MAY 8 2015 PH 1:07 A

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

Applicant/Program: Louisville Metro Affordable Housing Trust Fund, Inc.
Executive Summary of Request: Grant to pay for a study by the University of Louisville Urban Studies Institute (USI) to provide a fiscal, economic and social impact analysis of additional spending from a 1% increase in the insurance premium tax to fund affordable housing in Louisville Metro to the LAHTF. This will be a comprehensive study as a result of the recommendation of the Metro Council work group on LAHTF. Private donations have been raised to help pay for this study.
Is this program/project a fundraiser? Is this applicant a faith based organization? Does this application include funding for sub-grantee(s)? Yes No Yes No
I have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I have read the organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required.
9 BUL Allada # 2,000 4/22/15 District # Council Member Signature Amount 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. I serve as a board wember, appointed by the Metro Council President. John Rippy is a fersonal Riverd Bill
Approved by:
Appropriations Committee Chairman Date
Clerk's Office Only:
Request Amount: Committee Amended Appropriation:
Original Appropriation: Council Amended Appropriation:
1 Page

DATE 5/8/15 TIME 1:30

Applicant/Program:

Louisville Metro Affordable Housing Trust Fund, Inc.

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

Applicant/Program:
Louisville Metro Affordable Housing Trust Fund, Inc.

Additional Disclosure and Signatures

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Additional	Council	Office	Disc	osure

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

District #	Council Member Signature	Sb0 -	4-23-15 Date
13 District #	Vicki Oubrey Welch Council Member Signature	#SOU — Amount	4-23-15 Date
District #	Council Member Signature	Sto Amount	4-23-16 Date
2 District #	Louncil Member Signature	Amount	4-23-15 Date
District #	Council Member Signature	Amount	Dale
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date

NDF NON-PROFIT APPLICATION CHECKLIST	FWILTER FORMANIA CONTRACTOR
Legal Name of Applicant Organization: Louisville Metro Affordable Housing Trust Fund, Inc.	T. O. O.
Program Name: Fiscal, economic and social impact study Request Amount: \$16,214.00	Yes/No/N
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?	n/a
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: 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?	Yes
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:	



		SECTION 1 - API	LICANT INFORMATION	ON	
Legal Name of Applicant Organization: Louisville Metro Affordable Housing Trust Fund, Inc.					
(as listed on: http://www.		isiness/recards)			
Main Office Street &	Mailing A	ddress: 1469 S 4th St,	Suite 300, Louisville	KY 40208	
Website: louisvilleah	tf.org				
Applicant Contact:	Rachel	M Hurst	Title:	Executive Director	
Phone:	502-63	7-5372	Email:	rhurst@louisvilleahtf.org	
Financial Contact:	Rachel	M Hurst	Title:	Executive Director	
Phone:	502-63	7-5372	Email:	rhurst@louisvilleahtf.org	
Organization's Repre	sentative	who attended NDF Tra	ining:		
GEO	GRAPHICA	L AREA(S) WHERE PRO	GRAM ACTIVITIES A	RE (WILL BE) PROVIDED	
Program Facility Loca	ation(s):	1469 S 4th St, Loui	sville KY 40208		
Council District(s):		6	Zip Code(s):	40208	
	SECTI	ON 2 - PROGRAM REC	UEST & FINANCIAL I	NFORMATION	
PROGRAM/PROJECT	NAME: LA	HTF Fiscal, Economic	, and Social Impact	Study	
Total Request: (\$)	16,214.	00 Total Metro	Award (this program	n) in previous year: (\$) 0	
Purpose of Request (check all t	hat apply):			
Operating I	unds (gene	erally cannot exceed 3.	3% of agency's total o	pperating budget)	
Programmi	ng/service:	s/events for direct ben	efit to community or	qualified individuals	
☐ Capital Pro	ject of the	organization (equipme	nt, furnishing, buildin	g, etc)	
The Following are Re	quired Att	achments:			
■ IRS Exempt Status Determination Letter Signed lease if rent			ent costs are being requested		
Current Year Projected Budget			IRS Form W9		
List of Board of Directors (include term & term limits			Evaluation form	s if used in the proposed program	
Current financial statement			Annual audit (if required by organization)		
Most recent IRS Form 990 or 1120-H Articles of Incorporation			Faith Based Organization Certification Form, if required		
		endor if request is for	Staff including the 3 highest paid staff		
capital expense					
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:	LAHTF or	perations seed mone	y Amount: (\$)	100,000	
Source:		und (approp,not rec'c		1,000,000	
Source:			Amount: (\$)		
Has the applicant contacted the BBB Charity Review for participation? Yes No					
•		Charity Review Standar			

Page 1 Effective April 2014

Applicant's Initials RMH



SECTION 3 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

The LAHTF was established by a bipartisan act of Metro Council in 2008 (LMCO 40.41-45) as the best way for Metro Council to invest public funds in the kind of housing our community needs: for people on fixed incomes like seniors and people with serious disabilities; for young families starting out; for veterans; and for working people whose wages are not enough to live in Metro Louisville.

The LAHTF is designed to be flexible and respond to evolving community needs by giving grants and/or loans for affordable housing-related activities. The LAHTF is intended to be a catalyst, helping generate participation by other lenders, investors, and partners, further leveraging the impact of each LAHTF dollar.

The whole city benefits when everyone has stable, decent housing, including: businesses that require a stable workforce and workforce housing; neighborhoods that have been devastated by the foreclosure and vacant property crisis; working families that need decent affordable housing and basic economic security; and the community as a whole, due to the economic impact of the LAHTF and reduced crisis-care expenses related to unaffordable housing.



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 University of Louisville Urban Studies Institute (USI) will provide an fiscal, economic, and social impact analysis of additional spending from a 1% increase in the insurance premium tax to fund affordable housing in Louisville Metro to the Louisville Affordable Housing Trust Fund (LAHTF).

The study will be comprehensive, and is the result of a recommendation of the Metro Council Work Group on the LAHTF.

It will examine the impact on Louisville of an increase in the insurance premium tax, a source of dedicated public revenue the Council has been considering, and one which was recommended by the Metro Council Work Group on the LAHTF in May 2014.

The study will look at the effects (economically, fiscally, and socially) of rehabilitating vacant/abandoned properties; revitalizing neighborhoods; creating affordable rental and homeownership opportunities; increasing the property tax base; and the impact of the insurance premium tax to fund these activities; as well as what happens when families and individuals are affordably housed in terms of reduced crisis care costs, increased educational attainment, and decreased health problems.

