

Applicant/Program: Clifton Cultural Center, Inc.

Executive Summary of Request:	
Funds to support "I've Rambled This Country Both Early of Mountain Music." A two-day event presented by the Clifton Funding includes artist fees, artist travel, production and p	n Center on September 19-20, 2014.
Tracking #: NDF080614 CCC 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

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

 $\mathcal{A}$ 

ngh Primary Sponsor Signature

#2,500-

District #

## **Primary Sponsor Disclosure**

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

N/A Tan

Approved by:	
Appropriations Committee Chairman	Date
Clerk's Office Only:	
Request Amount:	Committee Amended Appropriation:
Original Appropriation:	Council Amended Appropriation:

1|Page Effective February 2014 OFFICE OF METRO COUNCIL CLERK REVIEWED

TIME 4:

## **Applicant/Program: Clifton Cultural Center, Inc.**

## **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 #

Council Member Signature

\$\$400,00 1/15/2014

Amount

District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date

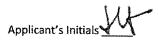
## NDF NON-PROFIT APPLICATION CHECKLIST

Program Name: I've Rambled This Country Both Early & Late Request Amount: \$3,750	Yes/No/NA			
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?	Yes			
Request form: Is the funding proposed less than or equal to the request amount?				
<b>Request form:</b> Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?	Yes Yes			
Application Page 1: Has prior Metro funds committed/granted been disclosed?	Yes			
Application Page 1: Is the application properly signed and dated by authorized signatory?	Yes			
Application Page 3: Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?	na			
Application Pages 3 – 5: Is the proposed public purpose of the program well-documented?	Yes			
Application 4: Is there adequate documentation of how the proceeds of the fundraiser will be spent?	na			
Application Budget Page 6: Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for 'Metro, Non Metro and Total' expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?	Yes			
Faith Based Organizations: Is the signed Faith Based Form signed and included?	na			
Jefferson County Only: Will all funding be spent in Louisville/Jefferson County?	Yes			
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?	nla			
<ul> <li>Good Standing: Is the entity in good standing with:</li> <li>Kentucky Secretary of State – include Secretary of State website information on organization</li> <li>Louisville Metro Government – check OMB monthly report filed in Council Financial Reports</li> <li>Internal Revenue Service – most recent Form 990 included</li> </ul>	Yes			
Separate Taxing Districts: If Metro funding is for a separate taxing district, is the funding appropriated for a brogram outside the legal responsibility of that taxing district?	nla			
Small Cities: Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)	na			
<b>Operating Requests:</b> Is recommended operating funding less than or equal to 33% of total operating budget?	na			
RS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes			
<b>Operating Budget:</b> Is the organization's current fiscal year operating budget included?	YUS			
<b>Drdinance Required:</b> Is the amount committed by Council members greater than \$5,000 to any one <b>project/program within an organization</b> in this fiscal year.	V O			
Board Members: Is the entity's board member list (with term length/term limits) included?	105			
taff: Is a list of the highest paid staff included with their expected annual personnel costs?	Yes			
Annual Audit: Is the most recent annual audit (if required by organization) included?	Yes			
Rent Requests: Is a copy of signed lease included?	NO			
articles of Incorporation: Are the Articles of Incorporation of the organization included?	Yes			
RS Form W-9: Is the IRS Form W-9 included?	Yes			
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?	nla			
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)? Prepared by: Date: M1514	n(d			



		SECTION 1 - APPL	ICAN	T INFORMATION	N	
Legal Name of Appli	cant Organ	ization: Clifto	n (	Cultural	Contor In	<b>^</b>
(as listed on: <u>http://www</u> .	.sos.ky.gov/bi	usiness/records) CIIIO		Juitural	Center, In	С.
Main Office Street &	Mailing A	ddress: 2117 Main Stree	t			
Website: www.Clifton	nCenter.or			د		
Applicant Contact:	Kristen	Tidwell		Title:	Development Di	rector
Phone:	(502) 8	96-8480, ext. 303		Email:	ktidwell@cliftond	center.org
Financial Contact:	Adam I	Fischer		Title:	General Manage	er
Phone:	(502 89	96-8480, ext. 302		Email:	afischer@clifton	center.org
Organization's Repre	sentative	who attended NDF Train	ing:	Kristen Tidwell		andre andre andre andre and and and an andre and an and
GEO	GRAPHICA	L AREA(S) WHERE PROG	RAM	ACTIVITIES ARE	(WILL BE) PROVIDED	
Program Facility Loca	ation(s):	2117 Payne Street	hinda Endakanda (rü	Сан малана на солото	n an	
Council District(s):		9		Zip Code(s):	40206	
	SECTI	ON 2 – PROGRAM REQU	EST &	FINANCIAL INF	ORMATION	
PROGRAM/PROJECT	NAME: "In	e Rambled This Country E	Both E	Early and Late: A (	Celebration of Kentucky	Mountain Music"
Total Request: (\$)	3,750	Total Metro A	ward	(this program)	in previous year: (\$)	3,000
Purpose of Request (	check all t	hat apply):				
🔲 Operating f	<sup>2</sup> unds (gen	erally cannot exceed 33%	6 of a	gency's total ope	erating budget)	
Programmi	ng/service:	s/events for direct benef	it to d	community or qu	ualified individuals	
Capital Pro	ect of the	organization (equipment	, furr	ishing, building,	etc)	
The Following are Re	quired Att	achments:	ومتحدمت والمراجع			
IRS Exempt Status De		n Letter		Signed lease if ren	t costs are being request	ed
Current Year Project	-			RS Form W9		
List of Board of Dire		e term & term limits		Evaluation forms if	f used in the proposed pr	ogram
Most recent IRS For		20.11		Annual audit (if red	quired by organization)	
Articles of Incorpora		20-11			ization Certification Form	n, if required
Cost estimates from		endor if request is for		Staff including the	a 3 highest paid staff	
capital expense					=####################################	
For the current fiscal	year endin	ig June 30, list all funds a	ppro	priated and/or r	eceived from Louisville	e Metro
from any department	or Metro (	r program or expense, in Council Appropriation (N	iciuai eight	ng tunds receive arboad Develor	ed through Metro Fede	eral Grants, additional
sheet if necessary.					inene s unusj. Actuen e	radicional
Source:	Louisville Metro	o Council - External Agency Fund	Am	ount: (\$) 1	11,400	
Source:		,	Am	ount: (\$)		
Source:			Am	ount: (\$)	an a	
Has the applicant con	tacted the	BBB Charity Review for p	partic	ipation? 🗌 Yes	s 🔳 No	
		harity Review Standards		Yes No		

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#### SECTION 3 - AGENCY DETAILS

**Describe Agency's Vision, Mission and Services:** 

Boasting the beautiful 500-seat Eifler Theater, as well as a variety of other studio and meeting spaces, the Clifton Center has become a treasured performance venue and gathering place for the greater Louisville community. It is estimated that a minimum of 50,000 people come to the Clifton Center each year for wedding celebrations, art classes, dance classes, concerts, meetings, and other community events. Housed in an historic building that served as the St. Frances of Rome School before its closing in 1974, the Clifton Center was founded in 1995 to serve as an affordable rental facility for community events including music and theater productions, weddings, meetings, and other gatherings.

In 2010, the Clifton Center entered a new era in its history and adopted its current mission "... to serve as a gathering place for art, culture, and ideas that enrich our community." As a result of the recent transformation, the Clifton Center now looks forward to presenting its fourth season of Live at the Clifton Center, which is a series of diverse and unique programming that is becoming an integral part of the cultural life of Louisville. While continuing its role as a unique rental facility, the Clifton Center is now a vibrant center that presents acclaimed musicians, award-winning films, arts education programs, and a variety of other cultural offerings of the highest quality that enrich the Louisville community.

In its role as a rental facility, the Clifton Center regularly provides local nonprofits with deeply discounted, or often free, rental space which makes possible the important work of the worthy organizations that benefit the greater community. Community organizations that use the Clifton Center include the Coalition for the Homeless, Seven Counties, Phoenix Health Service, Colon Cancer Prevention Project, Family & Children's Place, the Sierra Club, Veterans Affairs of Louisville, Volunteers of America, Louisville Free Public Library, Center for Nonprofit Excellence, and Operation Brightside, among many others.

In its more recent role as arts presenter, the Clifton Center has deepened its impact on the community by providing cultural and educational opportunities that reach a broad audience representative of Louisville's rich diversity. The Clifton Center has a particular commitment to presenting high quality world music and through its Louisville Heritage Project, the Center celebrates and highlights music and cultural traditions from around the world. Featuring top artists from regions such as West Africa, Brazil, and Ireland, the Louisville Heritage Project appeals to our African-American, Latin, and Appalachian residents, among many others. In addition, the Clifton Center is committed to education programming and has ongoing partnerships with Field Elementary School and the University of Louisville School of Music, where Clifton Center strives to make the quality art experiences that it offers accessible to those young and old who may have limited access to such opportunities by providing free tickets to particularly underserved groups.

The Center has also served a key role in the economic renaissance of the Clifton neighborhood. The Center has helped revitalize the Frankfort Avenue corridor that is now among the most vital business districts in Louisville. A hub of activity, the Clifton Center draws thousands of people each year to the many restaurants, bars, art galleries and retail stores that surround the Center.

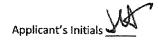
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Applicant's Initials



SECTION 4 - PROGRAM/PROJECT NARRATIVE A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.): Please See Attached Sheet B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s): Funding will be spent on costs related to "I've Rambled This Country Both Early and Late: A Celebration of Kentucky Mountain Music" and will include artist fees, artist travel, production, and publicity.

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## **CLIFTON CENTER - EXTRA SHEET**

## Section 4, Part A – Program/Project Narrative

The Clifton Center is requesting funds to support "I've Rambled This Country Both Early and Late: A Celebration of Kentucky Mountain Music," a two-day event presented by the Clifton Center in collaboration with the Association for Cultural Equity, which houses the Alan Lomax Archive, on September 19 and 20, 2014.

In the fall of 1937, pioneering folklorist Alan Lomax traveled throughout the mountains of East Kentucky, documenting the region's traditional music. Two months later he returned to the Library of Congress with over 32 hours of recordings of ballad singers and songsters; Baptist, Methodist, and Pentecostal hymns; children's game songs and lullabies; and dozens of fiddlers, guitarists, harp-blowers, and banjo players. The farmers, coal miners, bus drivers, washerwomen, and schoolteachers who sang into Lomax's microphone were the inheritors and practitioners of one of America's — and the world's — richest musical legacies.

In 2014-2015 the Association for Cultural Equity and its Alan Lomax Archive is digitally repatriating these invaluable cultural artifacts to repositories across Kentucky, to be used as resources for the current generation and generations to come. As part of that initiative, the Clifton Center and the Association for Cultural Equity, which houses the Lomax Archive, are hosting a two-day celebration of East Kentucky's musical heritage. As complement to performances by renowned traditional singers and players, the weekend will feature a talk on Lomax's recordings in Eastern Kentucky and the repatriation; a participatory "shape-note" singing gathering focusing on hymns in the Sacred Harp and Southern Harmony; a tune-swap in which musician participants explore the geographic, musical, and stylistic evolution of specific songs included in the Lomax recordings; as well as workshops for musicians led by some of the leading performers of Kentucky mountain music. The weekend's event will conclude with a square-dance featuring the Red State Ramblers and caller Randy Wilson. The weekend gathering will bring together some of our region's foremost practitioners and interpreters of Kentucky mountain music including John Harrod and the Kentucky Clodhoppers, Jesse Wells, Bruce Green, Anna Roberts-Gevalt, Ron Pen, Randy Wilson, and the Red State Ramblers.

## Section 4, Part F – Collaboration and Partnerships

Partnerships are an important component of the Clifton Center's efforts to serve the community and have become one of the Center's strategies for success. The Center is collaborating with the Association for Cultural Equity, which houses the Lomax Archive, to present the "Celebration of Kentucky Mountain Music" event in September. Louisville native and resident, Nathan Salsburg, curator for the Alan Lomax Project, is participating by helping plan concerts and community activities related to the weekend event.

The Clifton Center has partnerships with other local organizations that are key to the Center's operations and programming.

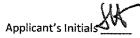
The Center has a key partnership with Louisville Public media and last year began a cold-weather version of LPM's popular "Waterfront Wednesdays," entitled "Winter Wednesdays" that was extremely successful. The series will continue again this season. As a result of this partnership, the Clifton Center has gained new audience members and donors.

The Louisville Visual Art Association is another key partner with the Clifton Center. Since establishing two permanent studio spaces at the Center last year, the Louisville Visual Art Association holds art classes for adults and children at the Clifton Center. The classes bring hundreds of aspiring artists into



C: If this request is a fundraiser, please detail how the proceeds will be spent:
N/A
D: For Expenditure Reimbursement Only - The grant award period begins with the Metro Council approval date
and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for
funds to be spent before the grant award period, identify the applicable circumstances:
Effective October 24, 2013, reimbursements should not be made unless an emergency can be demonstrated
by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach
invoices or proof of payment):
✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan
identified in this application.
Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.
identified in this application.
The funding request is a reimbursement of the following expenditures that will probably be incurred after the
application date, but prior to the execution of the grant agreement:
✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this
application.
The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant
agreement.

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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:

The Clifton Center's "Celebration of Kentucky Mountain Music" is intended to appeal to and benefit the general public, along with musicians in Louisville and surrounding areas. The celebratory weekend will provide the public with the opportunity to explore and discover the richness of Kentucky's musical heritage as they learn, listen, and participate in the activities throughout the weekend.

The Clifton Center will evaluate the success of the project based on attendance at all events, as well as feedback from participants and teachers/leaders of the school and community outreach events.

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.

