiven pursuant to loan forgiveness standards currently in effect and therefore has recorded the loan under ASC 958-605, *Not-for-Profit Entities: Revenue Recognition* as a conditional contribution. As of June 30, 2021, the Organization has met all of the PPP forgiveness requirements for headcount, limitations on compensation reductions, as well as spending the money on permitted expenses. Based on the forgiveness requirements met, \$245,400 has been recognized as a grant in the statement of activities for the year ended June 30, 2021.

Note 7 - Net Assets with Donor Restrictions

Net assets with donor restrictions consist of the following at June 30:

	 2021	 2020
Restricted by time Restricted by purpose for programs	\$ 520,701 103,053	\$ 501,334 187,571
Total	\$ 623,754	\$ 688,905

Note 8 - Leasing Arrangements

The Organization leases out space in one of its buildings under an operating lease that expires March 31, 2025, with monthly rent of \$6,510. The building is fully depreciated. The Organization also receives other rental income for room rentals for events. Net rental income for the years ended June 30, 2021 and 2020 was \$78,120 and \$72,616, respectively. Future lease rental income under non-cancelable operating leases in excess of one year is as follows:

June 30, 2022	\$ 78,120
June 30, 2023	78,120
June 30, 2024	78,120
June 30, 2025	 58,590
	\$ 292,950

Note 9 - Defined Contribution Pension Plan

The Organization has a defined contribution pension plan which covers all employees who have met certain age and service requirements. The Organization contributed \$23,814 and \$21,128 for the years ended June 30, 2021 and 2020, respectively.

Note 10 - In-Kind Donations

Contributions of tangible assets are recognized at fair market value when received. The amounts are reflected in the accompanying financial statements as support and are offset by like amounts included in expenses or assets. In-kind donations consisting of food and supplies for the years ended June 30, 2021 and 2020 were \$158,208 and \$246,101, respectively.

Note 11 - Liquidity and Availability

The following table reflects the Organization's financial assets as of June 30, 2021 and 2020, reduced by amounts not available for general expenditure within one year. Financial assets are considered unavailable when illiquid, or not convertible to cash within one year.

		2021	2020
Financial Assets			
Cash	\$	705,750	\$ 309,760
Accounts receivable, net		37,743	53,721
Grants receivable		19,366	-
Promises to give, net		520,701	501,334
Financial assets as of year-end		1,283,560	864,815
Less those unavailable for general expenditure within one year			
Promises to give collectible beyond one year		(95,000)	(124,600)
Donor imposed restrictions		(103,053)	 (174,309)
Financial assets available for general	•	4 005 505	
expenditure within one year		1,085,507	\$ 565,906

In addition to financial assets available to meet general expenditures over the year, the Organization operates with a balanced budget and anticipates covering its general expenditures by collecting sufficient program and other revenues and by utilizing resources from current and prior year's gifts, as needed. As described in Note 5, the Organization also has a \$150,000 line of credit, which it could draw upon in the event of an anticipated liquidity need.

Note 12 - Correction of an Error

During audit procedures performed for the year ending June 30, 2021, it was noted that prepaid expense was understated for the period ending June 30, 2020 by \$68,400. As a result, net income and beginning net assets were understated by \$68,400. Accordingly, the Organization has restated its results and cash flows for the year ended June 30, 2020.

The following summarized the restatement referred to above:

	As	Previously		
		Reported	Α	s Restated
Balance at June 30, 2020				
Prepaid expenses	\$	24,711	\$	93,111
Net assets	\$	2,429,993	\$	2,498,393
For the year ended June 30, 2020				
Change in net assets	\$	491,593	\$	559,993
Contributions and grant revenue	\$	1,722,388	\$	1,756,588
Payroll tax expense	\$	110,683	\$	76,483

Note 13 - Commitments & Contingencies

The novel coronavirus (COVID-19) was first identified in people in late 2019. COVID-19 spread rapidly throughout the world, and, in March 2020, the World Health Organization characterized COVID-19 as a pandemic. It has significantly disrupted supply chains and businesses around the world. The United States and global markets experienced significant volatility in value resulting from uncertainty caused by the pandemic. The extent of the impact of COVID-19 on Neighborhood House's financial performance will depend on certain developments, including the duration and spread of the outbreak and its impacts on Neighborhood House's donors, employees, and vendors, all of which at present, cannot be determined. Accordingly, the extent to which COVID-19 may impact Neighborhood House's future financial condition, results of operations and cash flows is uncertain.