The up-to-date economic, fiscal, and social impact study will be completed by June 2016.

Page 3

Private donations and funds from the LAHTF will partially fund the study, but additional funding is needed to complete the study. Attached is the bid from U of L's USI, Dr. Janet Kelly, which was selected for the study after soliciting a number of bids. Dr. Kelly has previously produced studies for the Building Industry Association, Metro Council Republicans, and others, and is respected for a nonpartisan presentation of the facts.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s): Funds will be paid to the University of Louisville Urban Studies Institute to cover the cost of the study. The expenses included in the bid (\$21,214) include salary and fringe for research assistants and oversight of the project, indirect costs, and IMPLAN data needed for economic modeling.

Funds will also be paid to an additional vendor yet to be formally selected, for professional layout, design, and printing to improve readability of the document by the general public, at an estimated cost of \$1,000 based on similar previous projects.

The LAHTF has raised private funds to help pay for the study, but still needs additional funds. We are asking Metro Council to help sponsor the study by contributing financially to the cost of conducting the study. We believe the results of this study will be crucial to Metro Council's consideration of the Metro Council LAHTF Work Group recommendations and the Council's ongoing commitment by ordinance to establish dedicated public revenue for the Trust.



C: If this request is a fundraiser, please detail how the proceeds will be spent:
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:
Fifestive Ostober 24, 2012, reimburgements should not be made unless an emergency can be demonstrated
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.



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: Funding will be used to produce a fiscal, economic, and social impact study regarding the LAHTF, its allowable activities as defined by Metro Council ordinance, and the impact of an insurance premium tax on Louisville households and the city in general.

The research will be used by Metro Council to inform discussion regarding the implementation of a permanent source of dedicated ongoing public revenue for the LAHTF, a goal Council established in 2008 in its ordinance.

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.

The Urban Studies Institute at University of Louisville will perform the study. Graphic design of the study will be performed by an additional consultant with a cost estimate of \$1,000.

Private donors, including nonprofits and for-profits, are also contributing to the cost of the study, including commitments from River City Housing, New Directions Housing Corporation, The Louisville Apartment Association, HOPE of Kentucky, and Housing Partnership Inc. This list does not include a number of additional funders that are still finalizing their commitment.



SECTION 5 - PROGRAM/PROJECT BUDGET SUMMARY

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

	Column 1	Column 2	Column (1+2)=3
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (Attach Detailed List)			
G: Professional Service Contracts	\$16,214	\$6,000	\$22,214
H: Program Materials			
I: Community Events & Festivals (Attach Detail List)			-
J: Small Equipment			
K: Capital Equipment			
L: Other Expenses (Attach Detail List)			
*TOTAL PROGRAM/PROJECT FUNDS	\$16,214	\$6,000	\$22,214
% of Program Budget	72 %	28 %	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)	\$6,000
Fees Collected from Program Participants	
Other (please specify)	
Total Revenue for Columns 2 Expenses **	\$6,000

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

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



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

Value of Contribution	Method of Valuation
or decrease in your budget fr YES	rom the current fiscal year



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

- Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
- Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- 3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
- Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
- The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
- Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
- 7. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year and
- 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.

Hon Bill Hollander and Jeana Dunlap, Metro Govt employee, serve on LAHTF Board.

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.

Signatur	e of Legal Signatory:	Knight Killingt		Date:	4/8/2015
Legal Sig	natory: (please print):	Rachel M Hurst		Title:	Executive Director
Phone:	502-637-5372	Extension:	Email:	rhurst@lo	uisvilleahtf.org

Page 8 Effective April 2014 Applicant's Initials RMH

Date:

MAY 1 4 2011

LOUISVILLE METRO AFFORDABLE HOUSING TRUST FUND INC PO BOX 4533 LOUISVILLE, KY 40204 Employer Identification Number: 27-4155836 DLN:

17053101320031

Contact Person:

JEFFERY A CULLEN

ID# 31215

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Public Charity Status:

170(b)(1)(A)(vi)

Form 990 Required:

Yes

Effective Date of Exemption:

December 3, 2010

Contribution Deductibility:

Yes

Addendum Applies:

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)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Sincerely,

Lois G. Lerner

Director, Exempt Organizations

Dis J. Tem

Enclosure: Publication 4221-PC

Louisville Metro Affordable Housing Trust Fund, Inc. 2014 Budget Overview - Operations

Budget Overview Operation	LIG	
RECEIVABLES & INCOME - Operations	\$	129,789.96
Interest on Loan Repayments	\$	15,600.00
Earned Income	\$	2,150.00
Direct Public Support - Grants	\$	5,000.00
Direct Public Support - Government Receivable	\$	100,000.00
Direct Public Support - Corporate	\$	5,000.00
Direct Public Support - Individual	\$	2,000.00
Interest Income	\$	39.96
Events Income	\$ -	-
EXPENSES - Operations	\$	112,577.68
Compensation-related	\$	54,303.75
Contract Services	\$	31,922.69
Advertising/PR	\$	900.00
Books/Subscriptions	\$	225.24
Postage/Mailing Service	\$	3,150.00
Printing/Copying	\$	5,950.00
Supplies	\$	1,080.00
Telephone	\$	900.00
Board-Related Expenses	\$	156.00
Bank Fees	\$	
Insurance	\$	_
Travel and Meetings	\$	3,990.00
Education/Training	\$	<u>-</u> 1
Reserves	\$	10,000.00
Investments	\$	
Net Income from Operations	\$	17,212.28

Board of Directors Louisville Metro Affordable Housing Trust Fund, Inc.

Board members are appointed by the Mayor and confirmed by the Metro Council. This list is current as of 1/2015.

Executive Committee:

President: Kevin Dunlap, Housing Development Manager, REBOUND, Inc. Term expires 12/31/2015.

Treasurer: John Rippy, Senior Vice President, Chief Legal and Compliance Officer, Republic Bank. Term expires 12/31/2014.

Secretary: Cathy Hinko, Executive Director, Metropolitan Housing Coalition. Term expires 12/31/2013.

Board Members:

Jeana Dunlap, Assistant Director, Office of Vacant and Public Property Administration, Louisville Metro Government. Term expires 12/31/2014.