Please See Attached Sheet

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## SECTION 5 - PROGRAM/PROJECT BUDGET SUMMARY

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

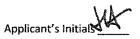
	Column 1	Column 2	Column (1+2)=3	
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds	
A: Personnel Costs Including Benefits				
B: Rent/Utilities				
C: Office Supplies				
D: Telephone				
E: In-town Travel				
F: Client Assistance (Attach Detailed List)				
G: Professional Service Contracts				
H: Program Materials				
I: Community Events & Festivals (Attach Detail List)	3750	4200	7950	
J: Small Equipment				
K: Capital Equipment				
L: Other Expenses (Attach Detail List)				
*TOTAL PROGRAM/PROJECT FUNDS				
"A of Program Budget	47 %	52 %	100%	

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

Total Nevenue for Columns 2 Expenses	4200	
Other (please specify)	1700	
Fees Collected from Program Participants		
Private Contributions (do not include individual donor names)	1000	
United Way		
Other State, Federal or Local Government	1500	

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

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## Clifton Center Detalied Break-Down of Community Events and Festivals Line Item in Budget

## **Program Expenses**

Total Program Expenses	\$ 7,950
Supplies	200
Publicity	2,000
Artist Travel	1,300
Sound/Tech	1,200
Artist Fees	3,250

Program expenses related to the production of the Clifton Center's

"Celebration of Kentucky Mountain Music"

September 19-20, 2014



**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
Volunteers	\$3,719.52	168 volunteer hrs. x \$22.14
		\$22.14 is the per hour according to the Independent Sector
Total Value of In-Kind	\$3,719.52	
(to match Program Budget Line Item. Volunteer Contribution &Other In Kind)		

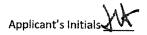
#### \* DONOR INFORMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION. VOLUNTEERS NEED NOT BE LISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NOTING HOW MANY HOURS PER PERSON PER WEEK

Agency Fiscal Year Start Date: October 1, 2014

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

If YES, please explain:

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## SECTION 6 - CERTIFICATIONS & ASSURANCES

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

#### Standard Assurances

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

#### **Standard Certifications**

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

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

#### N/A

#### SECTION 7 - CERTIFICATIONS & ASSURANCES

l certify un	der the penalty of law the inf	ormati	on in this annlic:	ntion (in	rluding y	vithout limi	tation. "Certifica	tions and Assurances") is
-	the best of my knowledge.			-				-
	n. If falsification is shown afte		• i · ·	s 1	•		-	
		autho	rized to sign this	applicat	ion for th	ne applying	organization and	have initialed each page of the
application	1.		-1010	نسل				
Signatur	e of Legal Signatory:		NUA	AV.	UN	S	Date:	7/14/2014
Legal Sig	natory: (please print):	Joh	n Harris				Title:	Executive Director
Phone:	(502) 896-8480		Extension:	301		Email:	jharris@c	liftoncenter.org

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

## Date: 007 1 1 19953

CLIFTON CULTURAL INC. CENTER, 2119 PAYNE ST. LOUISVILLE, KY 40206 Employer Identification Number: 61-1270383 Case Number: 315194018 Contact Person: 2ENIA LUK Contact Telephone Number: (513) 684-3578 Accounting Period Ending: June 30 Form 990 Required: Yes Addendum Applies: Yes

#### Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in section 509(a)(2).

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment, or other Federal taxes, please let us know.

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(2) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(2) organization.

Donors may deduct contributions to you as provided in section 170 of the Letter 947 (DO/CG)

#### -2-CLIFTON

CULTURAL CENTER, INC.

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 Code sections 2055, 2106, and 2522.

Contribution deductions are allowable to donors only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fundraising events may not necessarily qualify as deductible contributions, depending on the circumstances. See Revenue Ruling 67-246, published in Cumulative Bulletin 1967-2, on page 104, which sets forth guidelines regarding the deductibility, as charitable contributions, of payments made by taxpayers for admission to or other participation in fundraising activities for charity.

In the heading of this letter we have indicated whether you must file Form 990, Return of Organization Exempt From Income Tax. If Yes is indicated, you are required to file Form 990 only if your gross receipts each year are normally more than \$25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally \$25,000 or less, and sign the return.

If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of \$10 a day is charged when a return is filed late, unless there is reasonable cause for the delay. However, the maximum penalty charged cannot exceed \$5,000 or 5 percent of your gross receipts for the year, whichever is less. This penalty may also be charged if a return is not complete, so please be sure your return is complete before you file it.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

If we have indicated in the heading of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

Because this letter could help resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

Letter 947 (DO/CG)

CLIFTON CULTURAL CENTER, INC.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

">S"rhœr<ely yours,

Bulland lelle,

C. Ashley **BulMrd** District Director

Enclosure(s): Addendum

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## CLIFTON CENTER FY2014 BUDGET

		FY2014
C		
Contributed Income	Grants-Foundation	\$40,00
	Grants-Government	\$28,00
· · · · · · · · · · · · · · · · · · ·	Corporate Sponsorship	\$94,00
	Membership/Major Gifts	\$50,00
	Total Contributed Income	\$212,00
Earned Income	Lease Income	\$59,00
	Rental Income	\$95,00
	Ticket Sales - Programming	\$123,00
	Ticket Fees	\$5,25
	TOFA Auction	\$8,00
	Merchandise/Beverage	\$19,75
	Total Earned Income	\$310,00
	Total Income	\$522,00
Operating Expenses	Building Maintenance and Repair	\$16,00
	Cleaning Supplies	\$16,00
	Elevator Maintenance	\$3,00
	Utilities	\$33,00
	Total Building Operations	\$52,00
	<u>3</u>	\$32,00
	Employee Compensation	\$202,58
	Employee Benefits - Health Insurance	\$9,00
	Employee Benefits - Retirement	\$6,00
	Payroll Taxes	\$25,14
	Total Compensation	\$242,72
	Total Operating Expenses	\$294,720
rogram Expenses	Artist Fees	\$85,850
	Box Office Fees	\$8,350
	Sound/Tech	\$21,600
	Staffing	\$1,550
	Hospitality	\$3,500
	Housing	\$3,600
· · · · · · · · · · · · · · · · · · ·	Publicity	\$29,000
	Supplies	\$2,500
	Liquor License	\$3,675
	Beverage Cost	\$4,000
	Total Program Expenses	\$163,625
	Frankrik I. F	
eneral Expenses		\$8,000
	Accounting/Audit Fees	\$9,000
	Marketing/Website	\$8,100
	Graphic design	\$2,500
	Insurance	\$5,500
	Banking/Interest Expense	\$800
	Office Supplies Rent Paid	\$3,200
		\$19,174
	Staff Development/Research Staff Travel	\$1,000
	Telephone	\$1,500
		\$3,200
	Miscellaneous	\$500
	Tribute/Dues/Board Expense	\$800
	Total General Expense	\$63,274
	1	
	Total Expenses	\$521,625

## Clifton Center, Inc. Board of Directors Fiscal Year 2014

## Ann Y Adams, Board Chair Consultant

Bilancia, LLC (1<sup>st</sup> Term expires 2015)

**Robert Adams** Retired, University of Louisville (2<sup>nd</sup> Term expires 2014)

**Randy Blevins** President, Think Tank Marketing (1<sup>st</sup> Term expires 2014)

**Laurie Dobbins** Account Executive, Kiely Hines Insurance Co. (2<sup>nd</sup> Term expires 2014)

**Don Burch** Bluegrass Audi (2<sup>nd</sup> Term expires 2015)

**Mark Carroll** Partner, Bandy Carroll Hellige Advertising (2<sup>nd</sup> Term expires 2014)

**Bill Cheatham** Vice President, Small Business Officer Stock Yards Bank (2<sup>nd</sup> Term expires 2014)

**Gerri Combs** Retired Director, South Arts (1<sup>st</sup> Term expires 2015)

## Mary Michael Corbett

System Vice President, Government Relations Officer Norton Healthcare (4<sup>th</sup> Term expires 2014)

**Rev. John G. Eifler** Priest (4<sup>th</sup> Term expires 2014)

Ali Hawthorne Co-owner, M2-Maximum Media PR (2<sup>nd</sup> Term expires 2015)

**Tim Heine, MD, Secretary** Partner, AAL, PSC (4<sup>th</sup> Term expires 2015) **Susan Lawler, Treasurer** Controller, Mountoy Chilton & Medley (1<sup>st</sup> Term expires 2015)

**Debra M. Murphy** Executive Vice Pres., Trover Solutions, Inc (2<sup>nd</sup> Term expires 2015)

**Conor O'Driscoll** Production Manager The Woodford Reserve Distillery (2<sup>nd</sup> Term expires 2015)

**Douglas H. Owen, III** Co-Owner, Cassidy Turley Harry K. Moore (2<sup>nd</sup> Term expires 2014)

**Ashley S. Parker** Broker/Owner, Parker & Klein Real Estate (1<sup>st</sup> Term expires 2014)

**Mark Rountree, Vice-President** Partner, Ashley-Rountree & Associates (1<sup>st</sup> Term expires 2014)

**Patrick T. Schmidt** Partner, Tilford Dobbins Alexander PLLC (1<sup>st</sup> Term expires 2015)

**Debbie Wiebe-Kamber** National Marketing Director, Consulting Services (1<sup>st</sup> Term expires 2015)

As per the Bylaws of the Clifton Center Board of Directors, the term of office for Board Members terms is three years. Board Members are eligible to serve up to two consecutive full terms. Some Board Members have served additional terms due to recent changes in the organization and the need for institutional continuity.

