

APR 6 2015 PM 4:44 M.W.

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

Applicant/Program: Louisville Independent Business Alliance

Executive Summary of Request:

NDF grant to LIBA for the 7th Annual Buy Local First Fair on May 17 from Noon - 6 PM at the Louisville Water Tower. Funding will pay for staging, band, parking attendants, bicycle valet, port-o-lets, printing, rentals, security, trash, recycling, t-shirts, venue and walkie talkies.

Is this program/project a fundraiser?

☒ Yes

☐ No

Is this applicant a faith based organization?

☐ Yes

☒ No

Does this application include funding for sub-grantee(s)?

☐ Yes

☒ No

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

9

District #

Bill Hollander

Council Member Signature

\$2,000⁰⁰

Amount

3/13/15

Date

Primary Sponsor Disclosure

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

n/a

Approved by:

Appropriations Committee Chairman

Date

Clerk's Office Only:

Request Amount: _____

Committee Amended Appropriation: _____

Original Appropriation: _____

Council Amended Appropriation: _____

Applicant/Program:
Louisville Independent Business Alliance

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.

<u>5</u> District #	<u>Cheer B. Hamilton</u> Council Member Signature	<u>\$ 300⁰⁰</u> Amount	<u>3/30/15</u> Date
<u>17</u> District #	<u>Alan Strickland</u> Council Member Signature	<u>\$ 250</u> Amount	<u>3/30/15</u> Date
<u>20</u> District #	<u>Stuart Benson</u> Council Member Signature	<u>\$ 200⁰⁰</u> Amount	<u>3/30/15</u> Date
<u>10</u> District #	<u>Joe Pryor</u> Council Member Signature	<u>\$ 500-</u> Amount	<u>4/2/15</u> Date
<u>2</u> District #	<u>Barbara Shanklin</u> Council Member Signature	<u>\$ 300-</u> Amount	<u>4/2/15</u> Date
<u>3</u> District #	<u>Marye Stork</u> Council Member Signature	<u>200.00</u> Amount	<u>4/2/15</u> Date
<u>6</u> District #	<u>Paul O. Smith</u> Council Member Signature	<u>250.00</u> Amount	<u>4-2-2015</u> Date

Applicant/Program:
Louisville Independent Business Association

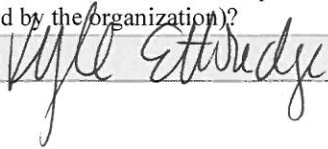
Additional Disclosure and Signatures

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.

<u>12</u> District #	<u>Rick Belmont</u> Council Member Signature	<u>\$200⁰⁰</u> Amount	<u>3/25/15</u> Date
<u>13</u> District #	<u>Vicki Aubrey Welch</u> Council Member Signature	<u>\$200⁰⁰</u> Amount	<u>3/26/15</u> Date
<u>25</u> District #	<u>[Signature]</u> Council Member Signature	<u>\$300⁰⁰</u> Amount	<u>3/26/2015</u> Date
<u>14</u> District #	<u>[Signature]</u> Council Member Signature	<u>\$300⁰⁰</u> Amount	<u>3/26/2015</u> Date
<u>24</u> District #	<u>[Signature]</u> Council Member Signature	<u>\$300⁰⁰</u> Amount	<u>3/26/2015</u> Date
<u>15</u> District #	<u>Therianne Butler</u> Council Member Signature	<u>300-</u> Amount	<u>3-26-15</u> Date
<u>8</u> District #	<u>Thomas L. Brown</u> Council Member Signature	<u>\$300-</u> Amount	<u>3-26-15</u> Date

NDF NON-PROFIT APPLICATION CHECKLIST

Legal Name of Applicant Organization: Louisville Independant Business Alliance		
Program Name: Buy Local First Fair	Request Amount: \$8,000	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?		Yes
Request form: Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?		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?		Yes
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?		Yes
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?		n/a
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?		n/a
Good Standing: Is the entity in good standing with: <ul style="list-style-type: none"> • Kentucky Secretary of State – include Secretary of State website information on organization • Louisville Metro Government – check OMB monthly report filed in Council Financial Reports • Internal Revenue Service – most recent Form 990 included 		Yes
Separate Taxing Districts: If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?		n/a
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)		n/a
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?		n/a
IRS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?		Yes
Operating Budget: Is the organization’s current fiscal year operating budget included?		Yes
Ordinance Required: Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.		Yes
Board Members: Is the entity’s board member list (with term length/term limits) included?		Yes
Staff: 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?		n/a
Rent Requests: Is a copy of signed lease included?		n/a
Articles of Incorporation: Are the Articles of Incorporation of the organization included?		Yes
IRS 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?		n/a
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?		n/a
Prepared by: 		Date: 04/03/15



March 9, 2015

Councilman Bill Hollander
City Hall
601 West Jefferson Street
Louisville, KY 40202

Councilman Hollander –

Thank you for taking the time to consider our application for Neighborhood Development Funds to help produce the 7th Annual “Buy Local Fair” on May 17th at the Louisville Water Tower.

District 9’s support for this event in previous years helped us grow the event to an attendance of 8,000 people! We hope you will remain an active supporter in 2015. We’ll be bringing visitors from all over the city to the 9th District to celebrate businesses that are unique to Louisville.

Because many of the businesses featured will be from other districts, we hope to get support from other Council members as well. Any acknowledgement you can give to the Council about the value of the Fair would be helpful in getting widespread support.

We anticipate the Buy Local Fair in 2016 will also take place in May at the Water Tower, and hope your district can be part of that as well! Thanks so much for your time and consideration. We look forward to hearing from you.

Best regards,

A handwritten signature in black ink, appearing to read 'Jennifer Rubenstein', is written over a horizontal line.