Natalie Harris, Executive Director, Coalition for the Homeless. Term expires 12/31/2016.

Hon. Bill Hollander, Louisville Metro Council District 9 Representative.

Alethea Spearman, Teacher-Assistant, Jefferson County Public Schools Board of Education. Term expires 12/31/2014.

Travis Yates, President and CEO, Beacon Property. Term expires 12/31/2016.

Staff:

Rachel M. Hurst, Executive Director

Louisville Metro Affordable Housing Trust Fund, Inc. Profit & Loss

January through February 2015

	Jan 15	Feb 15	TOTAL
Ordinary Income/Expense	.,		
Income			
43400 · Direct Public Support			
43450 · Individ, Business Contributions	1,025.00	400.00	1,425.00
Total 43400 · Direct Public Support	1,025.00	400.00	1,425.00
45000 · Investments			
45030 · Interest-Savings, Short-term CD	15.21	442.27	457.48
Total 45000 · Investments	15.21	442.27	457.48
47200 · Program Income			
47240 · Program Service Fees	0.00	100.00	100.00
Total 47200 · Program Income	0.00	100.00	100.00
Total Income	1,040.21	942.27	1,982.48
Gross Profit	1,040.21	942.27	1,982.48
Expense			
60015 · Credit Card Fees	0.00	16.05	16.05
60000 · Operations/Program		2000.000	
60005 · Advertising/PR			
60005-1 · Photography	450.00	0.00	450.00
60005-2 · Other	500.00	0.00	500.00
60005 · Advertising/PR - Other	0.00	1,200.00	1,200.00
Total 60005 · Advertising/PR	950.00	1,200.00	2,150.00
,	000.00	1,200.00	2,100.00
60010 · Bank Fees	161.35	36.00	197.35
60020 · Board Expense	30.34	90.76	121.10
60030 · Books, Subscriptions, Reference	0.00	100.00	100.00
60040 · Compensation-related			
60040-2 · Executive Director	9,233.59	5,999.07	15,232.66
60040-1 · Admin fees	923.36	599.91	1,523.27
Total 60040 · Compensation-related	10,156.95	6,598.98	16,755.93
60050 · Contract Services			
60050-1 · Accounting/Bookkeeping Fees	650.00	0.00	650.00
60050-2 · Public Relation Services	1,150.00	0.00	1,150.00
60050-5 · Outside Contract Services	0.00	1,625.00	1,625.00
60050-7 · Organizing/Lobbying Services	1,999.40	3,600.00	5,599.40
Total 60050 · Contract Services	3,799.40	5,225.00	9,024.40
60100 · Postage, Mailing Service	2,585.82	0.00	2,585.82
60110 · Printing and Copying	35.76	41.16	76.92

11:56 AM 03/17/15 Accrual Basis

Louisville Metro Affordable Housing Trust Fund, Inc. **Profit & Loss**

January through February 2015

	Jan 15	Feb 15	TOTAL
65040 · Supplies	0.00	33.57	33.57
67000 · Telephone, Telecommunications			
67050 · Cell Phone	150.00	0.00	150.00
67060 · Land Line	65.21	65.21	130.42
67000 \cdot Telephone, Telecommunications - Other	0.00	0.00	0.00
Total 67000 · Telephone, Telecommunications	215.21	65.21	280.42
68300 · Travel and Meetings			
68310 · Conference, Convention, Meeting	287.50	265.26	552.76
68320 · Travel	40.33	23.60	63.93
Total 68300 · Travel and Meetings	327.83	288.86	616.69
Total 60000 · Operations/Program	18,262.66	13,679.54	31,942.20
Total Expense	18,262.66	13,695.59	31,958.25
Net Ordinary Income	-17,222.45	-12,753.32	-29,975.77
Other Income/Expense			
Other Expense			
80000 · Ask My Accountant	0.00	5.28	5.28
Total Other Expense	0.00	5.28	5.28
Net Other Income	0.00	-5.28	-5.28
Net Income	-17,222.45	-12,758.60	-29,981.05

11:52 AM 03/17/15 Accrual Basis

Louisville Metro Affordable Housing Trust Fund, Inc. Balance Sheet

As of February 28, 2015

	Jan 31, 15	Feb 28, 15
ASSETS		
Current Assets		
Checking/Savings		
10010 · Checking Accounts		
10000 · Operations Checking - Republic	110,029.16	99,349.36
10001 · Money Market Savings - Republic	72,645.39	72,649.85
10002 · Program - Checking - Republic	172,436.60	186,129.33
Total 10010 · Checking Accounts	355,111.15	358,128.54
Total Checking/Savings	355,111.15	358,128.54
Accounts Receivable		
11005 · Accounts Receivable	16,140.00	832.00
Total Accounts Receivable	16,140.00	832.00
Other Current Assets		
25000 · Revolving Loan Fund		
25004 · Heritage Green Development LLC	0.00	0.00
25001-1 · Fuller Center for Housing-Lou	67,500.00	67,500.00
25002 · River City Housing		
25002-3 · River City Housing-Loan 2	8,437.50	8,437.50
Total 25002 · River City Housing	8,437.50	8,437.50
25003 · Habitat for Humanity Metro Lou	15,750.00	15,750.00
Total 25000 · Revolving Loan Fund	91,687.50	91,687.50
13000 · Grants Receivable		
13100 · Metro Louisville Oper/Admin	752,269.53	752,269.53
Total 13000 · Grants Receivable	752,269.53	752,269.53
Total Other Current Assets	843,957.03	843,957.03
Total Current Assets	1,215,208.18	1,202,917.57
Fixed Assets		
15000 · Furniture and Equipment		
18100 · Accumulated Depreciation	-97.00	-97.00
15000 · Furniture and Equipment - Other	970.93	970.93
Total 15000 · Furniture and Equipment	873.93	873.93
Total Fixed Assets	873.93	873.93
TOTAL ASSETS	1,216,082.11	1,203,791.50