Clifton Cultural Center, Inc Balance Sheet Standard As of June 30, 2014

Current Assets         Checking/Savings           1000 — Cash Accounts         4,579.46           1033 — First Capital Bank of Kent         4,579.46           1035 — Republic Bank - Operating         6,308.07           1040 — Petty Cash         600.00           1045 — Rebuplic Bank Money Ma         844.63           Total 1000 — Cash Accounts         12,332.1           Accounts Receivable         -145.0           1200 — Accounts Receivable         -145.0           1210 — Pledges Receivable         4,250.0           1210 — Prepaid Expenses         4,600.00           1410 — Artist Fees         4,600.0           1410 — Artist Fees         4,600.0           1041 Urrent Assets         21,037.1           Fixed Assets         21,037.1           1500 — Furniture Equipment         102,244.0           1800 — Leasehold Improvements         818,609.1           1900 — Accumulated Depreciation         -591,835.0           Total Fixed Assets         329,018.1           0TAL ASSETS         350,055.3           IABILTITES & EQUITY         12,050.00           IABILTITES & EQUITY         6,348.68           Total Accounts Payable         11,804.20           Other Current Liabilities         2160 — Retireme		
Current Assets         Checking/Savings           1000 — Cash Accounts         4,579.46           1033 — First Capital Bank of Kent         4,579.46           1035 — Republic Bank - Operating         6,308.07           1040 — Petty Cash         600.00           1045 — Rebuplic Bank Money Ma         844.63           Total 1000 — Cash Accounts         12,332.1           Accounts Receivable         -145.0           1200 — Accounts Receivable         -145.0           1210 — Pledges Receivable         4,250.0           1210 — Prepaid Expenses         4,600.00           1410 — Artist Fees         4,600.0           1410 — Artist Fees         4,600.0           1041 Urrent Assets         21,037.1           Fixed Assets         21,037.1           1500 — Furniture Equipment         102,244.0           1800 — Leasehold Improvements         818,609.1           1900 — Accumulated Depreciation         -591,835.0           Total Fixed Assets         329,018.1           0TAL ASSETS         350,055.3           IABILTITES & EQUITY         12,050.00           IABILTITES & EQUITY         6,348.68           Total Accounts Payable         11,804.20           Other Current Liabilities         2160 — Retireme		Jun 30, '14
1035 Republic Bank - Operating 1040 Petty Cash         6,308.07           1045 Rebuplic Bank Money Ma         844.63           Total 1000 Cash Accounts         12,332.1           Total 1000 Cash Accounts         12,332.1           Accounts Receivable         -145.0           1200 Accounts Receivable         -145.0           1210 Pledges Receivable         -145.0           1210 Prepaid Expenses         4,600.00           1410 Artist Fees         4,600.00           1410 Artist Fees         4,600.00           Total 1400 Prepaid Expenses         4,600.00           1410 Artist Fees         4,600.00           Total Other Current Assets         8,850.0           Total Other Current Assets         21,037.1           Fixed Assets         21,037.1           1900 Accumulated Depreciation         -591,835.0           Total Current Lassets         329,018.1           0TAL ASSETS         350,055.3           IABILITIES & EQUITY         11,804.2           Liabilities         2100 Accounts Payable           2000 Accounts Payable         11,804.2           2000 Accounts Payable         11,804.2           2100 Payroll Liabilities         6,348.68           <	Checking/Savings	
Total 1000 Cash Accounts12,332.1Total Checking/Savings12,332.1Accounts Receivable1200 Accounts Receivable1200 Accounts Receivable-145.0Total Accounts Receivable-145.01210 Pledges Receivable145.01400 Prepaid Expenses4,600.001400 Prepaid Expenses4,600.00Total 1400 Prepaid Expenses4,600.00Total Other Current Assets8,850.0Total Other Current Assets21,037.1Fixed Assets21,037.11500 Furniture Equipment102,244.01800 Leasehold Improvements818,609.11900 Accumulated Depreciation-591,835.0Total Fixed Assets329,018.1OTAL ASSETS350,055.3IABILITIES & EQUITY350,055.3IABILITIES & EQUITY11,804.21Liabilities6,348.68Total Accounts Payable11,804.222000 Accounts Payable11,804.22Other Current Liabilities6,348.68Total 2100 Payroll Liabilities6,348.642160 Retirement Match Emplo6,348.64Total 2100 Payroll Liabilities6,348.642100 Deferred Revenue26,641.502430 Deferred Revenue26,641.50Total 2400 Deferred Revenue26,641.50Total 2400 Deferred Revenue26,641.50Total Current Liabilities32,990.18Total Other Current Liabilities32,990.18Total Other Current Liabilities32,990.18Total Other Curr	1035 — Republic Bank - Operating 1040 — Petty Cash	6,308.07 600.00
Total Checking/Savings12,332.1Accounts Receivable-145.01200 - Accounts Receivable-145.0Total Accounts Receivable-145.01410 - Prepaid Expenses4,600.001400 - Prepaid Expenses4,600.00Total 1400 - Prepaid Expenses4,600.00Total Other Current Assets8,850.0Total Other Current Assets21,037.1Fixed Assets21,037.11500 - Furniture Equipment102,244.01800 - Leasehold Improvements818,609.11900 - Accumulated Depreciation-591,835.0Total Fixed Assets329,018.1OTAL ASSETS350,055.3IABILITIES & EQUITY11,804.22Liabilities11,804.22Other Current Liabilities6,348.68Total 2100 - Payroll Liabilities6,348.68Total 2100 - Payroll Liabilities6,348.64Total 2100 - Payroll Liabilities6,348.64Total 2100 - Deferred Revenue26,641.502430 - Deferred Revenue26,641.50Total 2400 - Deferred Revenue26,641.50Total 2400 - Deferred Revenue26,641.50Total Current Liabilities32,990.18Total Current Liabilities32,990.18 <t< td=""><td>· · · ·</td><td></td></t<>	· · · ·	
Accounts Receivable       -145.0         1200 — Accounts Receivable       -145.0         Total Accounts Receivable       -145.0         Other Current Assets       1210 — Pledges Receivable         1210 — Prepaid Expenses       4,600.00         Total 1400 — Prepaid Expenses       4,600.00         Total 1400 — Prepaid Expenses       4,600.00         Total Other Current Assets       8,850.0         Total Other Current Assets       21,037.1         Fixed Assets       21,037.1         1500 — Furniture Equipment       102,244.0         1800 — Leasehold Improvements       818,609.1         1900 — Accumulated Depreciation       -591,835.0         Total Fixed Assets       329,018.1         OTAL ASSETS       350,055.3         IABILTIES & EQUITY       11,804.2         Current Liabilities       2100 — Accounts Payable         2000 — Accounts Payable       11,804.2         Other Current Liabilities       6,348.68         Total 2100 — Payroll Liabilities       6,348.68         Total 2100 — Payroll Liabilities       2400 — Deferred Revenue         2410 — Deferred Revenue - Con       14,591.50         Total 2400 — Deferred Revenue       26,641.50         Total 2400 — Deferred Revenue       22,9	- Total Checking/Savings	
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Total 1400 — Prepaid Expenses4,600.0Total Other Current Assets8,850.0Total Other Current Assets21,037.1Fixed Assets102,244.01800 — Leasehold Improvements102,244.01900 — Accumulated Depreciation-591,835.0Total Fixed Assets329,018.1OTAL ASSETS350,055.3IABILITIES & EQUITY11,804.20LiabilitiesCurrent Liabilities2000 — Accounts Payable11,804.202000 — Accounts Payable11,804.20Other Current Liabilities6,348.68Total 2100 — Payroll Liabilities6,348.682400 — Deferred Revenue26,641.50Total 2400 — Deferred Revenue226,641.50Total Other Current Liabilities32,990.18Total Current Liabilities32,990.18Cotal Liabilities44,794.44Total Current Liabilities32,990.18Total Current Liabilities32,990.18Total Current Liabilities32,990.18Total Current Liabilities32,990.16Total Current Liabilities32,079.61 <td>1210 — Pledges Receivable</td> <td>4,250.00</td>	1210 — Pledges Receivable	4,250.00
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Fixed Assets1500 — Furniture Equipment102,244.01800 — Leasehold Improvements818,609.11900 — Accumulated Depreciation-591,835.0Total Fixed Assets329,018.1OTAL ASSETS350,055.3IABILITIES & EQUITY11,804.20LiabilitiesCurrent LiabilitiesCurrent Liabilities11,804.20Accounts Payable11,804.202000 — Accounts Payable11,804.20Other Current Liabilities6,348.682100 — Payroll Liabilities6,348.682400 — Deferred Revenue2410 — Deferred Revenue2410 — Deferred Revenue12,050.002430 — Deferred Revenue26,641.50Total 2400 — Deferred Revenue26,641.50Total Current Liabilities32,990.18Total Current Liabilities44,794.44Equity3000 — Opening Balance Equity3100 — Temp.Restricted Net Assets3,750.003200 — Retained Earnings-217,526.65Net Income82,079.61Total Equity305,260.90	Total Other Current Assets	8,850.00
1500 — Furniture Equipment102,244.01800 — Leasehold Improvements818,609.11900 — Accumulated Depreciation-591,835.0Total Fixed Assets329,018.1OTAL ASSETS350,055.3IABILITIES & EQUITY1abilitiesLiabilitiesCurrent LiabilitiesCurrent Liabilities11,804.20Total Accounts Payable11,804.202000 — Accounts Payable11,804.20Other Current Liabilities6,348.682100 — Payroll Liabilities6,348.682400 — Deferred Revenue2410 — Deferred Revenue2410 — Deferred Revenue26,641.50Total 2400 — Deferred Revenue26,641.50Total Other Current Liabilities32,990.18Total Other Current Liabilities32,990.18Total Current Liabilities44,794.44Equity3000 — Opening Balance Equity3100 — Temp.Restricted Net Assets3,750.003200 — Retained Earnings-217,526.65Net Income82,079.61Total Equity305,260.90	Total Current Assets	21,037.16
OTAL ASSETS350,055.3IABILITIES & EQUITY1abilitiesLiabilities2000	1800 — Leasehold Improvements	102,244.01 818,609.17 -591,835.00
IABILITIES & EQUITY         Liabilities         Current Liabilities         Accounts Payable         2000 — Accounts Payable         11,804.20         Other Current Liabilities         2100 — Payroll Liabilities         2160 — Retirement Match Emplo         6,348.68         Total 2100 — Payroll Liabilities         2400 — Deferred Revenue         2410 — Deferred Revenue         2430 — Deferred Revenue - Con         14,591.50         Total 2400 — Deferred Revenue         26,641.50         Total Other Current Liabilities         32,990.18         Total Current Liabilities         44,794.44         Equity         3000 — Opening Balance Equity         3100 — Temp.Restricted Net Assets         3200 — Retained Earnings         Net Income         82,079.61         Total Equity         305,260.90	Total Fixed Assets	329,018.18
Liabilities Current Liabilities Accounts Payable 2000 — Accounts Payable 11,804.24 Total Accounts Payable 2100 — Payroll Liabilities 2100 — Payroll Liabilities 2160 — Retirement Match Emplo Total 2100 — Payroll Liabilities 2400 — Deferred Revenue 2410 — Deferred Revenue 2410 — Deferred Revenue - Con 14,591.50 Total 2400 — Deferred Revenue 26,641.50 Total Other Current Liabilities 12,050.00 26,641.50 Total 2400 — Deferred Revenue 26,641.50 Total Other Current Liabilities 12,050.00 26,641.50 Total Other Current Liabilities 14,794.44 Fotal Liabilities 44,794.44 Equity 3000 — Opening Balance Equity 3100 — Temp.Restricted Net Assets 3200 — Retained Earnings Net Income 2000 — Content	TOTAL ASSETS	350,055.34
Total Accounts Payable11,804.20Other Current Liabilities11,804.202100 — Payroll Liabilities6,348.682100 — Retirement Match Emplo6,348.68Total 2100 — Payroll Liabilities6,348.682400 — Deferred Revenue2410 — Deferred Revenue2410 — Deferred Revenue - Ren12,050.002430 — Deferred Revenue - Con14,591.50Total 2400 — Deferred Revenue26,641.50Total Other Current Liabilities32,990.18Total Other Current Liabilities44,794.44Equity3000 — Opening Balance Equity3100 — Temp.Restricted Net Assets3,750.00200 — Retained Earnings-217,526.66Net Income82,079.61Total Equity305,260.90	Accounts Payable	11 804 26
Other Current Liabilities 2160 Retirement Match Emplo6,348.68Total 2100 Payroll Liabilities6,348.68Total 2100 Payroll Liabilities6,348.682400 Deferred Revenue2410 Deferred Revenue2410 Deferred Revenue - Con12,050.002430 Deferred Revenue - Con14,591.50Total 2400 Deferred Revenue26,641.50Total Other Current Liabilities32,990.18Total Other Current Liabilities44,794.44Fotal Liabilities44,794.44Equity3000 Opening Balance Equity3100 Temp.Restricted Net Assets 3200 Retained Earnings-217,526.66Net Income82,079.61Total Equity305,260.90	-	
2400 — Deferred Revenue       12,050.00         2430 — Deferred Revenue - Con       14,591.50         Total 2400 — Deferred Revenue       26,641.50         Total 2400 — Deferred Revenue       26,641.50         Total Other Current Liabilities       32,990.18         Total Current Liabilities       44,794.44         Equity       3000 — Opening Balance Equity       436,957.98         3100 — Temp.Restricted Net Assets       3,750.00         3200 — Retained Earnings       -217,526.66         Net Income       82,079.61         Total Equity       305,260.90	Other Current Liabilities 2100 — Payroll Liabilities	
2400 — Deferred Revenue       12,050.00         2430 — Deferred Revenue - Con       14,591.50         Total 2400 — Deferred Revenue       26,641.50         Total 2400 — Deferred Revenue       26,641.50         Total Other Current Liabilities       32,990.18         Total Current Liabilities       44,794.44         Equity       3000 — Opening Balance Equity       436,957.98         3100 — Temp.Restricted Net Assets       3,750.00         3200 — Retained Earnings       -217,526.66         Net Income       82,079.61         Total Equity       305,260.90	Total 2100 — Payroll Liabilities	6,348.68
Total Other Current Liabilities32,990.18Total Current Liabilities44,794.44Total Liabilities44,794.44Total Liabilities44,794.44Equity3000 Opening Balance Equity3100 Temp.Restricted Net Assets3,750.003200 Retained Earnings-217,526.65Net Income82,079.61Total Equity305,260.90	2410 — Deferred Revenue - Ren	
Total Current Liabilities       44,794.44         Total Liabilities       44,794.44         Equity       3000 Opening Balance Equity       436,957.96         3100 Temp.Restricted Net Assets       3,750.00         3200 Retained Earnings       -217,526.65         Net Income       82,079.61         Total Equity       305,260.90	Total 2400 — Deferred Revenue	26,641.50
Total Liabilities       44,794.44         Equity       3000 — Opening Balance Equity       436,957.98         3100 — Temp.Restricted Net Assets       3,750.00         3200 — Retained Earnings       -217,526.69         Net Income       82,079.61         Total Equity       305,260.90	Total Other Current Liabilities	32,990.18
Equity         436,957.96           3000 — Opening Balance Equity         436,957.96           3100 — Temp.Restricted Net Assets         3,750.00           3200 — Retained Earnings         -217,526.69           Net Income         82,079.61           Total Equity         305,260.90	Total Current Liabilities	44,794.44
3000 — Opening Balance Equity         436,957.98           3100 — Temp.Restricted Net Assets         3,750.00           3200 — Retained Earnings         -217,526.69           Net Income         82,079.61           Total Equity         305,260.90	Total Liabilities	44,794.44
otal Equity 305,260.90	Equity 3000 — Opening Balance Equity 3100 — Temp.Restricted Net Assets 3200 — Retained Earnings Net Income	436,957 .98 3,750 .00 -217,526 .69 82,079 .61
	Total Equity —	305,260.90
		350,055.34

## 11:47 AM 07/07/14 Accrual Basis

## Clifton Cultural Center, Inc Profit and Loss Standard June 2014

	Jun '14
Ordinary Income/Expense Income 4100 — Contributed Revenue 4110 — Grants-Foundation-Civic 4130 — Corporate Sponsorship 4140 — Membership 4160 — Donations	500.00 5,750.00 805.00 89.00
Total 4100 — Contributed Revenue	7,144.00
4200 — Earned Revenue 4210 — Lease Revenue 4220 — Rental Revenue 4230 — Ticket Sales-Programmi 4235 — Ticket Fees Revenue 4240 — Event Sales - TOFA 4250 — Merchandise/Beverage 4270 — Interest earned	5,150.00 4,240.00 -1,181.00 69.00 19,088.01 20.00 0.06
Total 4200 — Earned Revenue	27,386.07
Total Income	34,530.07
Expense 6000 — Program Expenses 6005 — Artist Fees 6015 — Beverage Expense 6020 — Box Office Fees 6025 — Sound / Light / Support 6035 — Hospitality 6045 — License / Fees 6055 — Publicity 6098 — Taste Expenses	1,635.00 -60.00 814.58 116.60 120.46 160.64 2,168.60 5,097.19
Total 6000 — Program Expenses	10,053.07
6100 — General Expenses 6101 — Accounting Fees 6105 — Banking / Interest Expen 6120 — Fundraising Expense 6125 — Insurance 6130 — Marketing/Website 6140 — Lease Payments 6145 — Office Supplies 6155 — Telephone 6160 — Travel	188.00 158.07 78.00 763.00 637.68 1,597.83 1,063.63 124.95 26.21
Total 6100 — General Expenses	4,637.37
6300 — Operating Expenses	

6300 — Operating Expenses

## 11:47 AM 07/07/14 Accrual Basis

## Clifton Cultural Center, Inc Profit and Loss Standard June 2014

	Jun '14
6310 — Utilities	2,860.69
6320 — Maintenance & Repairs 6321 — M & R Parts 6322 — M & R Labor	337.90 456.00
Total 6320 — Maintenance & Re	793.90
Total 6300 — Operating Expenses	3,654.59
6500 — Compensation 6520 — Payroll Taxes 6540 — Employee Compensation 6560 — Retirement 6570 — Employee Health Insura	1,559.39 19,910.96 543.56 823.51
Total 6500 — Compensation	22,837.42
6800 — Expense of Rentals 6810 — Sound / Light Tech Fees	600.00
Total 6800 — Expense of Rentals	600.00
Total Expense	41,782.45
Net Ordinary Income	-7,252.38
Net Income	-7,252.38

## Ethridge, Kyle

From:	Kristen Tidwell <ktidwell@cliftoncenter.org></ktidwell@cliftoncenter.org>
Sent:	Monday, July 14, 2014 1:24 PM
To: Subject: Attachments:	Ethridge, Kyle Clifton Center - Attachments 2 Form 990 - July 2012 - June 2013 - Clifton Ctr.pdf; Form 990 - July 2013 - September 2013 - Clifton Ctr.pdf

## Kyle-

Attached is the Clifton Center's Most Recent Form(s) 990 - Please note that last year, the Clifton Center changed the start of its fiscal year to October 1 from July 1. I have attached the two 990's that the Center most recently submitted. One is the 12-month period July 2012-June 2013 and one is the 3-month period July 2013-September 2013.

Thanks,

-Kristen

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Kristen Tidwell Development Director (502) 896-8480, ext. 303 <u>ktidwell@cliftoncenter.org</u> <u>www.cliftoncenter.org</u> <u>facebook.com/TheCliftonCenter</u>

000	Return
Form <b>990</b>	Under sectio

Department of the Treasury

CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)



Inter	nal Rev	enue Service The organization may have to use a copy of this return to satisfy state	reporting requirements.	Inspection			
A For the 2012 calendar year, or tax year beginning JUL 1, $2013$ and ending SEP 30, $2013$							
В	Check i applical	C Name of organization D Employer identification number					
	Addr	P   CLIFTON CULTURAL CENTER, INC.					
	Nam chan	pe Doing Business As	61-12	270383			
	Initia retur	Number and street (or P.O. box if mail is not delivered to street address) Room/suite					
	ated	2117 FRINE SIRGET		396-8480			
Ļ	Ame retur	City, town, or post office, state, and ZIP code	G Gross receipts \$	152,099.			
L	Appl tion pend		H(a) Is this a group re	turn			
		F Name and address of principal officer: JOHN HARRIS	for affiliates?				
1	Tax-ex	empt status: X 501(c)(3) 501(c) ( )◀ (insert no.) 4947(a)(1) or 527	H(b) Are all affiliates incl	ist. (see instructions)			
		te: ► WWW.CLIFTONCENTER.ORG	H(c) Group exemption				
				State of legal domicile: KY			
Pa	art I	Summary					
ė	1	Briefly describe the organization's mission or most significant activities: TO PROVIDE					
Governance		HILL AND GREATER LOUISVILLE WITH A QUALITY FAC					
ern	2	Check this box 🕨 🛄 if the organization discontinued its operations or disposed of more	e than 25% of its net as				
Š	3	Number of voting members of the governing body (Part VI, line 1a)		20			
<u>م</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	20			
Activities &	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	0			
tivit	6	Total number of volunteers (estimate if necessary)		200			
Aci	7a	Total unrelated business revenue from Part VIII, column (C), line 12		0.			
	b	Net unrelated business taxable income from Form 990-T, line 34		0.			
			Prior Year	Current Year			
Jue	8	Contributions and grants (Part VIII, line 1h)	203,823.	129,300.			
Revenue	9	Program service revenue (Part VIII, line 2g)	240,357.	22,793.			
Ве	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	30,707.	6.			
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	474,923.	0.			
	13	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)         Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4/4,923.	152,099.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.			
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	180,100.	66,321.			
Ise		Professional fundraising fees (Part IX, column (A), line 11e)	0.	00,521.			
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) ► 9,980.		<b>v</b> .			
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	314,755.	87,749.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	494,855.	154,070.			
	19	Revenue less expenses. Subtract line 18 from line 12	<19,932.>	<1,971.			
s or			ginning of Current Year	End of Year			
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	325,235.	452,704.			
	21	Total liabilities (Part X, line 26)	4,561.	150,673.			
Ž	22	Net assets or fund balances. Subtract line 21 from line 20	320,674.	302,031.			
	rt II	Signature Block					
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and statem		knowledge and belief, it is			
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which preparer	has any knowledge.				