Jennifer Rubenstein
Director



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization: Louisville Independent Business Alliance <small>(as listed on: http://www.sos.ky.gov/business/records)</small>			
Main Office Street & Mailing Address: 1974-A Douglass Blvd, Ste 101, 40205 (mailing: PO Box 4759, 40204)			
Website: www.keeplouisvilleweird.com			
Applicant Contact:	Jennifer Rubenstein	Title:	Director
Phone:	502-500-4669	Email:	jennifer@keeplouisvilleweird.com
Financial Contact:	Jennifer Rubenstein	Title:	Director
Phone:	502-500-4669	Email:	jennifer@keeplouisvilleweird.com
Organization's Representative who attended NDF Training: Angela Weisser			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	Louisville Water Tower Park, 3005 River Road		
Council District(s):	9 (although vendors come from many districts)	Zip Code(s):	40207
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: Seventh Annual Buy Local Fair			
Total Request: (\$)	8000	Total Metro Award (this program) in previous year: (\$)	6500
Purpose of Request (check all that apply): <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget)</div> <div style="width: 50%;"><input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals</div> <div style="width: 50%;"><input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)</div> </div>			
The Following are Required Attachments:			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current Year Projected Budget <input checked="" type="checkbox"/> List of Board of Directors (include term & term limits) <input checked="" type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense		<input type="checkbox"/> Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 <input type="checkbox"/> Evaluation forms if used in the proposed program <input type="checkbox"/> Annual audit (if required by organization) <input type="checkbox"/> Faith Based Organization Certification Form, if required <input checked="" type="checkbox"/> Staff including the 3 highest paid staff	
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.			
Source:	none in this fiscal year	Amount: (\$)	
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Has the applicant met the BBB Charity Review Standards? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

LIBA's mission is to preserve the unique community character of the Metro Louisville area by promoting locally-owned, independent businesses and to educate citizens on the value of purchasing locally. In order to pursue its mission, LIBA focusses on:

- Informing citizens of the value provided by locally-owned businesses, including their importance to the local economy, culture, and social fabric. The goal is to encourage area residents to view themselves as citizens -- as members of a community rather than merely as consumers.
- Offering group branding, promotion and advertising to LIBA members to elevate the individual and collective profiles of locally-owned businesses in order to provide marketing and exposure advantages chains routinely enjoy.
- Creating strong relationships with local government and media in order to inform local decision-making and give voice to the locally-owned independent business community, and to promote policies that support community-rooted enterprise.

LIBA is also responsible for the Buy Local First and 'keep Louisville weird' campaigns, publishing the Buy Local Guide twice a year, the Buy Local Fair (May), Louisville Brewfest (October) and Shift Your Shopping Contest (December).



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 – PROGRAM/PROJECT NARRATIVE

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

The Louisville Independent Business Alliance will host the Seventh Annual Buy Local Fair Sunday, May 17, 2015, from 12n-6pm. Printout of current website is attached.

The Fair will host a variety of local businesses, musicians, artists and craftsmen, chefs, community organizers, and farmers. The Fair connects customers of local businesses, music fans, foodies, local agriculture supporters and local arts patrons in celebration of Louisville's vast selection of unique offerings.

The Buy Local Fair Mission: To provide a venue that fosters cooperation, cross-pollination and strength in numbers for locally-owned, independent entities. By bringing together customers of various businesses, farms, craftspeople and bands unique to the Louisville-area, we expose a variety of endeavors to new audiences and increase business for all.

This event is open and free to the public (\$5 parking charge per carload, bicycles park at no charge). The 2014 Buy Local Fair attracted 8,000 attendees from across the Louisville Metro area. Vendor participation was significant at 170+, and most council districts were represented.

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

The funding will cover costs including the staging and band, bicycle valet, parking attendants, portolets and wash stations, printing, rentals (tables, etc.), security, trash and recycling, volunteer t-shirts, venue and walkie talkies. Details of costs are included in the budget attached.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Funds raised from this event will continue LIBA's "keep Louisville weird" and "Buy Local First" education efforts. We currently have a record number of members – over 700 – and have focused the public's attention on the benefits of buying locally through our major events and campaigns, including the release of the Indie Impact Study, showing the positive financial impact (specific to the Louisville area) of buying locally. This study showed that for every \$100 spent at a Louisville-area independent business, \$55 remains in the local economy, whereas only \$14 remains when spent at a chain.

An annual survey by the Institute for Local Self Reliance (ILSR) and Advocates for Independent Business also indicates the work of the Louisville Independent Business Alliance (LIBA) and more than one hundred similarly-organized groups are yielding large benefits for their members and the local economy. Independent businesses in communities with an active "buy independent/buy local" campaign run by groups like LIBA saw revenues grow 9.3% in 2014, nearly double the 4.9% increase for businesses in areas without such an alliance. 77% of local businesses agreed that LIBA's Buy Local First campaign has positively impacted their business, and 74% of local respondents think that public awareness of the benefits of supporting locally owned businesses has increased in the last year.

Funds raised will also be used for such efforts as the printing and distribution of 80,000 Buy Local Guides, production of materials for our member businesses to distribute about the impact of buying local, community outreach that educates the public about the benefits of buying locally, maintaining our avenues for communication with the public (website, posters, social media), support and education for our member businesses, etc.

This fundraiser also demonstrates the other main thrust of our message: that independent businesses contribute to our culture, social fabric and what makes our city distinctive.

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

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

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

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

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

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

Louisville Water Tower (venue): \$2400



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

The event has been very popular with area farmers, restaurant/food trucks and businesses, who continue to return to the fair because it is effective at driving business to their unique-to-Louisville establishments, which in turn supports our local economy. The public continues to attend in large numbers because the event strengthens the fabric of the community. Attendees gather a sense of pride in their city as they sample from vendors that can't be found in any other city, while they run into old friends and make new ones.

Consistent growth in attendance and vendors (and the diversity of vendors) has been a measure of success in the past, and will continue to be this year. Media Library will again give us specific numbers on the value and reach of our promotional efforts.

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.

LIBA collaborates with various other local organizations to put on a successful event that furthers everyone's goals. The children's area is staged by the Louisville Water Company and the Kentucky Science Center. Additionally, Louisville Water Company will be providing PureTap to fair goers. The Louisville Convention & Visitors Bureau also is there to promote uniquely-Louisville attractions.

We had over 170 vendors last year. We make sure participation is attainable for even the smallest of businesses – LIBA members and farmers participate at no charge and non-members are only charged a \$30 fee. (Everyone who will be selling items will pay \$20 to cover the Master Vendor permits.)