11:52 AM 03/17/15 Accrual Basis

Louisville Metro Affordable Housing Trust Fund, Inc. Balance Sheet

As of February 28, 2015

	Jan 31, 15	Feb 28, 15
LIABILITIES & EQUITY		
Liabilities		
Current Liabilities		
Credit Cards		
23000 · VISA - Republic	1,022.27	1,490.26
Total Credit Cards	1,022.27	1,490.26
Total Current Liabilities	1,022.27	1,490.26
Total Liabilities	1,022.27	1,490.26
Equity		
31500 · Temp. Restricted Net Assets		
31501 · National Mortgage Settlement Fd	250,000.00	250,000.00
31502 · Metro Louisville Oper/Admin	700,000.00	700,000.00
31504 · PNC Foundation	10,000.00	10,000.00
Total 31500 · Temp. Restricted Net Assets	960,000.00	960,000.00
31800 · Board Designated Funds		
31810 · Mayor's Funds	49,995.00	49,995.00
31800 · Board Designated Funds - Other	11,500.00	11,500.00
Total 31800 · Board Designated Funds	61,495.00	61,495.00
32000 · Unrestricted Net Assets	210,787.29	210,787.29
Net Income	-17,222.45	-29,981.05
Total Equity	1,215,059.84	1,202,301.24
TOTAL LIABILITIES & EQUITY	1,216,082.11	1,203,791.50

Louisville Metro Affordable Housing Trust Fund, Inc. Profit & Loss by Operations January through February 2015

	Operations	TOTAL
Ordinary Income/Expense		
Income		
43400 · Direct Public Support		
43450 · Individ, Business Contributions	1,425.00	1,425.00
Total 43400 · Direct Public Support	1,425.00	1,425.00
45000 · Investments		
45030 · Interest-Savings, Short-term CD	457.48	457.48
Total 45000 · Investments	457.48	457.48
47200 · Program Income		
47240 · Program Service Fees	100.00	100.00
Total 47200 · Program Income	100.00	100.00
Total Income	1,982.48	1,982.48
Out of Built	1 000 40	1 000 40
Gross Profit	1,982.48	1,982.48
Expense		
60015 · Credit Card Fees	16.05	16.05
60000 · Operations/Program		
60005 · Advertising/PR		
60005-2 · Other	500.00	500.00
60005 · Advertising/PR - Other	600.00	600.00
Total 60005 · Advertising/PR	1,100.00	1,100.00
•		
60010 · Bank Fees	197.35	197.35
60020 · Board Expense	114.01	114.01
60030 · Books, Subscriptions, Reference	100.00	100.00
60040 · Compensation-related		
60040-2 · Executive Director	5,769.62	5,769.62
60040-1 · Admin fees	576.96	576.96
Total 60040 · Compensation-related	6,346.58	6,346.58
60050 · Contract Services		20202
60050-1 · Accounting/Bookkeeping Fees	325.00	325.00
60050-2 · Public Relation Services	575.00	575.00
60050-7 · Organizing/Lobbying Services	5,599.40	5,599.40
Total 60050 · Contract Services	6,499.40	6,499.40
60100 · Postage, Mailing Service	2,579.52	2,579.52
60110 · Printing and Copying	27.18	27.18
65040 · Supplies	33.57	33.57
67000 · Telephone, Telecommunications		
FV 28		

12:05 PM 03/17/15 **Accrual Basis**

Louisville Metro Affordable Housing Trust Fund, Inc. Profit & Loss by Operations January through February 2015

	Operations	TOTAL
67050 · Cell Phone	75.00	75.00
67060 · Land Line	65.20	65.20
67000 · Telephone, Telecommunications - Other	0.00	0.00
Total 67000 · Telephone, Telecommunications	140.20	140.20
68300 · Travel and Meetings		
68310 · Conference, Convention, Meeting	402.78	402.78
68320 · Travel	56.00	56.00
Total 68300 · Travel and Meetings	458.78	458.78
Total 60000 · Operations/Program	17,596.59	17,596.59
Total Expense	17,612.64	17,612.64
Net Ordinary Income	-15,630.16	-15,630.16
Other Income/Expense		
Other Expense		
80000 · Ask My Accountant	5.28	5.28
Total Other Expense	5.28	5.28
Net Other Income	-5.28	-5.28
Net Income	-15,635.44	-15,635.44

Louisville Metro Affordable Housing Trust Fund, Inc. Profit & Loss by Programs

January through February 2015

	HOME Fund (Programs)	Programs - Other (Programs)	Total Programs
Ordinary Income/Expense			
Expense			
60000 · Operations/Program			
60005 · Advertising/PR			
60005-1 · Photography	0.00	450.00	450.00
60005 · Advertising/PR - Other	0.00	600.00	600.00
Total 60005 · Advertising/PR	0.00	1,050.00	1,050.00
60020 · Board Expense	0.00	7.09	7.09
60040 · Compensation-related			
60040-2 · Executive Director	0.00	9,463.04	9,463.04
60040-1 · Admin fees	0.00	946.31	946.31
Total 60040 · Compensation-related	0.00	10,409.35	10,409.35
60050 · Contract Services			
60050-1 · Accounting/Bookkeeping Fees	0.00	325.00	325.00
60050-2 · Public Relation Services	0.00	575.00	575.00
60050-5 · Outside Contract Services	0.00	1,625.00	1,625.00
Total 60050 · Contract Services	0.00	2,525.00	2,525.00
60400 - Pontago Mailing Sonting	0.00	6.20	6.20
60100 · Postage, Mailing Service		6.30	6.30
60110 · Printing and Copying 67000 · Telephone, Telecommunications	0.00	49.74	49.74
67050 · Cell Phone	0.00	75.00	75.00
67060 · Land Line	0.00	65.22	65.22
67000 · Telephone, Telecommunications - Other	0.00	0.00	0.00
Total 67000 · Telephone, Telecommunications	0.00	140.22	140.22
68300 · Travel and Meetings			
68310 · Conference, Convention, Meeting	53.39	96.59	149.98
68320 · Travel	3.45	4.48	7.93
Total 68300 · Travel and Meetings	56.84	101.07	157.91
Total 60000 · Operations/Program	56.84	14,288.77	14,345.61
Total Expense	56.84	14,288.77	14,345.61
Net Ordinary Income	-56.84	-14,288.77	-14,345.61
Net Income	-56.84	-14,288.77	-14,345.61

Louisville Metro Affordable Housing Trust Fund, Inc. Profit & Loss by Programs January through February 2015