Sign Here	Signature of officer JOHN HARRIS, EXECUTIVE Type or print name and title	DIRECTOR		Date		
Dalid	Print/Type preparer's name	Preparer's signature	Date	Check PTIN		
Paid	BARBARA A. LASKY			self-employed <b>P00015280</b>		
Preparer	Firm's name 💊 ANDERSON, BRYAN'I	,, ,	PSC	Firm's EIN <b>61-1227965</b>		
Use Only	Firm's address > 943 SOUTH FIRST					
	LOUISVILLE, KY 4	0203		Phone no. (502)584-9793		
May the IF	RS discuss this return with the preparer shown abo	ove? (see instructions)		X Yes No		
232001 12-1	32001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2012)					

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	n 990 (2012) CLIFTON CULTURAL CENTER, INC. 61-1270383 F rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: THE CLIFTON CENTER IS AN HISTORIC FACILITY THAT SERVES AS A GATHERING
	PLACE FOR ART, CULTURE AND IDEAS THAT ENRICH OUR COMMUNITY.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?Yes U If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
<b>4</b> a	(Code:) (Expenses \$133,838.including grants of \$) (Revenue \$22,79THECLIFTONCULTURALCENTER,INC. IS AN HISTORICFORMERSCHOOLBUILDINLOUISVILLE,KENTUCKYTHATNOWSERVESAS APERFORMANCE,MEETING, ANCONFERENCECENTER.LOCATEDINTHEHEARTOFTHEFRANKFORTAVENUEBUSINESSDISTRICT,THEFACILITYHOSTSAVARIETYOFARTSANDCULTURALEVENTS,ASWELLASWEDDINGS,CONFERENCES,ANDBUSINESSANDCIVICMEETINGS.THECLIFTONCENTERISALSOHOMETOSEVERALNON-PROFITORGANIZATIONS,ARTISTS,ANDDANCERS,WHOLEASESPACEINTHEBUILDING.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses > 133,838.
32002	
2-10-	3
	<b>.</b>

Form	990	(2012)
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CLIFTON CULTURAL CENTER, INC. Part IV Checklist of Required Schedules

			Yes	No
1.	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," 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 tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
Ŭ	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			1
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes, " complete			
	Schedule D, Part III	8		X
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?	9		x
	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
44	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
11	as applicable.			
-	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	. 1.40.000000	000022302	
a	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 of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
		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	4.41-		v
	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 assistance to any organization	45		x
40	or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		<u> </u>
16	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		<u> </u>
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
10	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? <i>If</i> "Yes,"			1
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2012)

Form 990 (2012)	CLIFTON	CULTURAL	CENTER,	INC.
Part IV Checklist of F	lequired Sch	edules (continue	d)	

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on 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 organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		x
<b>2</b> 4a		24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		[
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit 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 prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			v
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			v
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	20C		X
29 30	Did the organization receive more than \$25,000 in non-cash communities? If thes, complete schedule in Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	<u>29</u> 30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	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 Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	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
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0.5		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	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			
•-	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	x	

Form 990 (2012)

Form	1990 (2012) CLIFTON CULTURAL CENTER, INC.	61-127	0383	<b>у</b> Р	Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a (	)	l i	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		ז		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and r		-		
-	(gambling) winnings to prize winners?		1c		4266660
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 (	h		
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returned		- ARCHERINGER		
0			2b		
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions	/			X
	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		<u>3b</u>		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	<u>4a</u>		X
a	If "Yes," enter the name of the foreign country:	-			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		<u>5b</u>		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	any contributions that were not tax deductible as charitable contributions?		<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut				
	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 ser	vices provided to the payor?	7a		X
			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?		7c		Х
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 c	ontract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di	d the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a	1000-0404040404	Abibibibibibibibibibibibibibibibibibibi
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
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	1		
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a			
	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		12a	193333333	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>			
	Is the organization licensed to issue qualified health plans in more than one state?		13a	ංගයාසාවන්නිම	apasiki(625
ŭ	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.				
h	Enter the amount of reserves the organization is required to maintain by the states in which the				
5	organization is licensed to issue qualified health plans	136			
~	Enter the amount of reserves on hand	13b 13c			
	Did the experimetion receive only necessary for independencing equations that the two of 0		4.4-		X
		$\sim$	14a		
<u>u</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	, 0	14b	<u> </u>	

Form **990** (2012)

Form	990	(201	2)

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 Form 990 (2012)
 CLIFTON
 CULTURAL
 CENTER,
 INC.
 61–1270383
 Page

 Part VI
 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 in Schedule O. See instructions.

## Check if Schedule O contains a response to any question in this Part VI

X

Sec	tion A. Governing Body and Management			
			Yes	No
1a		<u>0</u>		
	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 in Schedule O.			
		의		
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?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			Í
_	of officers, directors, or trustees, or key employees to a management company or other person?			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			X
6	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?	<u>7a</u>		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
_	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	<u>8a</u>	X	
	Each committee with authority to act on behalf of the governing body?	<u>8b</u>		X
9	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 in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
40-			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
D	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	v	,
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		v	
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	X	v
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
С	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
13	Did the organization have a written whistleblower policy?			X
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	*****
b	Other officers or key employees of the organization	15b		X
	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?	16a		Х
b	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?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ KY			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar		مادا	
13		ia tinan	cial	
20	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza		·	
232006	2117 PAYNE ST, LOUISVILLE, KY 40206			
12-10-1	12	Form	<b>990</b> (	2012)

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C.		CULTURAL	CENTER	TNC
<u> </u>	DILION	CODIONAD	CENTER,	TTAC •

Form 990 (2012)

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

Check if Schedule O contains a response to any question 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A)	(B)	T	(C)		(D)	(E)	(F)			
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per		box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week (list any	for	Γ			Τ	T İ	from the	from related organizations	other compensation
	hours for	r direc				ed			(W-2/1099-MISC)	from the
	related	stee o	rustee			ensat		(W-2/1099-MISC)		organization
	organizations	Jal tru	onal t		ployee	com				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer			organizations
(1) MARK ROUNTREE	2.00	<u> </u>		<u> </u>	×	1 0	<u> </u>			
VICE-PRESIDENT		x		х				0.	0.	0.
(2) ANN Y. ADAMS	2.00									
CHAIR		X		X				0.	Ο.	0.
(3) TIM HEINE	2.00									
SECRETARY		X		Х				0.	0.	0.
(4) SUSAN LAWLER	2.00									
TREASURER		Х		Х				0.	0.	0.
(5) ROBERT ADAMS	1.00									
BOARD MEMBER		X						0.	0.	0.
(6) RANDY BLEVINS	1.00									
BOARD MEMBER		X						0.	0.	0.
(7) LAURIE DOBBINS	1.00									
BOARD MEMBER		X						0.	0.	0.
(8) DON BURCH	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) MARK CARROLL	1.00									
BOARD MEMBER	1 00	X						0.	0.	0.
(10) BILL CHEATHAM	1.00									-
BOARD MEMBER	1 00	X						0.	0.	0.
(11) GERRI COMBS	1.00	77								•
BOARD MEMBER (12) MARY MICHAEL CORBETT	1.00	X						0.	0.	0.
BOARD MEMBER	1.00	x						0.	ο.	0.
(13) REV. JOHN G. EIFLER	1.00								<b>U</b> •	0.
BOARD MEMBER		x						ο.	ο.	0.
(14) ALI HAWTHORNE	1.00								<u></u>	••
BOARD MEMBER		х						ο.	ο.	0.
(15) DEBRA M. MURPHY	1.00									
BOARD MEMBER		х						ο.	0.	0.
(16) CONOR O'DRISCOLL	1.00									
BOARD MEMBER		x						0.	Ο.	0.
(17) DOUGLAS H. OWEN III	1.00									
BOARD MEMBER		х	_					Ο.	0.	0.
232007 12-10-12	-					。				Form <b>990</b> (2012)

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Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	/ees,	and	d Hi	ghe	st C	Compensated Employe	es (continued)	
(A) Name and title	(B) Average hours per week (list any hours for related organizations	tee or director igo q	not cr , unlest cer an	as pei d a di	ition more rson i irecto	than is bot	h an tee)	(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
	below line)	lividua	stitution	Officer	Key employee	ghest c	Former			organizations
(18) ASHLEY S. PARKER	1.00	- L L	th st	<del>10</del>	ke	j, e	Ē		· · · · · · · · · · · · · · · · · · ·	
BOARD MEMBER		x						0.	0.	0.
(19) PATRICK T. SCHMIDT	1.00								· · · · · · · · · · · · · · · · · · ·	
BOARD MEMBER		X						0.	0.	0.
(20) DEBBI WIEBE-KAMBER	1.00	.,						•	0	0
BOARD MEMBER (21) JOHN HARRIS	40.00	X						0.	0.	0.
EXECUTIVE DIRECTOR	40.00			x				0.	0.	0.
		]								
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part V								0.	0.	0.
<ul> <li>d Total (add lines 1b and 1c)</li> <li>2 Total number of individuals (including but</li> </ul>								<u> </u>		
compensation from the organization		1000	1010	u u.		<i>.,</i>	10 11			0
••••••••••••••••••••••••••••••••••••••										Yes No
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for								highest compensated e		з Х
4 For any individual listed on line 1a, is the s										
and related organizations greater than \$1										_4 X
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," col					•		elat	ed organization or indiv	idual for services	5 X
Section B. Independent Contractors	npiele Schedui	eji	UI SU		Ders	<u>.</u>				5 1
1 Complete this table for your five highest c	ompensated in	depe	ende	nt c	ontr	racto	ors t	hat received more than	\$100,000 of compens	ation from
the organization. Report compensation fo	r the calendar y	ear	endir	ng w	vith	or w	ithir	n the organization's tax	year.	
(A) Name and busines	s address	<b>NT</b> /	ANTE	7				(B) Description of s	envices	(C) compensation
		INC	ONE	<u>د</u>				Description of s		
	// <b>, , , , , , , ,</b>									
2 Total number of independent contractors \$100,000 of compensation from the organ		ot li	miteo	a to		se lis D	sted	above) who received in		
232008 12-10-12										Form <b>990</b> (2012)

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- orm 990 (2012		CULTURAL	CENTER,	INC.	61-1270383	Page <b>9</b>
Part VIII	Statement of Revenue					

		Check if Schedule O contains a		ny queene	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b	Federated campaigns			-			
Am C	c	Fundraising events	1c		1			
lar Gift	d	Related organizations						
ini's	e	Government grants (contributions)	1e		]			
er S	f	All other contributions, gifts, grants, and						
Ę		similar amounts not included above	1f 12	9,300.				
d di	g	Noncash contributions included in lines 1a-1f: \$						
<u>a</u> O	h	Total. Add lines 1a-1f			129,300	•		
Program Service Revenue	2a b c d		NCOM 5	siness Code	22,793	22,793.		
D,	_	All other program service revenue						
		Total. Add lines 2a-2f			22,793.			l
	3	Investment income (including divider						
		other similar amounts)			6.	,		6.
	4	Income from investment of tax-exem						
	5	Royalties		►				
				Personal				
	6 a	Gross rents						
	b	Less; rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)		<b>&gt;</b>				
	7 a	Gross amount from sales of (i) Se	ecurities (	ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)						
		Net gain or (loss)		🕨				
e	8 a	Gross income from fundraising event	s (not					
venue			of					
ō l		contributions reported on line 1c). Se						
Other R	_	Part IV, line 18						
Ē		Less: direct expenses						
		Net income or (loss) from fundraising		<u></u>				
	9 а	Gross income from gaming activities.						
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gaming act		<b>&gt;</b>				
	iu a	Gross sales of inventory, less returns						
	ь	and allowances Less: cost of goods sold	a					
		Net income or (loss) from sales of inv		<b>&gt;</b>				
ŀ	<u> </u>	Miscellaneous Revenue		ness Code				
ŀ	11 a							
	b							
	c							
	ď	All other revenue						
	e	Total. Add lines 11a-11d	····· <u>L</u>	►				
	12	Total revenue. See instructions.	••••••	····· •	152,099.	22,793.	0.	6.
232009 12-10-								Form <b>990</b> (2012)

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## CLIFTON CULTURAL CENTER, INC.

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).