Note 14 - Recently Issued Accounting Standards Updates

Accounting Standards Update 2016-02, Leases (Topic 842)

In February 2016, the FASB issued Account Standards Update (ASU) 2016-02, Leases (Topic 842) (ASU 2016-02), requiring all leases to be recognized on Neighborhood House balance sheet as a right-of-use asset and a lease liability, unless the lease is a short-term lease (generally a lease with a term of twelve months or less). At the commencement date of the lease, Neighborhood House will recognize: 1) a lease liability for Neighborhood House's obligation to make payments under the lease agreement, measured on a discounted basis; and 2) a right-of-use asset that represents Neighborhood House's right to use, or control the use of, the specified asset for the lease term. Upon adopting ASU 2016-02, Neighborhood House will be required to recognize and measure its leases at the beginning of the earliest period presented using a modified retrospective approach. ASU 2016-02 will be effective for Neighborhood House for the year ending June 30, 2023, with early adoption permitted. Neighborhood House is currently evaluating the effect that the new standard will have on its financial statements.

Accounting Standards Update 2020-07, Not-for-Profit Entities (Topic 958): Presentation and Disclosures by Not-for-Profit Entities for Contributed Nonfinancial Assets

In September 2020, the FASB issued Accounting Standards Update (ASU) 2020-07, Not-for-Profit Entities (Topic 958): Presentation and Disclosures by Not-for-Profit Entities for Contributed Nonfinancial Assets (ASU 2020-07), requiring an entity to present contributed nonfinancial assets as a separate line item in the statement of activities, apart from contributions of cash and other financial assets. ASU 2020-07 includes additional disclosures requirements about contributed nonfinancial assets for not-for-profit entities, including additional disclosure requirements for recognized contributed services. The standard will be applied on a retrospective basis and will be effective for the year ending June 30, 2022. Neighborhood House does not expect the new standard will impact its financial statements other than a reclassification on the statement of activities and additional disclosures.

Note 15 - Subsequent Events

Management has evaluated subsequent events for recognition or disclosure in the financial statements through February 7, 2022, which was the date at which the financial statements were available to be issued.



Kentucky Secretary of State Michael G. Adams

NEIGHBORHOOD HOUSE

File Annual Report

File Certificate of Assumed Name (DBA)

File Statement of Change of Principal Office

File Statement of Change of registered Agent / Registered Address

Printable Forms

Subscribe to changes made to this entity

Certificates

General Information

Organization Number 0037626

Name NEIGHBORHOOD HOUSE

Profit or Non-Profit N - Non-profit

Company Type KCO - Kentucky Corporation

StatusA - ActiveStandingG - Good

State KY

 File Date
 5/9/1902

 Organization Date
 5/9/1902

 Last Annual Report
 2/11/2022

Principal Office 201 NORTH 25TH. ST.

LOUISVILLE, KY 40212-1401

Registered Agent JENNIE JEAN DAVIDSON

201 NORTH 25TH STREET LOUISVILLE, KY 40212

Current Officers

President Ted Nixon
Vice President Debbie Held
Secretary Daniel Gibson
Treasurer Kevin Everwine

Director Allison Stack

Kelli Morris Director Tom Rieth **Director** Celia Manlove **Director** Nubia Bennett **Director Amber Garvey** Director **Director** Anne Hoskinson Director Deja Jackson **Director** Kelly McCants Sylvia Quaye Director Kate Ward Director

Individuals / Entities listed at time Of formation

Director MARSHALL P ELDRED

Director MRS THOMAS A BALLANTIN

DirectorWM M COTTONDirectorMRS CARL BERG

Director MRS KERVIN BULLITT

IncorporatorLUCY BELKNAPIncorporatorLANA DUPONTIncorporatorPATTY B SEMPLEIncorporatorREBECCA R JUDAH

Incorporator PATTY S HILL

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	2/11/2022	1 page	PDF
Annual Report	2/24/2021	1 page	PDF
Annual Report	2/12/2020	1 page	PDF
Registered Agent name/address change	6/21/2019 10:47:52 AM	1 page	PDF
Annual Report	4/18/2019	1 page	PDF
Registered Agent name/address change	2/8/2019 12:34:03 PM	1 page	PDF
Registered Agent name/address change	2/8/2019 11:18:46 AM	1 page	PDF
Annual Report	4/10/2018	1 page	PDF
Annual Report	4/19/2017	1 page	PDF
Annual Report	3/8/2016	1 page	PDF
Annual Report	3/31/2015	1 page	PDF
Annual Report	1/23/2014	1 page	PDF
Annual Report	1/14/2013	1 page	PDF
Annual Report	2/9/2012	1 page	PDF
Annual Report	2/18/2011	1 page	PDF
Annual Report	2/26/2010	1 page	PDF
Annual Report	2/16/2009	1 page	PDF
Annual Report	2/13/2008	1 page	PDF
Annual Report	1/16/2007	1 page	PDF
Annual Report	4/6/2006	1 page	tiff
Annual Report	5/23/2005	1 page	PDF