	TOTAL
Ordinary Income/Expense	
Expense	
60000 · Operations/Program	
60005 · Advertising/PR	
60005-1 · Photography	450.00
60005 · Advertising/PR - Other	600.00
Total 60005 · Advertising/PR	1,050.00
60020 · Board Expense	7.09
60040 · Compensation-related	
60040-2 · Executive Director	9,463.04
60040-1 · Admin fees	946.31
Total 60040 · Compensation-related	10,409.35
60050 · Contract Services	
60050-1 · Accounting/Bookkeeping Fees	325.00
60050-2 · Public Relation Services	575.00
60050-5 · Outside Contract Services	1,625.00
Total 60050 · Contract Services	2,525.00
60100 · Postage, Mailing Service	6.30
60110 · Printing and Copying	49.74
67000 · Telephone, Telecommunications	
67050 · Cell Phone	75.00
67060 · Land Line	65.22
67000 · Telephone, Telecommunications - Other	0.00
Total 67000 · Telephone, Telecommunications	140.22
68300 · Travel and Meetings	
68310 · Conference, Convention, Meeting	149.98
68320 · Travel	7.93
Total 68300 · Travel and Meetings	157.91
Total 60000 · Operations/Program	14,345.61
Total Expense	14,345.61
Net Ordinary Income	-14,345.61
Net Income	-14,345.61

752,269.53 752,269.53

TOTAL

Louisville Metro Affordable Housing Trust Fund, Inc. Account QuickReport All Transactions