Sect	on 501(c)(3) and 501(c)(4) organizations must com	olete all columns. All oth	er organizations must co	omplete column (A).	
	Check if Schedule O contains a respon		is Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	11,299.	8,738.	1,506.	1,055.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	44,120.	34,118.	5,881.	4,121.
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	6,266.	4,846.	835.	585.
10	Payroll taxes	4,636.	3,585.	618.	433.
11	Fees for services (non-employees):				
а	Management				
	Legal				
	Accounting	275.		275.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
q					
Ū	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	1,667.	1,667.		
13	Office expenses	1,000.	774.	133.	93.
14	Information technology				
15	Royalties				
16	Occupancy	21,742.	21,549.	145.	48.
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	43.		43.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,287.	9,204.	62.	21.
23	Insurance	3,708.	2,868.	494.	346.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	PROGRAM EXPENSES	38,505.	38,505.		•
b	REPAIRS & MAINTENACE	3,335.	3,306.	22.	7.
c	RENTAL EXPENSES	3,309.	3,309.		
d	FUND DEVELOPMENT	3,104.			3,104.
	All other expenses	1,774.	1,369.	238.	167.
25	Total functional expenses. Add lines 1 through 24e	154,070.	133,838.	10,252.	9,980.
26	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 Check here Check here Check here Check here				
					- 000 (00.00)

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Form 990 (2012)

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# Check if Schedule O contains a response to any question in this Part X

					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			48,835.	1	28,570.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		3	80,000.		
	4	Accounts receivable, net			4	1,341.	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensation	ated er	nployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	fied pe	rsons (as defined under			
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect	ion 50	1(c)(9) voluntary			
		employees' beneficiary organizations (see instr).		6			
Assets	7	Notes and loans receivable, net				7	
Ass	8	Inventories for sale or use				8	
•	9					9	13,775.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	920,853.			
	b	Less: accumulated depreciation	591,835.	276,400.	10c	329,018.	
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa	325,235.	16	452,704.		
	17	Accounts payable and accrued expenses	4,561.	17	92,785.		
	18	Grants payable				18	
	19	Deferred revenue				19	57,888.
	20	Tax-exempt bond liabilities				20	
ies	21	Escrow or custodial account liability. Complete I				21	
oiliti	22	Loans and other payables to current and former					
Liabilities		key employees, highest compensated employee Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated	d third	parties		24	
	25	Other liabilities (including federal income tax, page	yables	to related third			
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			4,561.	26	150,673.
		Organizations that follow SFAS 117 (ASC 958		k here 🕨 🖾 and			
ses		complete lines 27 through 29, and lines 33 an			200 664		
ano	27	Unrestricted net assets			302,664.	27	219,271.
Bal	28	Temporarily restricted net assets			18,010.	28	82,760.
pur	29	Permanently restricted net assets		29			
r Fu		Organizations that do not follow SFAS 117 (A	SC 958	3), check here 🕨 📖			
S 0	~~	and complete lines 30 through 34.					
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30			
t As	31	Paid-in or capital surplus, or land, building, or eq		31			
Net	32	Retained earnings, endowment, accumulated in			320,674.	32	302 021
_	33				325,235.	33	<u>302,031.</u> 452,704.
	34	Total liabilities and net assets/fund balances			545,455.	34	Form <b>990</b> (2012)

Form 990 (2012)
Part X Balance Sheet

Form	990 (2012) CLIFTON CULTURAL CENTER, INC.	61-12	70383	Page 12
Pa	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,099.
2	Total expenses (must equal Part IX, column (A), line 25)	2		,070.
3	Revenue less expenses. Subtract line 2 from line 1	3		.,971.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	320	,674.
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	<16	,672.>
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	302	,031.
Pa	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			<u>x</u>
	<b></b>			Yes No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a		
	separate basis, consolidated basis, or both:			
	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 separat	e basis,		
	consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,		
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	<u>x</u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit		
	Act and OMB Circular A-133?		. <u>3a</u>	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	

Form **990** (2012)

SCHEDULE A	
(Form 990 or 990-EZ	)

Department of the Treasury

Internal Revenue Service

# **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.

2012 Open to Public Inspection

OMB No. 1545-0047

Name	of the	organ	nizatior

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

	the organizat		I CULTURAL CE	INTER,	INC.					51-1270		
Part I	Reason	for Public Cha	rity Status (All organiz	zations mu	ist comple	te this pai	t.) See ins	tructions.				
The orgar	ization is not a	a private foundation	because it is: (For lines	1 through	11, check	only one	box.)					
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)											
3	A hospital or a cooperative hospital service organization described in section 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	An organizat	ion operated for the	benefit of a college or u	niversity o	wned or o	perated b	y a govern	mental ur	it descrit	ped in		
	section 170	(b)(1)(A)(iv). (Compl	ete Part II.)									
6	A federal, sta	ate, or local governm	nent or governmental uni	t describe	d in <b>sectio</b>	n 170(b)(	1)(A)(v).					
7 📖	An organizat	ion that normally rec	ceives a substantial part	of its supp	oort from a	governm	ental unit d	or from the	e general	public desc	ribed i	in
·	section 170(	( <b>b)(1)(A)(vi).</b> (Comple	ete Part II.)									
8	A community	/ trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 X	An organizati	ion that normally rec	eives: (1) more than 33 <sup>-</sup>	1/3% of its	s support f	rom contr	ibutions, r	nembersh	ip fees, a	and gross re	ceipts	from
	activities rela	ited to its exempt fu	nctions - subject to certa	ain excepti	ions, and (	2) no mor	e than 33 <sup>-</sup>	1/3% of it	s suppor	t from gross	invest	ment
	income and u	unrelated business t	axable income (less sect	tion 511 ta	ax) from bu	sinesses	acquired b	by the org	anization	after June 3	80, 197	′5.
<b></b>	See section	509(a)(2). (Complete	e Part III.)									
10	An organizati	ion organized and o	perated exclusively to te	st for publ	lic safety.	See <b>secti</b> o	on 509(a)(4	4).				
11	An organizati	ion organized and o	perated exclusively for the	ne benefit	of, to perfe	orm the fu	nctions of	, or to car	y out the	e purposes c	of one of	or
	more publicly	/ supported organiza	ations described in secti	on 509(a)(	1) or section	on 509(a)(	2). See <b>se</b> e	ction 509	( <b>a)(3).</b> Ch	eck the box	that	
	describes the	e type of supporting	organization and compl	ete lines 1	1e through	n 11h.						
	a 🛄 Type I	I <b>b</b> ∟l⊤:	ypell <b>c</b> T	ype III - Fu	nctionally	integrated	l (	а 📖 Тур	e III - No	n-functional	y integ	grated
e	By checking	this box, I certify tha	at the organization is not	controllec	directly o	r indirectly	y by one o	r more dis	qualified	persons oth	er tha	n
	foundation m	anagers and other t	han one or more publicly	y supporte	ed organiza	ations des	cribed in s	section 50	9(a)(1) or	section 509	(a)(2).	
f	If the organiz	ation received a writ	tten determination from t	the IRS tha	at it is a Ty	ре I, Туре	ll, or Type	e III				
	supporting or	rganization, check tł	his box									
g	Since August	t 17, 2006, has the c	organization accepted ar	ny gift or c	ontributior	from any	of the foll	owing per	sons?			
	(i) A perso	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons of	described	in (ii) and	(iii) below	', <u> </u>	Yes	No
	the governing body of the supported organization?											
	(ii) A family member of a person described in (i) above?											
	(iii) A 35% controlled entity of a person described in (i) or (ii) above?											
h Provide the following information about the supported organization(s).												
(i) Name of supported (ii) EIN (iii) Type of organization (iv) Is th					organization		u notify the	(vi)	the	(vii) Amount	of mon	etarv
organization		(described on mes 1-9 in co. (f) isted in your organization in coi. (i) organ						organizáti (i) organiz	ed in the l	sup		
above or IRC section governing document? (i) of your support?						U.S	.?					
				Yes	No	Yes	No	Yes	No			

		Yes	No	Yes	No	Yes	No	
	····							
Total								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

# Schedule A (Form 990 or 990-EZ) 2012 Part II Support Schedule for

## Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(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.)

See	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")								
2	Tax revenues levied for the organ-								
	ization'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	Total. Add lines 1 through 3								
5	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)								
6	Public support. Subtract line 5 from line 4.								
	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
7	Amounts from line 4								
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar sources								
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part IV.)	l							
11	Total support. Add lines 7 through 10								
12		, etc. (see instructi	ons)			12			
13	First five years. If the Form 990 is fo					n 501(c)(3)			
	organization, check this box and sto	p here					<b>&gt;</b>		
See	ction C. Computation of Pub	ic Support Pe	rcentage						
14	4 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))								
15	Public support percentage from 201		15 %						
16a	33 1/3% support test - 2012. If the	organization did nc	ot check the box o	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	and		
	stop here. The organization qualifies	as a publicly supp	orted organizatior	۱					
b	33 1/3% support test - 2011. If the	organization did no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	or more, check thi	s box		
	and stop here. The organization qua	lifies as a publicly :	supported organiz	ation			▶∟_		
17a	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10% o	or more,		
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization								
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
b	10% -facts-and-circumstances tes	<b>t - 2011.</b> If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is 1	0% or		
	more, and if the organization meets t	he "facts-and-circu	imstances" test, c	heck this box and	stop here. Explair	in Part IV how the			
	organization meets the "facts-and-cir	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization			
18	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								

Schedule A (Form 990 or 990-EZ) 2012

232022 12-04-12

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## Schedule A (Form 990 or 990 EZ) 2012 CLIFTON CULTURAL CENTER, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.)

ction A. Public Support						
ndar year (or fiscal year beginning in) 🕨	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")	9,335.	9,215.	100,150.	203,823.	129,300.	451,823.
merchandise sold or services per- formed, or facilities furnished in any activity that is related to the	155 717	153 959.	230 482	261 921	22 793	824,872.
	100,717.	100,000.	250,402.	201,921.	22,155.	024,072.
are not an unrelated trade or bus-	13 866	40 225	23 701	16 801		124,593.
	45,000.	40,223.	23,701.	10,001.		124,393.
ization's benefit and either paid to or expended on its behalf						
furnished by a governmental unit to						
• • • • • • • • • • • • • • • • • • • •	208,918.	203,399.	354,333.	482,545.	152,093.	1,401,288.
_	· · · · · · · · · · · · · · · · · · ·		•			
3 received from disqualified persons						0.
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0.
						0.
						1,401,288.
ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Amounts from line 6	208,918.	203,399.	354,333.	482,545.	152,093.	1,401,288.
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,043.	586.	107.	36.	6.	1,778.
Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
Net income from unrelated business activities not included in line 10b, whether or not the business is	1,043.	586.	107.	36.	6.	1,778.
Other income. Do not include gain or loss from the sale of capital						
Total support. (Add lines 9, 10c, 11, and 12.)					152,099.	1,403,066.
First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3) organiza	ation,
						<b>&gt;</b>
		¥			······	
			olumn (f))			99.87 %
				,	16	%
·····			40 1 (0)			.13 %
• •				•		%
	-					
	-					· · · · · · · · · · · · · · · · · · ·
			•		•	·····
	and not oncontal		., <u>.</u>			
	include any "unusual grants.") Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or bus- iness under section 513 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge <b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons 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 7 a and 7b <b>Public support</b> (Subtractline 7c from line 6) Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated businesss activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) <b>First five years.</b> If the Form 990 is for check this box and stop here <b>tion C. Computation of Publi</b> Public support percentage for 2012 (I Public support percentage for 2011. <b>tion D. Computation of Invest</b> Investment income percentage for 2012. Investment income percentage for 2012. Investment income percentage for 2014. Here in 33 1/3%, support tests - 2011. If the line 18 is not more than 33 1/3%, cheel	indar year (or fiscal year beginning in)       (a) 2008         Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")       9, 335.         Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or bus- iness under section 513       155, 717.         Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf       43, 866.         The value of services or facilities furnished by a governmental unit to the organization without charge       208, 918.         Amounts included on lines 1, 2, and 3 received from disqualified persons amount on line 13 for the year       2008, 918.         Add lines 7 a and 7b       (a) 2008         Public support (Subtractline 7c from line 5.)       208, 918.         Cross income from interest, dividends, payments received on securities loans, rents, royaities and income from interest, dividends, payments received on securities loans, rents, royaities activities not included in line 10b, whether or not the businesses activities not included in line 10b, whether orn ot the businesses activities not included in line 10b, whether orn ot the corganization is check this box and stop here       209, 961.         First five years. If the Form 90 is for the organization's check this box and stop here       209, 961.         First five years. If the Form 90 is for the organization is check this box and stop here. The 33 1/3% support tests - 2012. (line 8, colum	Indar year (or fiscal year beginning in)       (a) 2008       (b) 2009         Gifts, grants, contributions, and       9, 335.       9, 215.         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       155, 717.       153, 959.         Gross receipts from activities that are not an unrelated trade or business under section 513       43, 866.       40, 225.         Tax revenues levied for the organization's tax exempt purpose       208, 918.       203, 399.         The value of services or facilities furnished by a governmental unit to the organization without charge       208, 918.       203, 399.         Amounts included on lines 1, 2, and 3 received from disqualified persons       208, 918.       203, 399.         Amounts included on lines 2 and 3 received from the than disqualified persons that exceed the grain for 10 he than another than disqualified persons that exceed the grain for 10 he that another than disqualified persons that exceed the grain for the year       208, 918.       203, 399.         Add lines 7a and 7b       208, 918.       203, 399.       203, 399.         Public support (dutactine r from initiar sources unrities on include gain or other businesses activities not include gain or other businesses acquired after June 30, 1975       1, 043.       586.         Add lines 10a and 10b       1, 043.       586.       1, 043.       586.	ndar year (or fiscal year beginning in)       (a) 2008       (b) 2009       (c) 2010         Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")       9, 335.       9, 215.       100, 150.         Gross receipts from admissions, merchandies odlo or services per- formed, or facilities fumished in any activity that is related to the organization's tax exempt purpose Gross receipts from activities that are not an unrelated trade or bus- iness under section 513       155, 717.       153, 959.       230, 482.         Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf       208, 918.       203, 399.       354, 333.         The value of services or facilities furnished by a governmental unit to the organization without charge       208, 918.       203, 399.       354, 333.         Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts from is 10 the period and income from similar sources and income from unrelated business is regularly carried on Other incoulded in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).       1, 043.       586.       107.         First if years, if the Form 990 is for the organization unit of how the sale of capital assets (Explain in Part IV).       209, 961.       203, 985. <td>and ar year (or fiscal year beginning in)       (a) 2008       (b) 2009       (c) 2010       (d) 2011         Gifts, grants, contributions, and membership besisters, contributions, and membership besisters, contributions, and participarts.")       9, 335.       9, 215.       100, 150.       203, 823.         Cross receipts from activities that are not an unrelated trade or business und resortion 513       9, 335.       9, 215.       100, 150.       203, 823.         Gross receipts from activities that are not an unrelated trade or business und resortion 513       43, 866.       40, 225.       23, 701.       16, 801.         Tax revenues levied for the organization without charge       208, 918.       203, 399.       354, 333.       482, 545.         Anomuts finculated on lines 2, and revenued from disqualified persons hat second from disqualified persons hat second from lines 2 and revenued to a stop or the disqualified persons hat second from lines 2 and revenued to a stop or the disqualified persons hat second from lines 3 and revenued to stop or the disqualified persons hat second from lines 3 and revenued to stop or the disqualified persons hat second /td> <td>andr yer (or fitsel yer heganing in) →       (a) 2006       (b) 2009       (c) 2010       (d) 2011       (e) 2012         Gifts, grants, contributions, and membership less reactived. (Do not include any 'unusual grants.')       (g) 335.       9, 215.       100, 150.       203, 823.       129, 300.         Gross receipts from admissions, merchandles sold or services performed, or facilities functions that any activity that is related to the organization's have were prepared to the intervention perform.       155, 717.       153, 959.       230, 482.       261, 921.       22, 793.         Gross receipts from admissions, merchandles sold or services or facilities function and the paid to or expended on this behall       155, 717.       153, 959.       230, 482.       261, 921.       22, 793.         Tax revenues level form disqualified persons       43, 866.       40, 225.       23, 701.       16, 801.       155.         Tax revenues level form disqualified persons       208, 918.       203, 399.       354, 333.       482, 545.       152, 093.         Anounts include do nine 1.2, and 3       208, 918.       203, 399.       354, 333.       482, 545.       152, 093.         Addimer 3 and areating the preventext, divided any set of the preventext, divided an</td>	and ar year (or fiscal year beginning in)       (a) 2008       (b) 2009       (c) 2010       (d) 2011         Gifts, grants, contributions, and membership besisters, contributions, and membership besisters, contributions, and participarts.")       9, 335.       9, 215.       100, 150.       203, 823.         Cross receipts from activities that are not an unrelated trade or business und resortion 513       9, 335.       9, 215.       100, 150.       203, 823.         Gross receipts from activities that are not an unrelated trade or business und resortion 513       43, 866.       40, 225.       23, 701.       16, 801.         Tax revenues levied for the organization without charge       208, 918.       203, 399.       354, 333.       482, 545.         Anomuts finculated on lines 2, and revenued from disqualified persons hat second from disqualified persons hat second from lines 2 and revenued to a stop or the disqualified persons hat second from lines 2 and revenued to a stop or the disqualified persons hat second from lines 3 and revenued to stop or the disqualified persons hat second from lines 3 and revenued to stop or the disqualified persons hat second	andr yer (or fitsel yer heganing in) →       (a) 2006       (b) 2009       (c) 2010       (d) 2011       (e) 2012         Gifts, grants, contributions, and membership less reactived. (Do not include any 'unusual grants.')       (g) 335.       9, 215.       100, 150.       203, 823.       129, 300.         Gross receipts from admissions, merchandles sold or services performed, or facilities functions that any activity that is related to the organization's have were prepared to the intervention perform.       155, 717.       153, 959.       230, 482.       261, 921.       22, 793.         Gross receipts from admissions, merchandles sold or services or facilities function and the paid to or expended on this behall       155, 717.       153, 959.       230, 482.       261, 921.       22, 793.         Tax revenues level form disqualified persons       43, 866.       40, 225.       23, 701.       16, 801.       155.         Tax revenues level form disqualified persons       208, 918.       203, 399.       354, 333.       482, 545.       152, 093.         Anounts include do nine 1.2, and 3       208, 918.       203, 399.       354, 333.       482, 545.       152, 093.         Addimer 3 and areating the preventext, divided any set of the preventext, divided an