And of course, we have had wonderful support from Metro Council in the past. We will continue to spotlight the Council Members who support the event with signage recognition, banners and booth space (optional to staff).

LIBA also partners with other area organizations throughout the year, including the Center for Neighborhoods, area business organizations, Kentucky Proud, the Family Business Center, Louisville Originals, University of Louisville and their Family Business Center, Small Business Administration, EnterpriseCorp, Louisville Ad Fed and others.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 – PROGRAM/PROJECT BUDGET SUMMARY

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

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits		8500	8500
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)	8000	18120	26120
J: Small Equipment			
K: Capital Equipment			
L: Other Expenses (Attach Detail List)			
*TOTAL PROGRAM/PROJECT FUNDS	8000	26620	34620
% of Program Budget	23 %	77 %	100%

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

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	\$8700 (sponsors)
Fees Collected from Program Participants	\$8000 (parking fees)
Other (please specify)	\$16485 (concessions, merch, vendor fees, etc.)
Total Revenue for Columns 2 Expenses **	33185

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

**Must equal or exceed total in column 2.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Volunteers: 52	\$3800	12 committee members plus 40 day of at 8 hours each
Advertising (LEO, Louisville Magazine)	\$6000	Market rates
ValuMarket: Tent Rental	\$500	Market rates
Competition Food	\$100	Market Rates
<i>Total Value of In-Kind</i> (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)	\$10,400	

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

Agency Fiscal Year Start Date: January 1

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

If YES, please explain:

LILBA has grown in membership and activity every year since 2008, and we anticipate this growth to continue.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – CERTIFICATIONS & ASSURANCES

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

Standard Assurances

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

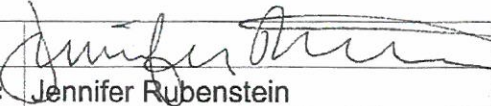
Standard Certifications

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

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

SECTION 7 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:		Date:	3/9/15
Legal Signatory: (please print):	Jennifer Rubenstein	Title:	Director
Phone:	502-500-4669	Extension:	
Email:	jennifer@keeplouisvilleweird.com		



BUY LOCAL BUDGET			
Sunday, May 17, 2015			
INCOME			
Parking	\$	8,000.00	
Sponsors & Premium Booths	\$	8,700.00	
Beer & Bourbon Tickets	\$	5,500.00	
LIBA Merchandise [Tshirts, tote	\$	1,000.00	
Vendor Booth Fees	\$	5,485.00	
Souvenir Mug Sales	\$	3,000.00	
Raffle Tickets	\$	1,500.00	
NDF Council Grant	\$	8,000.00	
Total	\$	41,185.00	
EXPENSES	LIBA	Proposed for NDF Funds	
Advertising: LPM radio underwr	\$	500.00	
Advertising: Mailing Posters	\$	325.00	
Advertising: Posters	\$	250.00	
Advertising: Designer Fee	\$	250.00	
Bands	\$	500.00	\$ 250.00
Beer	\$	4,300.00	
Bike Valet			\$ 300.00
Bourbon	\$	500.00	
Ice	\$	150.00	
Insurance	\$	2,500.00	
Liquor License & Bkgrd check	\$	400.00	
Media Library	\$	150.00	
Parking/Valet Services	\$	400.00	\$ 400.00
Permits: Master Temporary, Ve	\$	2,475.00	
Portolets and Wash stations	\$	400.00	\$ 300.00
Printing: signage, etc.	\$	100.00	\$ 100.00
Printing: Vendor Maps	\$	100.00	\$ 100.00
Raffle Beneficiary	\$	100.00	
Rentals			\$ 350.00
Rentals: Metro Parks 20 Picnic Tables			\$ 300.00
Security			\$ 100.00
Soft Drinks	\$	200.00	
Souvenir Mugs	\$	2,100.00	
Kids Area Tent & Materials	\$	120.00	
Staff Time (LIBA)	\$	8,500.00	
Stage & Sound			\$ 2,200.00
Supplies	\$	600.00	
Trash & Recycle			\$ 400.00
Tshirts (for sale)	\$	700.00	
Tshirts (volunteers)	\$	300.00	\$ 400.00
Venue: Louisville Water Co.			\$ 2,400.00
Walkie Talkies			\$ 400.00
Wristbands: Alcoholic Beverages	\$	100.00	
Yellow Ambulance	\$	600.00	
Total	\$	26,620.00	\$ 8,000.00
Total Expenses	\$	34,620.00	
Total Net Profit	\$	6,565.00	



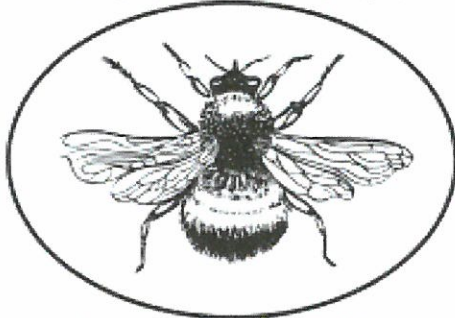
keep Louisville weird.



[Welcome](#) > [Events](#) > Buy Local Fair

Buy Local Fair
Sunday, May 17, 2015
Louisville Water Tower Park

Bee Local



Buy Local Fair
2015

LIBA will host our 7th annual Buy Local Fair on Sunday, May 17. The fair will host a variety of local businesses, musicians, artists and craftspeople, chefs, community organizers and farmers. All locally-owned independent businesses and individuals are encouraged to participate as vendors.

Featured events include concerts, an Iron Chef-style cooking competition, farmer's market, art & craft market, craft beer tent and a kid's area.

Admission is free, \$5 per car to park.
Bicycles are free to park and encouraged!

VENDOR BOOTHS

LIBA is happy to welcome the following vendors to the 2015 Buy Local Fair:

Attention Vendors

Vendor Applications For LIBA Members and the general public are Now Being Accepted

[Click here to download the Retail Vendor Application](#)

[Click here to download the Food Vendor Application](#)

Email your completed application to [Kristen](#) or mail to:

LIBA
1974-A Douglass Blvd, Suite 101
ATTN: Kristen
Louisville KY 40205

If you are not a LIBA Member and would like to apply for membership, contact [Kristen](#).