12:12 PM 03/17/15 Accrual Basis

Content Journal 1971/2012 S. Loukholle Menti Communication Clinic Clinic Content Loukholl 1971/2012 S. Loukholle Menti Communication Clinic		Type	Date	Num	Name	Memo	Split	Amount	Balance
Content about 1971-1072	13000 · Grants Receivable 13100 · Metro Louisville Oper/Admin								
Control Actual 1971/2012 2 Control Actual Name Concurrent-School Court Control Actual Name Control A		General Journal	01/31/2012	3	Louisville Metro Government-Seed Grant	Record investment account held by Metro	31502 · Metro Louisville Oper/Admin	900,000,006	900,000,006
Control Actually 1700/2012 Control Market Control		General Journal	10/31/2012	89	Louisville Metro Government-Seed Grant	October 2012 interest	45030 · Interest-Savings, Short-term CD	221.96	900,221,96
Content a Journal 2012/02/2 Louisella Mario Communicational Cent Section Content a Journal 2012/02/2 Louisella Mario Communicational Cent Section Center a Journal 2012/02/2 Louisella Mario Communicational Center and Section Center a Journal 2012/02/2 Louisella Mario Communicational Center and Section Center a Journal 2012/02/2 Louisella Mario Communicational Center and Section Center and Secti		General Journal	11/30/2012	6	Louisville Metro Government-Seed Grant	November 2012 interest	45030 · Interest-Savings, Short-term CD	214.80	900,436.76
Content a Journal 2012/02/2 1. Louiselle Marco Communicationed Card December 2012 febreat 45405 Consement Card Card State 152 at 24405 Consement Card Card Card Card Card Card Card Card		General Journal	12/03/2012	9	Louisville Metro Government-Seed Grant	To record release of Metro Louisville Oper/Admin	31502 · Metro Louisville Oper/Admin	-100,000,00	800,436.76
Content Journal 7017/2012 11 Luiside Metro Commenta Seed Cont Intent Lange 2010 Intent Serving Stockers 2010 1014 2010 2014 2014 2014 2014 2014 2014 2014 2014 2014 2014 2		General Journal	12/31/2012	10	Louisville Metro Government-Seed Grant	December 2012 interest	45030 · Interest-Savings, Short-term CD	183.88	800,620.64
Caretina Journal Control State Control Building Control Buildi		General Journal	12/31/2012	=	Louisville Metro Government-Seed Grant	Interest from 2007 through 2012	43405 · Government Grants	48,295,71	848,916,35
Depot		General Journal	03/31/2013	12	Louisville Metro Government-Seed Grant	January, February, March 2013 interest	45030 · Interest-Savings, Short-term CD	523.49	849,439.84
Propert Giological Signature Giological Signature Sign		Deposit	04/30/2013	18	Louisville Metro Government-Seed Grant	April 2013 interest	45030 · Interest-Savings, Short-term CD	174.60	849,614,44
Deposit		Deposit	05/31/2013	18	Louisville Metro Government-Seed Grant	May 2013 interest	45030 · Interest-Savings, Short-term CD	180.42	849,794.86
Cantenal Journal 17750721 3 Louiselle Meto Coverment-Seed Clark To record release of Metro Louiselle Application 17507073 3 Louiselle Meto Coverment-Seed Clark Aggint 2713 interest 45000 interest-Seedy-Short-farm Clark 15000 1		Deposit	06/30/2013	18	Louisville Metro Government-Seed Grant	June 2013 interest	45030 · Interest-Savings, Short-term CD	174.60	849,969.46
Dispose		General Journal	07/15/2013	13	Louisville Metro Government-Seed Grant	To record release of Metro Louisville Oper/Admin	31502 · Metro Louisville Oper/Admin	-100,000.00	749,969,46
Depois Octobar Octob		Deposit	07/31/2013	19	Louisville Metro Government-Seed Grant	July 2013 interest	45030 · Interest-Savings, Short-term CD	160,70	750,130.16
Deposit 10/30/2013 21 Louisville Metro Covernment-Stand Grant September 2015 interest 45000 interest-Stanryp, Stort-term CD 15/32 10/32/10/2013 21 Louisville Metro Covernment-Stand Grant September 2013 interest 45000 interest-Stanryp, Stort-term CD 15/32 10/32/10/2013 22 Louisville Metro Covernment-Stand Grant March 2014 interest 45000 interest-Stanryp, Stort-term CD 15/32 10/32/10/2013 23 Louisville Metro Covernment-Stand Grant March 2014 interest 45000 interest-Stanryp, Stort-term CD 11/32 10/32/10/2013 23 Louisville Metro Covernment-Stand Grant March 2014 interest 45000 interest-Stanryp, Stort-term CD 11/32 10/32/10/2013 23 Louisville Metro Covernment-Stand Grant March 2014 interest 45000 interest-Stanryp, Stort-term CD 11/32 10/32/10/2013 23 Louisville Metro Covernment-Stand Grant March 2014 interest 45000 interest-Stanryp, Stort-term CD 11/32 10/32/10/2014 23 Louisville Metro Covernment-Stand Grant March 2014 interest 45000 interest-Stanryp, Stort-term CD 11/32 10/32/10/2014 23 Louisville Metro Covernment-Stand Grant March 2014 interest 45000 interest-Stanryp, Stort-term CD 11/32 10/32/10/2014 24 Louisville Metro Covernment-Stand Grant March 2014 interest 45000 interest-Stanryp, Stort-term CD 11/32 10/32/10/2014 24 Louisville Metro Covernment-Stand Grant March 2014 interest 45000 interest-Stanryp, Stort-term CD 11/32 10/32/10/2014 24 Louisville Metro Covernment-Stand Grant December 2014 interest 45000 interest-Stanryp, Stort-term CD 11/32 11/32/10/2014 24 Louisville Metro Covernment-Stand Grant December 2014 interest 45000 interest-Stanryp, Stort-term CD 11/32 10/32/10/2014 24 Louisville Metro Covernment-Stand Grant December 2014 interest 45000 interest-Stanryp, Stort-term CD 11/32 10/32/10/2014 24 Louisville Metro Covernment-Stand Grant December 2014 interest 45000 interest-Stanryp, Stort-term CD 11/32 10/32/10/2014 24 L		Deposit	08/31/2013	20	Louisville Metro Government-Seed Grant	August 2013 interest	45030 · Interest-Savings, Short-term CD	159.34	750,289,50
Deposit 1707/1071 22 Louisvalle Metro Convernment-Seed Grant November 2013 interest 45000 interest-Savings, Short-term CD 154.20		Deposit	09/30/2013	21	Louisville Metro Government-Seed Grant	September 2013 interest	45030 · Interest-Savings, Short-term CD	154.20	750,443.70
Depot		Deposit	10/31/2013	22	Louisville Metro Government-Seed Grant	October 2013 interest	45030 · Interest-Savings, Short-term CD	159.34	750,603,04
Paperal 126170713 24 Louisville Mario Government-Seed Grant Deposit 2 10100701 2 1 1 10100701 2 1 1 1 1 1 1 1 1 1		Deposit	11/20/2013	23	Louisville Metro Government-Seed Grant	November 2013 interest	45030 · Interest-Savings, Short-term CD	154.20	750,757,24
Deposit 0.103 (0.004 2.5 Louisville Merio Government-Seed Grant Explanation		Deposit	12/31/2013	24	Louisville Metro Government-Seed Grant	December 2013 interest	45030 · Interest-Savings, Short-term CD	159.34	750,916,58
Deposit 2025/2014 25 Louisville Metro Convernment-Seed Grant March 2014 interest 45001 Interest-Savings Short-term CD 114,70		Deposit	01/31/2014	25	Louisville Metro Government-Seed Grant	January 2014 interest	45030 · Interest-Savings, Short-term CD	114.70	751,031,28
Deposit 03/301/2014 22 Louisville Metro Covernment-Seed Crant March 2014 interest 45000 · Interest-Savings Short-term CD 111.00		Deposit	02/28/2014	56	Louisville Metro Government-Seed Grant	February 2014 interest	45030 · Interest-Savings, Short-term CD	103.60	751,134.88
Deposit Oxford Action Oxford Action Oxford Action Action Oxford Action Action Oxford Action Action Oxford Action		Deposit	03/31/2014	27	Louisville Metro Government-Seed Grant	March 2014 interest	45030 · Interest-Savings, Short-term CD	114.70	751,249.58
Deposit OSG120014 29 Louisville Metric Covernment-Seed Grant June 2014 Interest 45030 - Interest-Savings, Short-term CD 115.01		Deposit	04/30/2014	28	Louisville Metro Government-Seed Grant	April 2014 interest	45030 · Interest-Savings, Short-term CD	111.00	