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Schedule A	. (Form 990 oi	<sup>-</sup> 990-EZ) 2	2012 CLIF	TON C	ULTURAI	L CEN	TER,	INC	•		61-1	L270	383 Page 4
Part IV	Supplem	ental In	formation.	Complete	this part to	orovide tl	ne explai	nations r	equired by	v Part II, lin	e 10; Part	II, line	17a or 17b;
	and Part III,	line 12. A	lso complete t	his part fo	r any additio	nal inform	nation. (S	See instru	uctions).				
2012 -	SHORT	YEAR	RETURN	DUE '	FO CHAN	IGE I	N FI	SCAL	YEAR	FROM	JUNE	30	то
SEPTEM	IBER 30												
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232024 12-04-1	12					1	.7			Schedul	e A (Form	990 or	990-EZ) 2012

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#### Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service

## Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Name of the organizat	ion	Employer identification number
	CLIFTON CULTURAL CENTER, INC.	61-1270383
Organization type (che	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

🔀 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

#### **Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

#### Name of organization

Page **2** Employer identification number

61-1270383

#### CLIFTON CULTURAL CENTER, INC.

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

1     ST. FRANCES OF ROME     Person     Payroll       2119 PAYNE STREET     \$	(a)	(b)	(c)	(d)
2119 PAYNE STREET     \$	No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
No.     Name, address, and ZIP + 4     Total contributions     Type of contributions	1	2119 PAYNE STREET	\$25,000.	Payroll
(a)       (b)       (c)       (d)         (a)       (b)       (c)       (d)         (a)       (b)       (c)       (d)         (a)       Name, address, and ZIP + 4       Total contributions       Type of contributions         (a)       Name, address, and ZIP + 4       Total contributions       Person         (a)       (b)       (c)       (d)         (a)       (b)       (c)       (d)         (a)       (b)       (c)       (d)         (b)       (c)       (d)       Total contributions       Type of contributions         (a)       (b)       (c)       (d)       Total contributions       Type of contributions         (a)       (b)       (c)       (d)       Total contributions       Type of contributions         (b)       (b)       (c)       (d)       Total contributions       Type of contributions         (a)       Name, address, and ZIP + 4       Total contributions       Type of contributions       Type of contributions         (b)       (b)       (c)       (d)       Type of contributions       Type of contributions         (a)       (b)       (b)       (c)       (d)       Type of contributions       Type of contribut				(d) Type of contribution
No.     Name, address, and ZIP + 4     Total contributions     Type of contributions			\$	Payroll
(a)       (b)       (c)       (d)         No.       Name, address, and ZIP + 4       Total contributions       Type of contributions         (a)       (b)       (c)       (d)       (d)         (a)       Name, address, and ZIP + 4       Total contributions       Person         (a)       (b)       (c)       (d)       Noncash         (c)       (c)       (d)       Noncash       (Complete Part II if is a noncash contributions         (a)       (b)       (c)       (d)       Noncash       (Complete Part II if is a noncash contributions         (a)       (b)       (c)       (d)       Type of contributions       Type of contributions         (a)       (b)       (c)       Total contributions       Person       Payroll         (a)       (b)       (c)       (c)       (d)       Noncash       (Complete Part II if is a noncash contributions         (a)       (b)       (b)       (c)       (d)       Type of contributions       Type of contributions         (a)       Name, address, and ZIP + 4       Total contributions       Type of contributions       Type of contributions         (a)       Name, address, and ZIP + 4       Total contributions       Type of contributions       Type of contributions				(d) Type of contribution
No.     Name, address, and ZIP + 4     Total contributions     Type of contributions			\$	Payroll
Image: second				(d) Type of contribution
No.     Name, address, and ZIP + 4     Total contributions     Type of contributions			\$	Payroll
(a)       (b)       (c)       (d)         No.       Name, address, and ZIP + 4       Total contributions       Type of contributions				(d) Type of contribution
No.     Name, address, and ZIP + 4     Total contributions     Type of contributions         Person        Payroll			\$	Payroll
Payroll				(d) Type of contribution
(Complete Part II if				Payroll Noncash (Complete Part II if there is a noncash contribution.)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2012)	F
Name of organization	Employer identification number
	61 1050000

61-1270383

#### CLIFTON CULTURAL CENTER, INC.

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	° (b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	· · · · · · · · · · · · · · · · · · ·	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	······································	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
· · · · · · · · · · · · · · · · · · ·		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

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2012.05020 CLIFTON CULTURAL CENTER, IN 01285\_2

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Name of org	anization		Employer identification number
CLIFTC	ON CULTURAL CENTER, IN	C.	61-1270383
Part III	Exclusively religious, charitable, etc., in year. Complete columns (a) through (e) an the total of exclusively religious, charitable, Use duplicate copies of Part III if additi	dividual contributions to section 501(o d the following line entry. For organizatio etc., contributions of \$1,000 or less for	)(7), (8), or (10) organizations that total more than \$1,000 for the
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Γ		(e) Transfer of gif	
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address,	(e) Transfer of gift and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
23454 12-21-1	2		Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

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## SCHEDULE D

#### (Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Financial Statements Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047
010
2012
Open to Public
Inspection
119020001011

Nam	ne of the organization CLIFTON CULTURAL CENTER, INC.	Employer identification number 61-1270383
Pa		
	organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fu	unds
	are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conf	ferring
	impermissible private benefit?	
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part I	IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	cally important land area
	Protection of natural habitat	historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a	conservation easement on the last
	day of the tax year.	
		Held at the End of the Tax Year
a	Total number of conservation easements	
b	<b>o</b> ,	
c	Number of conservation easements on a certified historic structure included in (a)	2c
d		2d
•	listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the org	
3		Janization during the tax
4	year ▶ Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
Ŭ	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4	
	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense stat	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the	organization's accounting for
	conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement	
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and	
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public exhibition to the activity of t	service, provide the following amounts
	relating to these items:	¢
	(i) Revenues included in Form 990, Part VIII, line 1	
n	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gai	
2	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а		▶ \$
	Assets included in Form 990, Part X	
5		····· F *
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2012
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2012.05020 CLIFTON CULTURAL CENTER, IN 01285\_2

		CULTURAL	A DESCRIPTION OF THE OWNER OWNER OF THE OWNER OWNER OF THE OWNER						70383	
Pa	rt III   Organizations Maintaining C	Collections of A	rt, Histo	orical Tr	easures,	or Othe	er Simila	ar Asse	ts(continu	ied)
3	Using the organization's acquisition, access	ion, and other record	ds, check a	any of the	following th	at are a s	ignificant	use of its	collection	items
	(check all that apply):		·							
а	Public exhibition	c			hange progi					
b	Scholarly research	e		ther						
c	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	n how the	y further t	he organizat	tion's exe	mpt purpo	ose in Par	t XIII.	
5	During the year, did the organization solicit of	or receive donations	of art, hist	orical trea	sures, or oth	ner similai	r assets			
-	to be sold to raise funds rather than to be m								Yes	No No
Pa	<b>rt IV</b> Escrow and Custodial Arran		ete if the c	organizatio	n answered	"Yes" to	Form 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for co	ontribution	is or other a	ssets not	included			
	on Form 990, Part X?							L	Yes	└── No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing tal	ble:						
									Amount	
с	Beginning balance						1c			
d	Additions during the year						. 1d			
е	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on F								Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation	has been	provided in	Part XIII				
Pa	rt V Endowment Funds. Complete i	f the organization an	nswered "\	/es" to For	rm 990, Pari	t IV, line 1	0.			
		(a) Current year	(b) Pric	or year	(c) Two yea	irs back	(d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions					ſ				
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 cur		e (line 1a.	column (a	)) held as:					
а	Board designated or quasi-endowment	,,	%		<i>"</i> ,					
b	Permanent endowment	%								
c	Temporarily restricted endowment	%								
-	The percentages in lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should									
3a	Are there endowment funds not in the posse	•	ation that	are held a	nd administ	ered for th	ne organiz	ation	κ.	
	by:								Γ	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations									
ь	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedu	le R?	• • • • • • • • • • • • • • • • • • • •		•••••	••••••••••••••	3b	
4	Describe in Part XIII the intended uses of the									
-	t VI   Land, Buildings, and Equipm									
Provide a s	Description of property	(a) Cost or o		(b) Cost	or other	(c) A(	cumulate	d	(d) Book	value
	Description of property	basis (investr		basis (			preciation	ŭ		value
 1a	Land	`	(		. ,					
	Buildings							1999 (1999) 1999 - Statistical (1999)	*****************************	
	Leasehold improvements									
	Equipment									
	Other			92	0,853.	F	591,83	35.	329	,018.
	. Add lines 1a through 1e. (Column (d) must e		X column			<u> </u>				$\frac{10100}{1000}$
		cini 000, i dit		1-1, 1, 1, 1, 1, 1	- (-/./			Schedule	D (Form 9	

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Schedule D (Form 990) 2012	CLIFTON			
Part VII Investmente -	Other Securitie	0 0 E	Det V Bas 40	

(a) Description of security or category (including name of security) ) Financial derivatives	(b) Book value		of valuation: Cost or end-of-year market v	
Other				
(A)				
(B)				
(C)				
(D)				
(E)				••••••
(F)				
(G)				
(H)				
(1)		·····		
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
art VIII Investments - Program Related. See	Form 990, Part X, lir	ne 13.		
(a) Description of investment type	(b) Book value		of valuation: Cost or end-of-year market v	alue
(1)				
(2)				
(3)				
(4)	······································			
(5)				
(6)				
(7)				
(8)				
(9)		i i		
(10)	<u></u>			
	*******			
(10) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line 15	5.			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets. See Form 990, Part X, line 15	5. escription		(b) Book val	lue
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tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶         art IX       Other Assets. See Form 990, Part X, line 15         (a) De         (1)         (2)			(b) Book val	lue
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Schedule D (Form 990) 2012

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	dule D (Form 990) 2012 CLIFTON CULTURAL CENTER, IN		I	61-1	L270383	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With Rever	ue per R	eturn		
1	Total revenue, gains, and other support per audited financial statements			1	627	,022.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)		4,923.			
	Add lines 2a through 2d			2e	474	,923.
3	Subtract line 2e from line 1			3	152	,099.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b						
				4-		0.
_	Table sevence Add is a 2 and 4. (This must sound form 200, Dart Line 10)			4c 5	150	,099.
	<b>TXII</b> Reconciliation of Expenses per Audited Financial Stateme	nte With Expo	nees por			,099.
				······		0.25
1	Total expenses and losses per audited financial statements			1	040	,925.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
a	Donated services and use of facilities	_2a				
b	Prior year adjustments					
c	Other losses	2c				
	Other (Describe in Part XIII.)	2d 49	4,855.			
е	Add lines 2a through 2d			2e		,855.
3	Subtract line 2e from line 1			3	154,	,070.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b	1			
С	Add lines 4a and 4b			4c		Ο.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	154,	070.
Par	t XIII Supplemental Information					
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines 1a and 4; Par	t IV, lines 1b	and 2	b; Part V, line	4; Part
X, line	e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	provide any additior	nal informatio	on.		
	RT X, LINE 2: MANAGEMENT HAS CONCLUDED THAT				THAT	
WOU	JLD NOT MEET THE MORE-LIKELY-THAN-NOT CRITE	RION OF FA	ASB ASC	C 74	0-10 WC	DTD
ΒE	IMMATERIAL TO THE FINANCIAL STATEMENTS TAK	EN AS A WI	HOLE.	ACC	ORDINGL	γ,
THE	ACCOMPANYING FINANCIAL STATEMENTS DO NOT	INCLUDE AN	NY PROV	JISI	ON FOR	
UNC	ERTAIN TAX POSITIONS, AND NO RELATED INTER	EST OR PEN	VALTIES	5 НА	VE BEEN	I
REC	ORDED IN THE OPERATING STATEMENT OR ACCRUE	D IN THE I	BALANCE	SH	<b>T</b> .	
				_ ~1		
FEL	ERAL AND STATE TAX RETURNS OF THE ENTITY A	RE GENERAL	UN OPF	τ. N	0	
			011	L	<u> </u>	
EXA	MINATION BY THE RELEVANT TAXING AUTHORITIE	ים ג קרק צ		ייי יידר	HREF VF	ARC
		D FOR A FI	TUTOD (	<u>, , , ,</u>	111/11/2 IC	UUD

Schedule D (Form 990) 2012

232054 12-10-12 FROM THE DATE THE RETURNS ARE FILED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

AMOUNTS ATTRIBUTABLE TO 12 MONTH RETURN (7/1/12-6/30/13)

PART XII, LINE 2D - OTHER ADJUSTMENTS:

AMOUNTS ATTRIBUTABLE TO 12 MONTH RETURN (7/1/12-6/30/13)

Schedule D (Form 990) 2012

232055 12-10-12

2012.05020 CLIFTON CULTURAL CENTER, IN 01285\_2

#### 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.



Department of the Treasury Internal Revenue Service Name of the organization

(Form 990 or 990-EZ)

SCHEDULE O

CLIFTON CULTURAL CENTER, INC.