ENTERTAINMENT

Live entertainment from [Nick Peay](#)

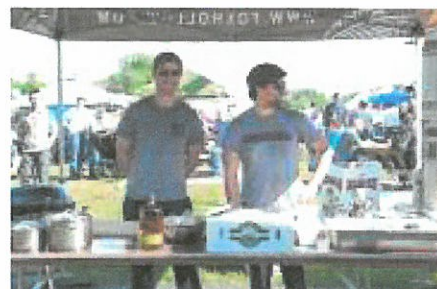


More artists to be announced!

COOKING COMPETITION

One Thing Marketing
Karings
Babyology
Bluegrass Indoor Karting
Red's Gourmet Foods
Barkstown Road
Moab Offroad
Anne Reinhardt Scott
Magnificent Mushrooms, LLC
L.O.C.A.L. (local original creative art loft)
Alarm-1 Protective Services, LLC
Southville Spitters
ProntoiPhone.com
Paws With Purpose
Foxhollow Farm
Cardaroo Products
Organic health Institute
Cheri's Critter Care, LLC
Edible Louisville & The Bluegrass Region
Zi Olive
V-Grits Food Truck
Owl Always Love You
Rainbow Blossom Natural Foods
Mr. G's Kettle Corn
Alarm-1 Protective Services, LLC
Creative Engraving Designs
Capsheew Cellars
Old 502 Winery
Consider Boutique

(2015 challengers to be announced)



Kids Zone



Tattoo Charlie's
Carmichael's Bookstore
Platinum Panel
Kandies of Kentucky
DeGeorge Bros Guitars
The Louisville Quest!
Belmar Flower Shop, Inc
busta grill
Family & Children's Place
Ah, Whatta 'Bout Mimi
Eclipse Bank
Rooibee Red Tea
Frankfort Ave Business Association
Falls City Lighting
Lexie's Trading Post
Kentucky Made & More
Forest Edge Winery
Heine Brothers' Coffee
Good Garbage, Inc
Wick's Pizza





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CONSERVE your **WEALTH**.

To learn more, call us at 502.753.0609 or visit us at ARGI.NET



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

DEPARTMENT OF THE TREASURY

Date: OCT 07 2009

LOUISVILLE INDEPENDENT BUSINESS
ALLIANCE, INC.
1534 BARDSTOWN RD
LOUISVILLE, KY 40205

Employer Identification Number:

DLN:

309173012

Contact Person:

SUSAN Y MALONEY

ID# 31210

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Form 990 Required:

Yes

Effective Date of Exemption:

March 19, 2008

Contribution Deductibility:

No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax-exempt status we have determined that you are exempt from Federal income tax under section 501(c)(6) of the Internal Revenue Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

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

Sincerely,



Robert Choi
Director, Exempt Organizations
Rulings and Agreements

Enclosure: Publication 4221-NC

Letter 948 (DO/CG)

LIBA 2015 Projected Overall Budget		
	<u>INCOME</u>	
Merchandise		\$ 1,500.00
Program Income		
Business Membership Dues		\$ 64,000.00
Directory		\$ 50,000.00
Kentucky Proud Grant		\$ 12,000.00
Email Advertising		
Individual Membership Dues		
Profiles		\$ 3,500.00
South Louisville Efforts/Grant		\$ 1,000.00
Supporter Status		\$ -
Web Advertising		\$ -
Special Events Income		
10 Year Birthday Party		\$ 10,750.00
Brewfest		\$ 110,000.00
Buy Local First Festival		\$ 41,185.00
Shift Your Shopping Contest		\$ 1,500.00
Forecastle Beer Booth		\$ 5,000.00
<u>TOTAL INCOME</u>		\$ 300,435.00
<u>EXPENSES</u>		
Contract Services		
Accounting Fees		\$ 400.00
Commission Membership New/Renev		\$ -
Outside Contract Services		\$ 7,800.00
Payment Processing Fees		
ACH Fees		\$ 480.00
Fees from credit card companies		\$ 1,800.00
PayPal Fees		\$ 350.00
Streamline & Auth.net Merchant Svc		\$ 708.00
Total Credit Card Fees		
Events		
10 Year Birthday Party		\$ 2,475.00
Brewfest Expenses		\$ 75,000.00
Buy Local First Fair		\$ 34,620.00
Shift Your Shopping Expenses		\$ 1,800.00
Independents Week		\$ 500.00
Facilities and Equipment		
Fixtures and Office Environment		\$ 750.00
Rent and Electricity		\$ 10,100.00
Merchandise Expense		\$ 1,000.00

			LIBA 2015 Projected Overall Budget
		Sales And Use Tax	\$ 500.00
		Operations	
		Bank Fees	\$ 516.00
		Business Registration Fees	\$ 50.00
		Email Distribution Service	\$ 800.00
		Internet Service	\$ 450.00
		Postage, Mailing Service	\$ 1,500.00
		Printing and Copying	\$ 750.00
		Software	\$ 2,080.00
		Supplies	\$ 1,600.00
		Telephone, Telecommunications	\$ 700.00
		Website Domain Names	\$ 75.00
		Other Types of Expenses	
		Advertising Expenses	
		Ad Fed Campaign	\$ 10,000.00
		Membership Recruitment	\$ 500.00
		Profile portraits and interview	\$ 250.00
		Insurance - Liability, D and O	\$ 2,600.00
		Membership Materials	\$ 2,000.00
		Louisville Magazine subscription for	\$ 3,180.00
		Memberships and Dues	\$ 750.00
		Staff/Board Development	\$ 5,000.00
		Outreach & Sponsorships	
		Member Collaboration Grants	\$ -
		Outreach & Sponsorships - Other	\$ 1,000.00
		Payroll Expenses	
		Bonuses	\$ -
		Payroll Processing Fees	\$ -
		Salary (Jen)	\$ 29,100.00
		Taxes	\$ 13,000.00
		Salary (Kristen & Angela)	\$ 33,228.00
		Taxes	\$ 13,572.00
		Program Expenses	
		Directory	\$ 33,000.00
		Monthly Meetings	\$ 1,200.00
		South Louisville Programs	\$ 1,000.00
		Travel and Meetings	
		AMIBA Conference	\$ 1,000.00
		Conference, Convention, Meeting Fee	\$ 250.00
		Mileage	\$ 250.00
		Volunteers Orientation & Recognition	\$ 1,000.00
		<u>TOTAL EXPENSE</u>	<u>\$ 298,684.00</u>



keep Louisville weird.