Deposit OSTO/2014 30 Louisville Metro Government-Seed Grant June 2014 interest 45030 Interest-Savings Short-term CD 115.01 Deposit OST3/2014 31 Louisville Metro Government-Seed Grant July 2014 interest 45030 Interest-Savings Short-term CD 115.01 Deposit OST3/2014 32 Louisville Metro Government-Seed Grant Osta/2014 interest 45030 Interest-Savings Short-term CD 115.01 Deposit 1051/2014 32 Louisville Metro Government-Seed Grant Osta/2014 interest 45030 Interest-Savings Short-term CD 115.01 Deposit 115/2014 32 Louisville Metro Government-Seed Grant Osta/2014 interest 45030 Interest-Savings Short-term CD 115.01 Deposit 115/2014 32 Louisville Metro Government-Seed Grant Osta/2014 interest 45030 Interest-Savings Short-term CD 115.01 Louisville Metro Government-Seed Grant Osta/2014 interest 45030 Interest-Savings Short-term CD 115.01 Louisville Metro Government-Seed Grant Osta/2014 interest 45030 Interest-Savings Short-term CD 115.01 Louisville Metro Government-Seed Grant Osta/2014 interest 45030 Interest-Savings Short-term CD 115.01 Louisville Metro Government-Seed Grant Osta/2014 interest 45030 Interest-Savings Short-term CD 115.01 Louisville Metro Government-Seed Grant Osta/2014 interest 45030 Interest-Savings Short-term CD 115.01 Louisville Metro Government-Seed Grant Osta/2014 interest 45030 Interest-Savings Short-term CD 115.01 Louisville Metro Government-Seed Grant Osta/2014 Osta/20		Deposit	05/31/2014	29	Louisville Metro Government-Seed Grant	May 2014 interest	45030 · Interest-Savings, Short-term CD	115.01	751,475.59
Deposit Off JED A		Deposit	06/30/2014	30	Louisville Metro Government-Seed Grant	June 2014 interest	45030 · Interest-Savings, Short-term CD	111.30	751,586.89
Deposit 05/91/2014 32 Louisville Metro Government-Seed Grant August 2014 interest 45030 · Interest-Savings. Short-term CD 111.30 Deposit 1037/2014 34 Louisville Metro Government-Seed Grant November 2014 interest 45030 · Interest-Savings. Short-term CD 111.30 Deposit 1103/2014 35 Louisville Metro Government-Seed Grant November 2014 interest 45030 · Interest-Savings. Short-term CD 111.30 Deposit 1103/2014 35 Louisville Metro Government-Seed Grant November 2014 interest 45030 · Interest-Savings. Short-term CD 111.30 Let Louisville Metro Government-Seed Grant November 2014 interest 45030 · Interest-Savings. Short-term CD 111.30 Let Louisville Metro Government-Seed Grant November 2014 interest 45030 · Interest-Savings. Short-term CD 111.30 Let Louisville Metro Government-Seed Grant November 2014 interest 45030 · Interest-Savings. Short-term CD 111.30 Let Louisville Metro Government-Seed Grant November 2014 interest 45030 · Interest-Savings. Short-term CD 111.30 Let Louisville Metro Government-Seed Grant November 2014 interest 45030 · Interest-Savings. Short-term CD 111.30 Let Louisville Metro Government-Seed Grant November 2014 interest 45030 · Interest-Savings. Short-term CD 111.30 Let Louisville Metro Government-Seed Grant November 2014 interest 45030 · Interest-Savings. Short-term CD 111.30 Let Louisville Metro Government-Seed Grant November 2014 interest 45030 · Interest-Savings. Short-term CD 111.30 Let Louisville Metro Government-Seed Grant November 2014 interest Savings. Short-term CD 111.30 Let Louisville Metro Government-Seed Grant November 2014 interest Savings. Short-term CD 111.30 Let Louisville Metro Government-Seed Grant November 2014 interest Savings. Short-term CD 111.30 Let Louisville Metro Government-Seed Grant November 2014 interest Savings. Short-term CD 111.30 Let Louisville Metro Government-See		Deposit	07/31/2014	31	Louisville Metro Government-Seed Grant	July 2014 interest	45030 · Interest-Savings, Short-term CD	115.01	751,701.90
Deposit 1130 Deposit 1031/2014 31 Louisville Metro Government, Seed Grant October 2014 interest 45030 · Interest-Savings, Short-term CD 113.00		Deposit	08/31/2014	32	Louisville Metro Government-Seed Grant	August 2014 interest	45030 · Interest-Savings, Short-term CD	115.01	751,816.91
Deposit 11/30/2014 34 Louisville Metro Government-Seed Grant Otober 2014 interest 45030 - Interest-Savings, Short-term CD 11/30		Deposit	09/30/2014	33	Louisville Metro Government-Seed Grant	September 2014 interest	45030 · Interest-Savings, Short-term CD	111.30	751,928.21
Deposit 1130/2014 35 Louisville Metro Government-Seed Grant December 2014 interest 45030 · Interest-Savings. Short-term CD 11130 144 12/31/2014 36 Louisville Metro Government-Seed Grant December 2014 interest 45030 · Interest-Savings. Short-term CD 115.01 144 Soft Coat Soft Coat Soft Coat Soft Coat Soft Coat 752,289.53 144 Soft Coat General Journal 07/01/2013 218 HOME Funds 2013-14 Home funds Soft Coat 31506 · HOME Funds 2013-14 0.000 -Admin General Journal 07/01/2013 218 HOME Funds 2013-14 Home funds for Housing Support 31506 · HOME Funds 2013-14 0.000 -India for Housing Support General Journal Office Housing Support 318 HOME Funds 2013-14 Home funds for Housing Support 1000 0.000		Deposit	10/31/2014	34	Louisville Metro Government-Seed Grant	October 2014 interest	45030 · Interest-Savings, Short-term CD	115.01	752,043.22
Deposit 1231/2014 36 Louisville Metro Government-Seed Grant December 2014 interest Savings, Shortchern CD 115.01 14		Deposit	11/30/2014	35	Louisville Metro Government-Seed Grant	November 2014 interest	45030 · Interest-Savings, Short-term CD	111.30	752,154.52
752,269,53 762,272 Thai 07/01/2013 21R HOME Funds 2013-14 Home funds for Administrative Support 31506 · HOME Funds 2013-14 0.00 The funds for Housing Support 31506 · HOME Funds 2013-14 0.0		Deposit	12/31/2014	36	Louisville Metro Government-Seed Grant	December 2014 interest	45030 · Interest-Savings, Short-term CD	115,01	752,269,53
Soft Cost Soft	al 13100 · Metro Louisville Oper/Adm	.⊊						752,269.53	752,269,53
14 15 15 15 15 15 15 15									
Soft Cost Home funds for Home funds for Housing Support Home funds for Home funds for Housing Support Home f	00 · Home Funds 2013-14								
- Admin General Journal 07/01/2013 21R HOME Funds 2013-14 Home funds for Administrative Support General Journal 07/01/2013 21R HOME Funds 2013-14 Home funds for Housing Support General Journal 07/01/2013 21R HOME Funds 2013-14 Home funds for Housing Support General Journal 07/01/2013 21R HOME Funds 2013-14 Home funds for Housing Support General Journal 07/01/2013 21R HOME Funds 2013-14 Discussion 2013-14	13200-3 - Home Funds Soft Cost			21R	HOMF Flinds 2013,14	Tool South amount	31506 · HOMF Funds 2013-14	000	000
Tunds Soft Cost Admin General Journal 07/01/2013 21R HOME Funds 2013-14 Home funds for Administrative Support 31506 · HOME Funds 2013-14 0.00 Admin General Journal 07/01/2013 21R HOME Funds 2013-14 Home funds for Housing Support General Journal 07/01/2013 21R HOME Funds 2013-14 0.00 GOOD		Certeral courties		21.2	100000000000000000000000000000000000000	1000 100 0000	The same of the sa	8	5
Companies	Total 13200-3 · Home Funds Soft C	ost						0.00	0.00
General Journal 07/01/2013 21R HOME Funds 2013-14 Home funds for Administrative Support 31508 · HOME Funds 2013-14 0.00 0.00	13200-2 · Home Funds - Admin								
Tron Housing Support General Journal 07/01/2013 21R HOME Funds 2013-14 Home funds for Housing Support General Journal 07/01/2013 21R HOME Funds 2013-14 0.00 0.00 775,258 53 75,258		General Journal		21R	HOME Funds 2013-14	Home funds for Administrative Support	31506 · HOME Funds 2013-14	00'0	00.00
Found Support Control Contro	Total 13200-2 · Home Funds - Adm	.⊑						00'0	0.00
General Journal 07/01/2013 21R HOME Funds 2013-14 Home funds for Housing Support 31506 · HOME Funds 2013-14 0.00 General Journal 07/01/2013 21R HOME Funds 2013-14 0.00 0.00 752,269,53 752,26	43200 4 . Homo Eunde for Housin	trough 6							
0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Table Fulles for the source	General Journal		21R	HOME Funds 2013-14	Home funds for Housing Support	31506 · HOME Funds 2013-14	00'0	00'00
0.00 752,269,53 752,28	Total 13200-1 · Home Funds for Ho	using Support						00.00	0.00
752,269.53 752,22									
752,269.53	il 13200 - Home Funds 2013-14							0.00	00'00
	00 · Grants Receivable							752,269.53	752,269.53