Employer identification number 61 - 1270383

#### FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PRODUCTION, MEETINGS AND PROGRAMS THAT WILL FURTHER AN ENRICHED SENSE

OF COMMUNITY.

FORM 990, PART VI, SECTION A, LINE 8B: IN THE ADVENT OF NEEDING TO FILE A FULL 990, OUR AUDITOR HAS ADVISED US THAT IT IS ADVISABLE TO MAINTAIN MINUTES OF COMMITTEES, AS WELL AS THE FULL BOARD OF DIRECTORS. WE INTEND TO BEGIN IMPLEMENTING THIS POLICY IN THE NEXT YEAR.

FORM 990, PART VI, SECTION B, LINE 11: MEMBERS OF THE FINANCE COMMITTEE REVIEW THE 990, IN CONSULTATION WITH THE EXECUTIVE DIRECTOR, AND AFTER CHANGES ARE SUGGESTED, IT IS APPROVED FOR FILING. A COPY IS THEN DISTRIBUTED TO THE REMAINING BOARD MEMBERS.

FORM 990, PART VI, SECTION B, LINE 15A: RESEARCH WAS PERFORMED, SUCH AS USING NATIONAL AVERAGE PAY TABLES, COMPARISON TO OTHER BENCHMARK ENTITIES IN OUR COMMUNITY, TO DETERMINE REASONABLE AND PROPER PAY FOR THE EXECUTIVE DIRECTOR.

FORM 990, PART VI, SECTION C, LINE 18: OUR 990 AND OTHER FORMS ARE AVAILABLE THROUGH GUIDESTAR.ORG AS WELL AS UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

THE ORGANIZATION CHANGED FROM THE CASH METHOD OF ACCOUNTING TO THE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012) 232211 01-04-13

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2012.05020 CLIFTON CULTURAL CENTER, IN 01285\_2

Name of the organization CLIFTON CULTURAL CENTER, INC.	Employer identification nu 61-1270383
ACCRUAL METHOD.	
NO CHANGE FROM PRIOR YEAR	
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ARTICLES OF AMENDMENT TO THE ARTICLES OF INCORPORATION OF RECEIVED & FILED

SEP 7

 $SE(\cdot)$ 

Ing. Hender

CLIFTON CULTURAL CENTER, INC. (formerly St. Frances of Rome Cultural Center,

Pursuant to the Kentucky Business Corporation Act the undersigned Kentucky not-for-profit corporation adopts the following Articles of Amendment to its Articles of Incorporation:

FIRST: A. Article II hereby is amended to delete references to Section 503 and Section 504, respectively, in the eighth unnumbered paragraph thereof and substituting therefor Section 501(c)(3), and to add the following language:

a. Said organization is organized exclusively for charitable, religious, and educational purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

b. No part of the net earnings of the organization shall inure to the benefit of, or be distributable to its members, trustees, officers, or others private persons, except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the purpose clause hereof. No substantial part of the activities of organization shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the organization shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office. Notwithstanding any other provision of this document, the organization shall not carry on any other activities not permitted to be carried on (a) by an organization exempt from federal income tax under section 501(c)(3) of the Internal Revenue code, corresponding section of any future federal tax code, or (b) by an organization, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or corresponding section of any future federal tax code.

The foregoing amendment of the Articles of SECOND: Incorporation was adopted by the Board of Directors of the \_\_\_\_\_, 1995, in a manner 28 August corporation on \_\_\_\_ prescribed by the Kentucky Business Corporation Act.

Dated: <u>August 28</u>, 1995

. A CARACTER

CLIFTON CULTURAL CENTER, INC.

wen & Ei

COMMONWEALTH OF KENTUCKY COUNTY OF JEFFERSON

SS

is the President of CLIFTON CULTURAL CENTER, INC., that he signed the foregoing document as President of the corporation, and that the statements therein contained are true.

NOTARY PUBLIC, Ky. State-at-14 Jaul My commission expires:

## ROGK 0480 PAGE 395

#### ARTICLES OF AMENDMENT TO THE

#### ARTICLES OF INCORPORATION

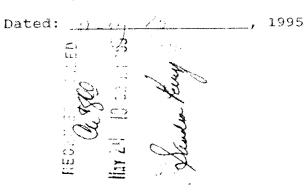
OF

#### ST. FRANCES OF ROME CULTURAL CENTER, INC.

Pursuant to the Kentucky Business Corporation Act, the undersigned Kentucky not-for-profit corporation adopts the following Articles of Amendment to its Articles of Incorporation:

The name of the corporation has been changed to FIRST: CLIFTON CULTURAL CENTER, INC.

Articles of the The following amendment of SECOND: Incorporation were adopted by the Board of Directors of the corporation on April 27, 1995, in the manner prescribed by the Kentucky Business Corporation Act.



CLIFTON CULTURAL CENTER, INC.

Juen Stephen President

Six = S. H.

COMMONWEALTH OF KENTUCKY) COUNTY OF JEFFERSON )

) SS

I, a notary public, do hereby certify that on this 15th day of May, 1995, personally appeared before me JOHN F. EIFLER, who being by me first duly sworn, declared that he is the President of Clifton Cultural Center, Inc., that he signed the foregoing document as President, of the corporation, and that the statements therein contained are true.

Rocument No: 1995069333 69353 Lodged By: st frances of rome Recorded Un: Jun 14, 1995 02:47:05 P.H. Total Fees: \$3.00 County Clerk: Reberra Jackson Deputy Clerk: QLORIA END OF MARINENT

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#### ARTICLES OF INCORPORATION

#### FOR

#### ST. FRANCES OF ROME CULTURAL CENTER, INC.

The undersigned incorporator of the ST. FRANCES OF ROME CULTURAL CENTER, INC., has signed and acknowledged these Articles of Incorporation for the purpose of forming a corporation having no capital stock, and not involving private pecuniary gain or profit, under the provisions of Kentucky Revised Statutes 273.160, et seq.

#### ARTICLE I

The name of the corporation shall be ST. FRANCES OF ROME CULTURAL CENTER, INC.

#### ARTICLE II

The purposes for which the corporation is formed are as follows:

To restore, preserve and develop the St. Frances of Rome Theater as a cultural center for performance and community activities in the Clifton, Crescent Hill and greater Louisville area.

To receive gifts, grants and donations of money and property of every kind, and to administer the same and to do anything necessary or proper for the accomplishment of the stated purposes.

To make contributions to any organization described in Section 501(c)(3) of the Internal Revenue Code of 1986.

To engage in any an all lawful activities incidental to the foregoing stated purposes, except as restricted herein.

The corporation shall not be operated for the primary purpose of carrying on a trade or business for profit.

No substantial part of the activities of the corporation shall consist of carrying on propaganda or otherwise attempting to influence legislation; nor shall it in any manner or to any extent participate in, or intervene in (including the publishing or distributing of statements), any political campaign on behalf of any candidate for public office; nor shall the corporation engage in any activities that are unlawful under applicable federal, state, or local laws.

The corporation shall (1) not engage in any prohibited transactions as described in Section 503 of the Internal Revenue Code of 1986, (2) not accumulate income, invest income or divert income, in a manner that would endanger its exempt status by virtue of Section 504 of the Internal Revenue Code, and (3) not engage in any other activity which would result in the denial or loss of exempt status.

For purposes of the above, references to provisions of the Internal Revenue Code of 1936, as amended, shall be deemed to include statutes which succeed such provisions.

#### ARTICLE III

The duration of the corporation shall be perpetual. However, if the corporation should discolve, upon dissolution, the Board of

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Directors shall, after paying or making provision for the payment of liabilities of the corporation, dispose of all assets of the corporation exclusively for charitable, educational, religious, or scientific purposes as shall, at the time, qualify as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code of 1986 (or the corresponding provision of any future United States Internal Revenue Law), as the Board of Directors shall determine.

#### ARTICLE IV

The address of the initial registered and principal office and the name of the initial resident agent is as follows:

> Rev. John G. Eifler 2119 Payne Street Louisville, Kentucky 40206

#### ARTICLE V

The name and address of the incorporator are:

Rev. John G. Eifler 2119 Payne Street Louisville, Kentucky 40206

#### ARTICLE VI

The affairs and business of the corporation shall be conducted by a Board of not fewer than five (5) nor more than twenty-five (25) persons. The names and addresses of the members or the initial Board of Directors are as follows:

3

Rev. John G. Eifler 2119 Payne St. Louisville, Ky. 40206

Katty Smith 122 Arrowhead Louisville, Ky. 40207

Jim Voyles 2537 Glenmary Ave. Louisville, Ky. 40204 Deborah Keesee 18 Hawthorne Hill Louisville, Ky. 40204

Douglas Stegner 1644 Cherokee Rd. Louisville, Ky. 40205

#### ARTICLE VII

The directors of the corporation shall not be liable for any debt or obligation of the corporation solely by reason of being directors.

#### ARTICLE VIII

Bylaws for the corporation may be adopted and amended by the Board of Directors of the corporation.

IN WITNESS WHEREOF, said incorporator subscribes his name and acknowledges this to be his act and deed this  $day of \frac{dy}{d}$ , 1994.

Rev. John G. Eiffer

STATE OF KENTUCKY ) ) SS COUNTY OF JEFFERSON )

On <u>August 26</u>, 1994, personally appeared before me, **Rev. John G. Eifler**, incorporator herein, and produced to me, in said State and County, the Articles of Incorporation of **ST. FRANCES OF ROME CULTURAL CENTER, INC.**, acknowledged same to be his free act and deed for the purposes therein mentioned.

Notary Public. Kentucky

My commission expires:  $\frac{4}{25}/\frac{3}{3}$ 

This instrument prepared by:

James R. Voyles VOYLES & JOHNSON, P.S.C.

VOYLES & JOHNSON, P.S.C. 100 North 6th St. Fifth Floor Louisville, Kentucky 40202 502/589-2600 Name (as shown on your income tax return)

	Clifton Cultural Center, Inc.								
Print or type Specific Instructions on page 2.	Business name/disregarded entity name, if different from above								
	□ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ►						⊡ E	xemp	t payee
	Address (number, street, and apt. or suite no.) 2117 Payne St.	nam	e and	addres	is (optio	nal)			
Ś	City, state, and ZIP code								
See	Louisville, KY 40206								
	List account number(s) here (optional)								
Pai	t Taxpayer Identification Number (TIN)								
to avo reside entitie	your TIN in the appropriate box. The TIN provided must match the name given on the "Name bid backup withholding. For individuals, this is your social security number (SSN). However, for ent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other es, it is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i> n page 3.	ra	cial :	securi	-	ber	-[		
	If the account is in more than one name, see the chart on page 4 for guidelines on whose er to enter.	En 6	nploy	eride	ntifica 1 2	tion nur	T	8	3
Par	t II Certification	A							······

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and

3. I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

	le en page n		1 minutes to	
Sign Here	Signature of U.S. person ►	·WAA	Maria	Date > 8/2/12

#### General Instructions

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

#### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income. Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

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

• An individual who is a U.S. citizen or U.S. resident alien,

• A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,

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

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

## FINANCIAL STATEMENTS AND INDEPENDENT AUDITOR'S REPORT

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## **CLIFTON CULTURAL CENTER, INC.**

**SEPTEMBER 30, 2013** 

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Founders & Principals John D. Winslow, CPA Barbara A. Lasky, CPA Margaret H. Anderson, CPA Ellis Bryant, CPA 943 South First Street Louisville, KY 40203-2242 Phone: 502,584,9793 Fax: 502,584,9796 Web: www.abiw-cpas.com E-mail: abiw@abiw-cpas.com

Providing timely, accurate, useful information to decision makers

### INDEPENDENT AUDITOR'S REPORT

Board of Directors Clifton Cultural Center, Inc.

Anderson

We have audited the accompanying financial statements of Clifton Cultural Center, Inc., (a notfor-profit organization) which comprise the statement of financial position as of September 30, 2013, and the related statements of activities, functional expenses and cash flows for the fifteen months then ended, and the related notes to the financial statements.

#### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes 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.

#### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements 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 the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Clifton Cultural Center, Inc. as of September 30, 2013 and the changes in its net assets and its cash flow for the fifteen months then ended in accordance with accounting principles generally accepted in the United States of America.

#### **Change in Accounting Method**

The Center has kept its records and has prepared its financial statements for previous years on the modified cash basis of accounting. As described in Note 1 to the financial statements, the Center has adopted the accrual basis of accounting as of the beginning of the current period. Beginning unrestricted net assets have been restated. Our opinion is not modified with respect to this matter.

Archurn, Brynt, Lucky + Winter , P.s.c.