2015 LIBA Board List

(Term limits are 3 years.)

Summer Auerbach (President)

Rainbow Blossom
3738 Lexington Road, Louisville, KY 40207
(502) 498-2351
cell (502) 645-3423
Summer@rainbowblossom.com
Current term ends: January 2016

Carol Besse

Carmichael's Bookstores
2720 Frankfort Avenue, Louisville, KY 40206
(502) 896-6950
cell (502) 387-5971
csbesse@bellsouth.net
Current term ends: January 2018

Toph Bryant (Treasurer)

Kentucky Science Center
727 W. Main St., Louisville, KY 40202
(502) 560-7148
cell (502) 439-0565
Toph.Bryant@louisvilleky.gov
Current term ends: January 2016

Ali Hawthorne

M2 Maximum Media
105 Iola Road, Louisville, KY 40207
cell (502) 262-8580
Ali@m2maxmedia.com
Current term ends: January 2017

Mo McKnight Howe

Revelry Boutique Gallery
980 Barret Ave., Louisville, KY 40204
(502) 414-1278
cell (502) 500-0759
mo@revelrygallery.com
Current term ends: January 2016

Emily McCay

The Diaper Fairy Cottage
1811 Bardstown Rd., Louisville, KY 40205
(502) 708-1018
Cell (502) 445-4221
diaperfairyinfo@gmail.com
Current term ends: January 2018

Lance Minnis

Commonwealth Financial Advisors
9403 Mill Brook Rd, Ste 100, Louisville, KY 40223
(502) 423-7420
Cell (502) 523-2727
lance@cfaky.com
Current term ends: January 2018

Ashley Parker (Vice President)

Parker & Klein Real Estate
3610 Lexington Road, Louisville KY 40207
502-498-4514
Cell (502) 345-8952
Ashley@ParkerAndKlein.com
Current term ends: January 2018

Tori Thompson

Kertis Creative
786 S. Shelby Street, Louisville, KY 40203
(502) 550-1549
Cell (502) 608-6071
tori@kertiscreative.com
Current term ends: January 2018

John Timmons (Secretary)

Louisville Public Media
619 S. 4th Street, Louisville, KY 40202
cell (502) 640-9470
jtimmmons@wfpk.org
Current term ends: January 2016

Chris Vessels

Total Office Products & Service
3326 Kramers Lane, Louisville, KY 40216
(502) 636-9278
cell (502) 905-9279
chris@totalops.com
Current term ends: January 2017

Staff:

Jennifer Rubenstein

Cell (502) 500-4669
jennifer@keeploouisvilleweird.com

Angela Weisser

Cell (502) 836-7334
angela@keeploouisvilleweird.com

Kristen Byrnes

Cell (704) 780-9787
kristen@keeploouisvilleweird.com

11:26 AM
03/06/15
Accrual Basis

Louisville Independent Business Alliance
Profit & Loss
March 2014 through February 2015

	Mar '14 - Feb 15
Ordinary Income/Expense	
Income	
Merchandise Income	1,673.66
Other Types of Income	
Miscellaneous Revenue	144.17
Total Other Types of Income	144.17
Program Income	
Business Membership Dues	62,867.16
Directory	37,616.54
Email Advertising	100.00
Individual Membership Dues	220.00
Profiles	900.00
South Louisville Efforts	781.85
Supporter Status	700.00
Total Program Income	103,185.55
Special Events Income	
10 Year Birthday	2,250.00
Brewfest	99,567.62
Buy Local First Festival	43,698.87
Shift Your Shopping Contest	1,350.00
Special Events Contributions	4,243.32
Special Events Income - Other	150.00
Total Special Events Income	151,259.81
Total Income	256,263.19
Expense	
Contract Services	
Accounting Fees	400.00
Commission Membership New/Renew	150.00
Graphic Design	25.00
Outside Contract Services	34,792.08
Total Contract Services	35,367.08
Credit Card Fees	
Fees from credit card companies	1,707.81
PayPal Fees	347.86
Streamline Pmt Merchant Svc Fee	599.28
Credit Card Fees - Other	32.55
Total Credit Card Fees	2,687.50
Events	
Brewfest Expenses	69,921.78
Buy Local First Fair	21,659.35
Shift Your Shopping Expenses	1,727.68
Weird Birthday Bash	1,960.45
Events - Other	-55.00
Total Events	95,214.26
Facilities and Equipment	
Fixtures and Office Environment	15.00
Rent and Electricity	10,966.69
Facilities and Equipment - Other	8.47
Total Facilities and Equipment	10,990.16
Merchandise Expense	
Sales And Use Tax	368.39
Merchandise Expense - Other	3,473.63
Total Merchandise Expense	3,842.02

11:26 AM
03/06/15
Accrual Basis

Louisville Independent Business Alliance
Profit & Loss
March 2014 through February 2015

	Mar '14 - Feb 15
Operations	
Bank Fees	
ACH Activity Fee	107.75
Bank Fees - Other	367.79
Total Bank Fees	475.54
Email Distribution Service	690.00
Internet Service	446.12
Postage, Mailing Service	1,210.49
Printing and Copying	1,144.53
Software	2,080.11
Supplies	1,345.30
Telephone, Telecommunications	683.75
Website Domain Names	574.16
Total Operations	8,650.00
Other Types of Expenses	
Advertising Expenses	
AAF Ad Campaign	2,000.00
Membership Recruitment	315.67
Profile portraits and interview	240.00
Website Maintenance/Development	334.62
Advertising Expenses - Other	9.98
Total Advertising Expenses	2,900.27
Insurance - Liability, D and O	2,400.04
Membership Materials	2,128.22
Memberships and Dues	735.00
Other Costs	50.00
Research and Studies	148.00
Staff/Board Development	7,335.79
Total Other Types of Expenses	15,697.32
Outreach & Sponsorships	566.00
Payroll Expenses	
Bonuses	1,500.00
Payroll Processing Fees	60.80
Salary	27,437.49
Taxes	11,805.92
Total Payroll Expenses	40,804.21
Program Expenses	
Directory	29,395.72
South Louisville Programs	1,269.28
Total Program Expenses	30,665.00
Travel and Meetings	
AMIBA Conference	1,261.52
Conference, Convention, Meeting	435.00
Mileage	149.16
Total Travel and Meetings	1,845.68
Volunteers Orientation	269.53
Total Expense	246,598.76
Net Ordinary Income	9,664.43
Net Income	9,664.43