PDF

Annual Report	7/6/2004	1 page	PDF	
Annual Report	5/13/2003	1 page	tiff	PDF
Annual Report	5/8/2002	1 page	tiff	PDF
Annual Report	7/23/2001	1 page	tiff	PDF
Annual Report	7/6/2000	1 page	tiff	PDF
Annual Report	7/19/1999	2 pages	tiff	PDF
Annual Report	7/23/1998	2 pages	tiff	PDF
Annual Report	7/1/1997	2 pages	tiff	PDF
Annual Report	7/1/1996	3 pages	tiff	PDF
Annual Report	7/1/1995	3 pages	tiff	PDF
Annual Report	7/1/1994	3 pages	tiff	PDF
Statement of Change	10/5/1993	1 page	tiff	PDF
Annual Report	7/1/1993	2 pages	tiff	PDF
Annual Report	7/1/1992	1 page	tiff	PDF
Annual Report	7/1/1991	5 pages	tiff	PDF
Annual Report	7/1/1990	2 pages	tiff	PDF
Annual Report	7/1/1989	1 page	tiff	PDF
Articles of Incorporation	5/9/1902	1 page	tiff	PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	2/11/2022 2:14:18	2/11/2022 2:14:18	
	PM	PM	
Annual report	2/24/2021 2:39:52	2/24/2021 2:39:52	
Annual report	PM	PM	
Amount	2/12/2020 12:14:3	32/12/2020 12:14:3	3
Annual report	PM	PM	
Danistana da una tandana ana abana a	6/21/2019 10:47:5	26/21/2019 10:47:5	2
Registered agent address change	AM	AM	
Amount	4/18/2019 10:41:0	34/18/2019 10:41:0	3
Annual report	AM	AM	
Registered agent address change	2/8/2019 12:34:03	2/8/2019 12:34:03	
	PM	PM	
Backley Land Allerand	2/8/2019 11:18:46	2/8/2019 11:18:46	
Registered agent address change	AM	AM	
Americal	4/10/2018 12:37:57	74/10/2018 12:37:5	7
Annual report	PM	ΡM	
	4/19/2017 10:11:20	04/19/2017 10:11:20)
Annual report	AM	AM	
Annual report	3/8/2016 11:49:57	3/8/2016 11:49:57	
	AM	AM	
Annual report	3/31/2015 3:12:30	3/31/2015 3:12:30	
	PM	PM	
Annual report	1/23/2014 11:35:40	1/23/2014 11:35:40)
	AM	AM	
Annual report	1/14/2013 1:02:07	1/14/2013 1:02:07	
	PM	PM	
A	2/9/2012 11:17:22	2/9/2012 11:17:22	
Annual report	AM	AM	

Annual report	2/18/2011 7:28:56 AM	2/18/2011 7:28:56 AM
Annual report	2/26/2010 2:04:17 PM	2/26/2010 2:04:17 PM
Annual report	2/16/2009 10:00:30 AM	02/16/2009 10:00:30 AM
Annual report	2/13/2008 2:44:40 PM	2/13/2008 2:44:40 PM
Annual report	1/16/2007 11:46:23 AM	3 1/16/2007 11:46:23 AM
Annual report	4/6/2006 8:40:27 AM	4/6/2006
Annual report	5/23/2005	5/23/2005
Annual report	7/6/2004	7/6/2004
Registered agent address change	2/19/2004 11:30:45 AM	2/19/2004
Amendment - Change purpose	5/18/1973	5/18/1973
Amendment - Miscellaneous amendment	s 10/3/1955	10/3/1955
Amendment - Miscellaneous amendment	s1/24/1912	1/24/1912

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.

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Annual Report	12/31/2004 2:11:27 PM	1 page
Statement of Change	2/19/2004	1 page
Annual Report	5/13/2003	1 page
Annual Report	5/8/2002	1 page
Annual Report	7/23/2001	1 page
Annual Report	7/6/2000	1 page
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Statement of Change	5/27/1981	2 pages
Reinstatement	9/16/1980	3 pages
Revocation of Certificate of Authority	8/27/1979	2 pages
Revocation of Certificate of Authority	8/27/1979	2 pages
Six Month Notice	8/27/1979	1 page
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Six Month Notice	2/26/1979	1 page
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Statement of Change	10/23/1959	2 pages

Amendment	10/3/1955	3 pages
Statement of Change	9/24/1953	2 pages
Annual Report	8/2/1942	3 pages
Statement of Change	9/16/1941	2 pages
Annual Report	6/22/1941	26 pages
Amendment	1/24/1912	4 pages
Articles of Incorporation	5/9/1902	4 pages

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Kentucky Unbridled Spirit