Louisville, Kentucky January 16, 2014

## STATEMENT OF FINANCIAL POSTION CLIFTON CULTURAL CENTER, INC. SEPTEMBER 30, 2013

ASSETS	
Cash and cash equivalents	\$ 28,570
Accounts receivable	1,341
Promises to give	80,000
Prepaid expenses	13,775
Leasehold improvements	818,609
Furniture and equipment	102,244
Accumulated depreciation	(591,835)
Total assets	<u>\$ 452,704</u>
LIABILITIES AND NET ASSETS LIABILITIES	
Accounts payable	\$ 88,966
Accrued payroll and other liabilities	3,819
Deferred revenue	57,888
Total liabilities	150,673
NET ASSETS	
Unrestricted	219,271
Temporarily restricted	82,760
Total net assets	302,031
Total liabilities and net assets	\$ 452,704

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

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## STATEMENT OF ACTIVITIES CLIFTON CULTURAL CENTER, INC. FOR THE FIFTEEN MONTHS ENDED SEPTEMBER 30, 2013

	Unrestricted	Temporarily <u>Restricted</u>	Total
Support and revenue			
Rental and lease income	\$ 178,450	s -	\$ 178,450
Contributions and grants	227,363	82,760	310,123
Program revenue	106,264	-	106,264
Special events	39,801	-	39,801
Special event expenses	(7,658)	-	(7,658)
Interest income	42	*	42
Total support and revenue	544,262	82,760	627,022
Net assets released from restrictions:			
Net assets released from restrictions	18,010	(18,010)	
Total support, revenue and reclassifications	562,272	64,750	627,022
Expenses	604,860		604,860
Change in net assets before depreciation	(42,588)	64,750	22,162
Depreciation	44,065		44,065
Increase (decrease) in net assets	(86,653)	64,750	(21,903)
Net assets at beginning of year	322,596	18,010	340,606
Prior period adjustment	(16,672)	-	(16,672)
Net assets at end of year	<u>\$ 219,271</u>	<u>\$ 82,760</u>	<u>\$ 302,031</u>

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

## STATEMENT OF FUNCTIONAL EXPENSES CLIFTON CULTURAL CENTER, INC. FOR THE FIFTEEN MONTHS ENDED SEPTEMBER 30, 2013

		Management	t	
	Program and Fund			
	Services	General	Raising	<u>Total</u>
Compensation	\$ 157,824	\$ 27,205	\$ 19,062	\$ 204,091
Payroll taxes and employee benefits	32,734	5,643	3,954	42,331
Program expense	202,633	5,045	5,554	202,633
Rental expenses	11,863	-	_	11,863
Occupancy	72,941	491	164	73,596
Telephone	3,069	529	371	3,969
Meetings	5,005	1,455	571	1,455
Marketing	10,091	1,455	-	
Repairs and maintenance	,	120	-	10,091
-	19,096	128	42	19,266
Office expense	2,894	499	350	3,743
Professional fees	-	11,178		11,178
Insurance	9,885	1,704	1,194	12,783
Fund development	-	**	5,619	5,619
Bank service charges	1,346	232	163	1,741
Miscellaneous	387	67	47	501
Total expenses before depreciation	524,763	49,131	30,966	604,860
Depreciation	43,673	294	98	44,065
Total expenses	<u>\$ 568,436</u>	<u>\$ 49,425</u>	<u>\$ 31,064</u>	<u>\$ 648,925</u>

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

## STATEMENT OF CASH FLOWS CLIFTON CULTURAL CENTER, INC. FOR THE FIFTEEN MONTHS ENDED SEPTEMBER 30, 2013

CASH FLOWS FROM OPERATING ACTIVITIES:	
Change in net assets	\$ (21,903)
Adjustments to reconcile change in net assets	
to net cash provided (used) by operating activities:	
Depreciation	44,065
(Increase) decrease in operating assets:	
Accounts receivable	(1,341)
Promises to give	(80,000)
Prepaid expenses	(13,775)
Increase (decrease) in operating liabilities:	
Accounts payable	73,824
Accrued payroll and other liabilities	2,672
Deferred revenue	56,358
Net cash provided (used) by operating activities	59,900
CASH FLOWS FROM INVESTING ACTIVITIES:	
Purchase of property and equipment	(65,744)
Net cash provided (used) by investing activities	(65,744)
Net increase (decrease) in cash	(5,844)
Cash at beginning of year	34,414
Cash at end of year	<u>\$ 28,570</u>

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

#### NOTES TO FINANCIAL STATEMENTS CLIFTON CULTURAL CENTER, INC. SEPTEMBER 30, 2013

## NOTE 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### Description

The Clifton Cultural Center, Inc. (the Center) is an historic former school building in Louisville, Kentucky that now serves as a performance, meeting, and conference center. Located in the heart of the Frankfort Avenue business district, the facility hosts a variety of arts and cultural events, as well as weddings, conferences, and business and civic meetings. The Clifton Center is also home to several non-profit organizations, artists, and dancers, who lease space in the building.

In 2010 the Clifton Cultural Center's Board of Directors completed a strategic plan. As a result of that plan, a new mission statement was adopted, and a plan was initiated to lessen the organization's emphasis on providing low cost meeting space, and to emphasize its role as a cultural center and presenter of high quality arts and cultural programs.

The Center's funding is provided by rental and lease income, grants and contributions and program ticket sales.

#### **Basis of Accounting**

The financial statements of the Center have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables and other liabilities.

#### **Change in Accounting Basis**

In previous years, the Center prepared its financial statements on the modified cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted accounting principles. During the fifteen months ended September 30, 2013, the Center adopted the accrual basis of accounting as the basis for its financial statements. Under the new basis of accounting, the Center recognizes accounts payable and other liabilities in the period the expense is incurred instead of when the expense is paid. As a result of the differences between generally accepted accounting principles and the modified cash basis, an adjustment was made to the beginning balance of net assets (see Note 10).

#### **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 Center is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. A description of the three net assets categories follows:

<u>Unrestricted Net Assets</u>: include the portion of expendable funds that are not subject to donor-imposed stipulations.

<u>Temporarily Restricted Net Assets</u>: include gifts for which donorimposed restrictions have not been met.

<u>Permanently Restricted Net Assets</u>: include amounts which the donor has stipulated that the corpus be invested in perpetuity and only the income be made available for program operations in accordance with donor restrictions.

#### Year-End Change

During 2013, the Center changed its year-end from June 30 to September 30. These financial statements include fifteen months of activity, from July 1, 2012 through September 30, 2013.

#### **Cash and Cash Equivalents**

The Center considers all highly liquid investments with maturities of three months or less, when purchased, to be cash equivalents.

#### **Accounts Receivable**

Accounts receivable consist primarily of fees due from rental and lease agreements. The Center considers accounts receivable to be fully collectible; accordingly, no allowance for doubtful accounts is required.

#### **Promises to Give**

Unconditional promises to give are recognized as revenues or gains in the period received and as assets, decreases of liabilities, or expenses depending on the form of the benefits received. Conditional promises to give are recognized only when the conditions on which they depend are substantially met and the promises become unconditional.

#### Leasehold Improvements, Furniture and Equipment

Leasehold improvements, furniture and equipment are 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 lease term or the estimated lives of the assets.

#### **Deferred Revenue**

Deferred revenue consists of rental and lease payments received in advance, as well as payments received for program events that have not yet occurred. Such amounts are recorded as revenues when the related services are performed, or obligations are satisfied.

#### Contributions

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence and/or nature of any donor restrictions.

Support that is restricted by the donor is reported as an increase in unrestricted net assets if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in temporarily or permanently restricted net assets, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

#### **Donated Services**

No amounts have been reflected in the financial statements for donated services. The Center pays for most services requiring specific expertise. However, many individuals volunteer their time and perform a variety of tasks that assist the Center with programs, solicitations and various committee assignments.

#### 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.

#### **Expense Allocation**

Expenses are allocated based on estimated time spent devoted to programs and supporting services.

#### **Income Tax Status**

The Center is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. In addition, the Center qualifies for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization that is not 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 financial statements. Federal and state tax returns of the entity are generally open to examination by the relevant taxing authorities for a period of three years from the date the returns are filed.

#### **Subsequent Events**

Management has evaluated subsequent events for recognition or disclosure in the financial statements through January 16, 2014, which was the date at which the financial statements were available to be issued.

## NOTE 2. CONCENTRATIONS OF CREDIT RISK

<u>Cash</u> – The Center periodically has cash balances in financial institutions in excess of amounts federally insured. The risk is managed by maintaining all deposits in high quality financial institutions.

<u>Receivables</u> – Financial instruments that are exposed to credit risk consist of accounts receivable. Accounts receivable are principally with individuals or businesses located in the Louisville area. Realization of these accounts is dependent on various individual economic conditions.

## NOTE 3. PROMISES TO GIVE

Unconditional promises to give are all current as follows:

Program activities

\$ 80,000

## NOTE 4. LINE OF CREDIT

The Center has available a \$20,000 line of credit that expires January 31, 2014, secured by general business assets. The line of credit bears interest at prime plus 2.0% (the prime rate was 3.25% at September 30, 2013). At September 30, 2013, the Center had no outstanding balance against the line.

#### NOTE 5. RESTRICTIONS ON ASSETS

Temporarily restricted net assets are available for the following:

Program activities

\$ 82,760

#### NOTE 6. LEASE COMMITMENT

The Center leases its building under an operating lease beginning July 1, 2006 and expiring June 2016. The lease contains a renewal option for ten years. The Center is responsible for minor, normal and routine repairs to the interior of the leased premises and cleaning expenses. Future minimum lease payments in excess of one year are as follows:

September 30, 2014	\$ 19,414
September 30, 2015	20,434
September 30, 2016	16,005
	\$ 55,853

Rental expense for the fifteen months ended September 30, 2013 was \$25,981.

#### NOTE 7. LEASING ACTIVITIES

The Center leases space to most tenants under noncancelable operating leases with one-year terms.

#### NOTE 8. IN-KIND DONATIONS

The Center records various types of in-kind support, including materials and other intangible assets. Contributed in-kind support is recognized in accordance with the Statement of Financial Accounting Standards in its Accounting Standards Codification 958-605-25, which governs the presentation of financial statements of not-for-profit organizations. This pronouncement requires recognition of professional services received if those services (a) create or enhance long-lived assets or (b) require specialized skills 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 Center do not meet these criteria. In 2013, no amounts were recognized, although volunteers provided countless hours of assistance.

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. There were no in-kind donations for the fifteen months ended September 30, 2013.

## NOTE 9. PENSION PLAN

In 2008 the Center adopted a 403(b) plan that will match up to 3% of employee contributions. The amount of cost recognized for the fifteen months ended September 30, 2013 was \$10,697.

## NOTE 10. PRIOR PERIOD ADJUSTMENT

In previous years, the Center prepared its financial statements using the modified cash basis of accounting. During the fifteen months ended September 30, 2013, the Center adopted the accrual basis of accounting as the basis for its financial statements. Under that new basis of accounting, the Center records all significant receivables, promises to give, payables and other liabilities. As a result of the differences between the modified cash and accrual basis, net assets at July 1, 2012 were restated and are \$16,672 less than the amounts previously reported, due to the recording of accounts payable and other liabilities. Changes in net assets are as follows:

	Unrestricted	Temporarily Restricted	Total
Net assets, beginning of year as previously stated Accrual of accounts payable	\$ 322,596	\$ 18,010	\$ 340,606
and other liabilities	(16,672)	**	(16,672)
Net assets, beginning of year as restated	<u>\$ 305,924</u>	<u>\$ 18,010</u>	<u>\$ 323,934</u>

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## Clifton Center Staff

John Harris Executive Director

Adam Fischer General Manager

Kristen Tidwell Development Director

Ann Drury Manager of Client Relations & Administration

Karen Miller Coordinator of Facilities

## **CLIFTON CULTURAL CENTER, INC.**

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## **General Information**

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Organization Number	0336109
Name	CLIFTON CULTURAL CENTER, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	9/22/1994
Organization Date	9/22/1994
Last Annual Report	1/27/2014
Principal Office	2117 PAYNE ST.
	LOUISVILLE, KY-40206
Registered Agent	JOHN HARRIS
	2117 PAYNE ST.
	LOUISVILLE, KY 40206

## **Current Officers**

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	President	Ann Adams
	Vice President	Mark Rountree
	Secretary	Timothy Heine
	Treasurer	Susan A. Lawler
	Director	John G Eifler
	Director	Don Burch
	Director	Mary Michael Corbett
	Director	Mark Carroll
	Director	<u>Bill Cheatham</u>
	Director	Laurie Dobbins
	Director	<u>Debra M Murphy</u>
	Director	Conor O'Driscoll
	Director	<u>Ali Hawthorne</u>
	Director	Robert Adams
	Director	Douglas H. Owen
	Director	Ashley S. Parker
	Director	Gerri Combs
	Director	Debbie Wiebe-Kamber
	Director	Patrick Schmidt
	Director	<u>Ierry Rhandal Blevins</u>

## Individuals / Entities listed at time of formation

Director

REV. JOHN G. EIFLER

7/15/2014

Welcome to Fasttrack Organization Search

Director	KATTY SMITH
Director	<u>JIM VOYLES</u>
Director	<u>DEBORAH KEESEE</u>
Director	DOUGLAS STEGNER
Incorporator	<u>REV. JOHN G. EIFLER</u>

## Images available online

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

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<u>Annual Report</u>	1/27/2014	1 page	PDF	
Annual Report	6/3/2013	1 page	<u>PDF</u>	
<u>Registered Agent</u> name/address change	6/6/2012 10:15:46 AM	1 page	PDF	
Principal Office Address Change	6/6/2012 10:13:43 AM	1 page	<u>PDF</u>	
<u>Annual Report</u>	6/6/2012	1 page	<u>PDF</u>	
<u>Annual Report</u>	7/25/2011	1 page	<u>PDF</u>	
Annual Report	6/15/2010	1 page	<u>PDF</u>	
Annual Report	6/15/2009	1 page	<u>PDF</u>	
<u>Annual Report</u>	6/27/2008	1 page	<u>PDF</u>	
<u>Annual Report</u>	6/29/2007	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	6/30/2006	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	6/6/2005	1 page	tiff	PDF
<u>Annual Report</u>	10/13/2003	1 page	<u>tiff</u>	PDF
Annual Report	9/24/2002	2 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	5/18/2001	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	6/18/1999	2 pages	tiff	<u>PDF</u>
<u>Annual Report</u>	7/7/1998	2 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1997	2 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1996	2 pages	<u>tiff</u>	<u>PDF</u>
Amendment	9/7/1995	3 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1995	1 page	<u>tiff</u>	<u>PDF</u>
<u>Amendment</u>	5/24/1995	1 page	tiff	PDF
Articles of Incorporation	9/22/1994	6 pages	tiff	PDF

## **Assumed Names**

## **Activity History**

Filing	File Date	Effective Date	Org. Referenced
Annual report	1/27/2014 11:13:51 AM	1/27/2014 11:13:51 AM	
Annual report	6/3/2013 10:56:35 AM	6/3/2013 10:56:35 AM	
Annual report	6/6/2012 10:19:11 AM	6/6/2012 10:19:11 AM	
Registered agent address change	6/6/2012 10:15:46 AM	6/6/2012 10:15:46 AM	
Principal office change	6/6/2012 10:13:43 AM	6/6/2012 10:13:43 AM	

7/15/2014	Welcome to Fasttrack Or	ganization Search	
Annual report	7/25/2011 9:20:52 AM	7/25/2011 9:20:52 AM	
Annual report	6/15/2010 10:09:44 AM	6/15/2010 10:09:44 AM	
Annual report	6/15/2009 7:48:16 PM	6/15/2009 7:48:16 PM	
Annual report	6/27/2008 12:51:31 PM	6/27/2008 12:51:31 PM	
Annual report	6/29/2007 2:07:44 PM	6/29/2007	
Annual report	6/30/2006 5:18:43 PM	6/30/2006	
Annual report	6/3/2003	6/3/2003	
Amendment - Miscellaneous amendment	ts 9/7/1995	9/7/1995	
Amendment previous name	5/24/1995	5/24/1995	<u>ST. FRANCES OF ROME</u> <u>CULTURAL CENTER,</u> <u>INC.</u>

## **Microfilmed Images**

Microfilm images are not available online. They can be ordered by faxing a <u>Request For Corporate</u> <u>Documents</u> to the Corporate Records Branch at 502-564-5687.

Annual Report	7/29/2004	2 pages
Annual Report	10/13/2003	1 page
Annual Report	9/24/2002	2 pages
Annual Report	5/18/2001	1 page
Annual Report	8/10/2000	2 pages
Annual Report	6/18/1999	2 pages
Annual Report	7/7/1998	2 pages
Annual Report	7/1/1997	2 pages
Annual Report	7/1/1996	2 pages
Amendment	9/7/1995	2 pages
Annual Report	7/1/1995	1 page
Amendment	5/24/1995	1 page
Articles of Incorporation	9/22/1994	5 pages