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2013Open to Public
Inspection

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990**A For the 2013 calendar year, or tax year beginning****and ending****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization

Louisville Independent Business Alliance, Inc

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
PO Box 4759City or town, state or province, country, and ZIP or foreign postal code
Louisville, KY 40204**F** Name and address of principal officer: Jennifer Rubenstein
PO Box 4759, Louisville, KY 40207**D** Employer identification number

[REDACTED]

E Telephone number
502-500-4667**G** Gross receipts \$ 210,825.**H(a)** Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)**H(c)** Group exemption number ▶**I** Tax-exempt status: ☐ 501(c)(3) ☒ 501(c)(6) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ www.keeplouisvilleweird.com**K** Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other ▶**L** Year of formation:**M** State of legal domicile: KY**Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: Informing citizens of the value provided by locally owned businesses.	
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3 Number of voting members of the governing body (Part VI, line 1a)	0
	4 Number of independent voting members of the governing body (Part VI, line 1b)	600
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	0
	6 Total number of volunteers (estimate if necessary)	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	0.
7b Net unrelated business taxable income from Form 990-T, line 34	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 0. Current Year 52,538.
	9 Program service revenue (Part VIII, line 2g)	0. 158,287.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0. 0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0. 0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0. 210,825.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0. 0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0. 49,703.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
Expenses	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	0. 175,887.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	0. 225,590.
	19 Revenue less expenses. Subtract line 18 from line 12	0. -14,765.
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 23,359. End of Year 8,594.
	21 Total liabilities (Part X, line 26)	0. 0.
	22 Net assets or fund balances. Subtract line 21 from line 20	23,359. 8,594.

Part II Signature Block

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

Sign Here	Signature of officer		Date
	Jennifer Rubenstein, Director		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Meyerowitz & King, PLLC		
	Firm's name ▶ Meyerowitz & King, PLLC	Firm's EIN ▶ [REDACTED]	Check if self-employed <input type="checkbox"/>
	Firm's address ▶ 9710 Park Plaza Ave., Ste. 208 Louisville, KY 40241	Phone no. (502) 587-9833	PTIN [REDACTED]

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Louisville Independent Business
Alliance, Inc

Form 990 (2013)

Page **2**

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: **None**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
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.

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$)
Informing citizens of the value provided by locally owned businesses.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
Offering group branding, promotion, and advertising to LIBA members.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
Creating strong relationships with local government and media.

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses

**Louisville Independent Business
Alliance, Inc**

Form 990 (2013)

Page **3**

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)? <i>If "Yes," complete Schedule A</i>	1	X
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	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? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>	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? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Form **990** (2013)

332003
10-29-13

**Louisville Independent Business
Alliance, Inc**

Form 990 (2013)

Page **4**

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		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>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a 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? <i>If "Yes," complete Schedule L, Part I</i>		
25b 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? <i>If "Yes," complete Schedule L, Part I</i>		
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>		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 "Yes," complete Schedule L, Part III</i>		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):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c 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>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

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**Louisville Independent Business
Alliance, Inc**

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Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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 0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b 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 Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did 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.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b 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.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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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 or note to any line in this Part VI ☒ **X**

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 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.	1a	0	
b Enter the number of voting members included in line 1a, above, who are independent	1b	600	
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 of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		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?	7a		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:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	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

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13 Did the organization have a written whistleblower policy?	13		X
14 Did the organization have a written document retention and destruction policy?	14		X
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?			
a 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		X
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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **► 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) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **►**
Jennifer Rubenstein - 502-500-4669
PO Box 4759, Louisville, KY 40204

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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.

[illegible]

**Louisville Independent Business
Alliance, Inc**

Form 990 (2013)

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

**Louisville Independent Business
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Page **9**

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	52,538.				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			52,538.			
Program Service Revenue	2 a <u>Program Service Revenue</u>	Business Code		116,806.	116,806.		
	b <u>Directory</u>			41,481.	41,481.		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			158,287.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)						
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions.				210,825.	158,287.	0.	0.

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

☒ **X**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) 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				
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	49,703.	49,703.		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	175,887.	175,887.		
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
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 O.)				
a				
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	225,590.	225,590.	0.	0.
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 ☐ if following SOP 98-2 (ASC 958-720)

**Louisville Independent Business
Alliance, Inc**

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	23,359.	2	8,594.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		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 equal line 34)	23,359.	16	8,594.	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	0.	26	0.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	0.	30	0.
	31 Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
	32 Retained earnings, endowment, accumulated income, or other funds	23,359.	32	8,594.
	33 Total net assets or fund balances	23,359.	33	8,594.
	34 Total liabilities and net assets/fund balances	23,359.	34	8,594.

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Alliance, Inc**

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	210,825.
2	Total expenses (must equal Part IX, column (A), line 25)	2	225,590.
3	Revenue less expenses. Subtract line 2 from line 1	3	-14,765.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	23,359.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain 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	8,594.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

Form **990** (2013)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2013

Open to Public
Inspection

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

Name of the organization

Louisville Independent Business
Alliance, Inc

Employer identification number

Form 990, Part VI, Section B, line 11:

Explanation: Information is provided at annual meetings.

Form 990, Part VI, Section C, Line 19:

Explanation: Information provided at annual meetings.

Form 990, Part IX, Line 11g, Other Fees:

Contract Services:

Program service expenses 35,987.

Management and general expenses 0.

Fundraising expenses 0.

Total expenses 35,987.

Program Expenses:

Program service expenses 139,900.

Management and general expenses 0.

Fundraising expenses 0.

Total expenses 139,900.

Total Other Fees on Form 990, Part IX, line 11g, Col A 175,887.

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NAOI

Trey Grayson

Secretary of State

Received and Filed

03/19/2008 3:07:04 PM

Fee Receipt: \$8.00

**ARTICLES OF INCORPORATION
OF
LOUISVILLE INDEPENDENT BUSINESS ALLIANCE, INC.**

The undersigned incorporator executes these Articles of Incorporation for the purpose of forming and does hereby form a non-profit corporation under the laws of the Commonwealth of Kentucky, KRS 273 (the "Act"), in accordance with the following provisions.

**ARTICLE I
NAME**

The name of the Corporation is **LOUISVILLE INDEPENDENT BUSINESS ALLIANCE, INC.** ("Corporation").

**ARTICLE II
PURPOSES AND POWERS**

The purposes for which this Corporation is organized are limited to any legal activity which is permitted to be undertaken by such form of corporation under the Act and pursuant to Section 501(c)(6) of the Internal Revenue Code of 1986, as amended (the "Code").

**ARTICLE III
MEMBERS**

The Corporation shall not have voting members. The management and affairs of the Corporation shall be at all times under the direction of a Board of Directors, as allowed by statute and the Bylaws of the Corporation.

**ARTICLE IV
DIRECTORS**

The business and affairs of the Corporation shall be governed by a Board of Directors. The initial Board of Directors shall have seven (7) members who shall serve until the first annual election of Directors and until their successors are elected and

qualified. The number of Directors may be increased or decreased from time to time as stated in the Bylaws of the Corporation. The names and mailing addresses of the initial Directors are attached as Exhibit A.

ARTICLE V REGISTERED OFFICE AND REGISTERED AGENT

The street address of the initial registered office of the Corporation is 1534 Bardstown Road, Louisville, Kentucky 40205 and the name of the initial registered agent at that address is John D. Timmons.

ARTICLE VI PRINCIPAL OFFICE

The mailing address of the principal office of the Corporation is 1534 Bardstown Road, Louisville, Kentucky 40205 .

ARTICLE VII BYLAWS

The Bylaws of the Corporation shall be adopted, and may be amended or repealed, by the Board of Directors.

ARTICLE VIII OFFICERS

The Bylaws shall identify and provide for the method of election or appointment of the Officers of the Corporation.

ARTICLE IX INDEMNIFICATION

Each person who is or was a Director, or Officer of the Corporation, whether elected or appointed, and each person who is or was serving at the request of the Corporation as a Member, Director, or Officer of another entity, whether elected or appointed, including the heirs, executors, administrators, or estate of any such person, shall be indemnified by the Corporation against any liability, and the reasonable cost or expense (including attorney fees, monetary or other judgments, fines, excise taxes, or penalties and amounts paid or to be paid in settlement) incurred by such person in such person's capacity for the Corporation, subject to limitations contained from time-to-time in the Bylaws of the Corporation.

The Corporation may maintain insurance, at its own expense, to protect itself and any such person against any such liability, cost, or expense, whether or not the Corporation would have the power to indemnify such person against such liability, cost, or expense under the Kentucky Non-Profit Corporation Act or under this Article, but it shall not be obligated to do so.

The indemnification provided by this Article shall not be deemed exclusive of any other rights which those seeking indemnification may have or hereafter acquire under any bylaw, agreement, statute, vote of Members or Board of Directors, or otherwise. If this Article or any portion thereof shall be invalidated on any ground or by any court of competent jurisdiction, the Corporation shall nevertheless indemnify each such person to the full extent permitted by any applicable portion of this Article that shall not have been invalidated or by any other applicable law.

ARTICLE X LIMITATION OF DIRECTOR LIABILITY

No Director shall be personally liable to the Corporation for monetary damages for breach of his or her duties as a Director except for liability: (a) for any transaction in which the Director's personal financial interest is in conflict with the financial interests of the Corporation; (b) for acts or omissions not in good faith or which involve intentional misconduct or are known to the Director to be a violation of law; or (c) for any transaction from which the Director derives an improper personal benefit.

If the Kentucky Revised Statutes (now or in the future) authorize corporate action further eliminating or limiting the personal liability of Directors, then the liability of a Director of the Corporation shall be deemed to be eliminated or limited by this provision to the fullest extent then permitted by the Kentucky Revised Statutes, as so amended. Any repeal or modification of this Article shall not adversely affect any right or protection of a Director of the Corporation existing at the time of such repeal or modification.

ARTICLE XI LIMITATION ON DISTRIBUTIONS

No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to, the Corporation's Members, Directors, Officers, or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article II above. Notwithstanding any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from federal income tax under Section 501(c)(6) of the Internal Revenue Code.

ARTICLE XII DISSOLUTION

Upon the dissolution of the Corporation, assets shall be distributed as directed by the Board of Directors according to the Act so long as such direction does not violate the Code. Any such assets not so disposed of shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the Corporation is then located, exclusively for such purposes or to such organization or organizations as said court shall determine, which are organized and operated exclusively for such purposes.

ARTICLE XIII DURATION

The Corporation shall have a perpetual existence.

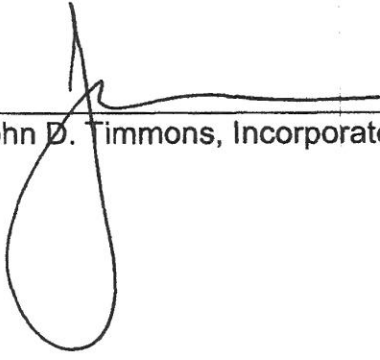
ARTICLE XIV AMENDMENT

These Articles of Incorporation may be amended, altered or repealed by the Corporation's Board of Directors.

ARTICLE XV INCORPORATOR

The name and address of the Incorporator is John D. Timmons, 1534 Bardstown Road, Louisville, Kentucky 40205.

Signed by the Incorporator at Louisville, Kentucky this 17 day of MARCH, 2008.



John D. Timmons, Incorporator

THE FOREGOING ARTICLES OF
INCORPORATION PREPARED BY:

LAKIN LAW OFFICE

A handwritten signature in black ink, appearing to read 'LARRY E. LAKIN', is written over a horizontal line.

LARRY E. LAKIN
Attorney at Law
11003 Bluegrass Parkway, Suite 500A
Louisville, Kentucky 40299
(502) 267-8221

EXHIBIT A

NAMES AND MAILING ADDRESS OF INITIAL DIRECTORS

1. John Timmons, ear X-tacy inc., 1534 Bardstown Road, Louisville, KY 40205
2. Mike Mays, Heine Brothers' Coffee, 2714 Frankfort Ave., Louisville, KY 40206
3. Carol Besse, Carmichael's Bookstores, 2720 Frankfort Ave., Louisville, KY 40206
4. Rebecca Cornwell, ear X-tacy inc., 1534 Bardstown Road, Louisville, KY 40205
5. Don Burch, 2330 Quest Outdoors, Frankfort Ave., Louisville, KY 40206
6. Summer Auerbach, Rainbow Blossom, 3738 Lexington Road, Louisville, KY 40207
7. Scott Roussell, Bluegrass Brewing Company, 636 E Main St., Louisville, KY 40202

Request for Taxpayer Identification Number and Certification

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

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)

Louisville Independent Business Alliance

Business name, if different from above

Check appropriate box: ☐ Individual/Sole proprietor ☒ Corporation ☐ Partnership
☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶
☐ Other (see instructions) ▶

☐ Exempt
payee

Address (number, street, and apt. or suite no.)

1974-A Douglass Boulevard, Suite 101

City, state, and ZIP code

Louisville, KY 40205

Requester's name and address (optional)

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

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

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

Social security number

or

Employer identification number

Part II Certification

Under penalties of perjury, I certify that:

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

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.

Sign
Here

Signature of
U.S. person ▶

Date ▶

3-1-15

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.

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

- The U.S. owner of a disregarded entity and not the entity,

LIBA Staff 2015:

Jennifer Rubenstein

Cell (502) 500-4669

jennifer@keeplouisvilleweird.com

Pay: \$21.81/hour, 30 hours/week

Kristen Byrnes

Cell (704) 780-9787

kristen@keeplouisvilleweird.com

Pay: \$15/hour, 25 hours/week

Angela Weisser

Cell (502) 836-7334

angela@keeplouisvilleweird.com

Pay: \$13/hour, 20 hours/week

(NOTE: Angela's last day was March 4, but she will be replaced within the month with likely the same pay rate.)

LOUISVILLE INDEPENDENT BUSINESS ALLIANCE, INC.

General Information

Organization Number	0688397
Name	LOUISVILLE INDEPENDENT BUSINESS ALLIANCE, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	3/19/2008
Organization Date	3/19/2008
Last Annual Report	2/6/2014
Principal Office	1974-A DOUGLASS BOULEVARD, SUITE 1 LOUISVILLE, KY 40205
Registered Agent	SUMMER AUERBACH 3738 LEXINGTON RD. LOUISVILLE, KY 40207

Current Officers

President	<u>Summer Auerbach</u>
Vice President	<u>Ashley Parker</u>
Secretary	<u>Carol Besse</u>
Treasurer	<u>Toph Bryant</u>
Director	<u>Mike Croce</u>
Director	<u>Ali Hawthorne</u>
Director	<u>Jennifer Beaird Rubenstein</u>
Director	<u>Chris Vessels</u>
Director	<u>Scott Shuffitt</u>
Director	<u>Mo McKnight Howe</u>
Director	<u>Maria Mackey</u>
Director	<u>John Timmons</u>

Individuals / Entities listed at time of formation

Director	<u>JOHN D TIMMONS</u>
Director	<u>MIKE MAYS</u>
Director	<u>CAROL BESSE</u>
Director	<u>REBECCA CORNWELL</u>
Director	<u>DON BURCH</u>
Director	<u>SUMMER AUERBACH</u>
Director	<u>SCOTT ROUSSELL</u>
Incorporator	<u>JOHN D TIMMONS</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.

Annual Report	2/6/2014	1 page	PDF	
Principal Office Address Change	4/30/2013 2:30:45 PM	1 page	PDF	
Annual Report Amendment	4/30/2013	1 page	PDF	
Annual Report	1/14/2013	1 page	PDF	
Registered Agent name/address change	2/17/2012 5:54:54 PM	1 page	PDF	
Principal Office Address Change	2/17/2012 5:49:18 PM	1 page	PDF	
Annual Report	2/17/2012	1 page	PDF	
Annual Report	2/21/2011	1 page	PDF	
Principal Office Address Change	8/10/2010 12:52:44 PM	1 page	PDF	
Registered Agent name/address change	8/10/2010 12:44:35 PM	1 page	PDF	
Annual Report	5/13/2010	1 page	PDF	
Annual Report	9/29/2009	1 page	PDF	
Articles of Incorporation	3/19/2008	6 pages	tiff	PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	2/6/2014 4:59:46 PM	2/6/2014 4:59:46 PM	
Amendment to annual report	4/30/2013 2:47:34 PM	4/30/2013 2:47:34 PM	
Principal office change	4/30/2013 2:30:45 PM	4/30/2013 2:30:45 PM	
Annual report	1/14/2013 2:54:02 PM	1/14/2013 2:54:02 PM	
Annual report	2/17/2012 5:58:16 PM	2/17/2012 5:58:16 PM	
Registered agent address change	2/17/2012 5:54:54 PM	2/17/2012 5:54:54 PM	
Principal office change	2/17/2012 5:49:18 PM	2/17/2012 5:49:18 PM	
Annual report	2/21/2011 2:52:54 PM	2/21/2011 2:52:54 PM	
Principal office change	8/10/2010 12:52:44 PM	8/10/2010 12:52:44 PM	
Registered agent address change	8/10/2010 12:44:35 PM	8/10/2010 12:44:35 PM	
Annual report	5/13/2010 3:06:43 PM	5/13/2010 3:06:43 PM	
Annual report	9/29/2009	9/29/2009	

Add

4:13:22 PM

4:13:22 PM

3/19/2008

3/19/2008

3:07:04 PM

Microfilmed Images