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

► Information about Form 990 and its instructions is at www irs gov/torm990. For the 2013 calendar year, or tay year heginning

АГ	or the	2013 Calendar year, or tax year beginning	enumy				
B C	heck if oplicable	LOUISVILLE METRO AFFORDABLE HOUSING		D Employer identifi	ication number		
	Jchang∈]Name	TRUST FUND INC		27-4155836			
\vdash	Jchang∈ ∏Initial		Room/suite				
H	∃return]Termin		NOUII/Suite	[1] [- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	637-5372		
				G Gross receipts \$ 1,004,043.			
F	⊒return]Applica tion			H(a) Is this a group r			
	pendin			for subordinates	? Yes X No		
		SAME AS C ABOVE		H(b) Are all subordinates i			
1 T	ax-exe	mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) o	or 52°	7 If "No," attach a	list. (see instructions)		
		e: ▶ WWW.LOUISVILLEAHTF.ORG		H(c) Group exemption			
K F	orm of	organization: X Corporation Trust Association Other	L Yea	r of formation: 2011	M State of legal domicile; KY		
Pa	rt I	Summary					
ø	1 1	Briefly describe the organization's mission or most significant activities: $\overline{ ext{THE}}$	LAHTF	WAS FORMED	BY METRO		
Governance		COUNCIL IN 2008 TO CREATE AFFORDABLE HOUS					
ern		Check this box if the organization discontinued its operations or dispose					
Sov		Number of voting members of the governing body (Part VI, line 1a)			12		
ంఠ		Number of independent voting members of the governing body (Part VI, line 1b)			12		
ies		Total number of individuals employed in calendar year 2013 (Part V, line 2a)			40		
Activities		Total number of volunteers (estimate if necessary)			0.		
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			0.		
	b	Net unrelated business taxable income from Form 990-T, line 34	······	Prior Year	Current Year		
		Contributions and grants (Part VIII. line 1b)	-	1,366,049.	1,001,352.		
Revenue		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		0.	450.		
ver		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3300 (00000001000	692.	2,241.		
Re	1000000	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	ACCOUNT OF THE PERSON	0.	0.		
	1000000	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,366,741.	1,004,043.		
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.		
	0.000	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
Ø		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.		
Expenses	0.0000000000000000000000000000000000000	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
cbe		Total fundraising expenses (Part IX, column (D), line 25)	0.				
Ë	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		70,436.	109,177.		
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		70,436.	109,177.		
- 1		Revenue less expenses. Subtract line 18 from line 12		1,296,305.	894,866.		
s or			В	eginning of Current Year	End of Year		
sets	20	Total assets (Part X, line 16)		1,375,097.	2,256,261.		
Net Assets Fund Balanc		Total liabilities (Part X, line 26)		13,808.	106.		
킾	22	Net assets or fund balances. Subtract line 21 from line 20		1,361,289.	2,256,155.		
Pa	art II	Signature Block Ities of perjury, I declare that I have examined this return, including accompanying schedule		wants and to the best of m	universal adapt and ballof it is		
		tties of perjury, I declare that I nave examined this return, including accompanying schedule t, and complete. Declaration of preparer (other than officer) is based on all information of wi			ly knowledge and beller, it is		
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wi	non prepare	i ilas ally knowledge.			
C:	_	Signature of officer		Date			
Sign		RACHEL HURST, EXECUTIVE DIRECTOR					
Her	е	Type or print name and title					
		Print/Type preparer's name Preparer's signature		Date Check	PTIN		
Paid	i	BARBARA A. LASKY		if self-employ	P00015280		
	arer	Firm's name ANDERSON, BRYANT, LASKY & WINSL	OW, P	SC Firm's EIN	61-1227965		
	Only	Firm's address 943 SOUTH FIRST STREET			- A TOMOR		
	-	LOUISVILLE, KY 40203		Phone no. (5	02)584-9793		
May	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No		

Pa	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: THE LOUISVILLE AFFORDABLE HOUSING TRUST FUND (LAHTF) WAS CREATED IN	
	2008 AS THE WAY FOR METRO COUNCIL TO INVEST PUBLIC FUNDS IN THE KIND	
	OF HOUSING OUR COMMUNITY NEEDS: FOR PEOPLE ON FIXED INCOMES LIKE	
	SENIORS AND PEOPLE WITH SERIOUS DISABILITIES; FOR YOUNG FAMILIES	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? 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?	No
4	If "Yes," describe these changes on Schedule O. 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	
4a	revenue, if any, for each program service reported. (Code:) (Expenses \$ 78,923. including grants of \$) (Revenue \$ 450 2013 ACCOMPLISHMENTS INCLUDE RELEASING AN LAHTF BUSINESS PLAN, RELEASING OUR FIRST REQUEST FOR PROPOSALS AND SELECTING 11 AFFORDABLE HOUSING VACANT/ABANDONED PROPERTY REHABILITATION PROJECTS THAT WE COMMITTED TO FUND THROUGH OUR REVOLVING LOAN FUND, AND SECURING A COMMITMENT FOR AN ADDITIONAL \$1M FOR AFFORDABLE HOUSING PROJECTS.	•)
4b	(Code:) (Expenses \$)
4c	(Code:) (Expenses \$	_)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 78,923.	
	Form 990 (20	101

Page 3

Form 990 (2013) TRUST FUND I
Part IV Checklist of Required Schedules

3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public offices? If Yes, "complete Schedule C, Part I I 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(i)(4) election in effect during the tax year? If "Yes," complete Schedule C, Part II II 5 Is the organization a section 501(i)(4), 501(i)(5), or 501(i)(6) or 501(i)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 if "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization calcelium of voices of funds or associated funds or associated to preserve open space, the environment, historical transaction account is ability, serve as a custodian for amounts not listed in Part X: or provide credit counseling, debt management, credit repair, or debt negotiation services? 8 Did the organization in eport an amount in Part X, line 21, for assorw or custodial account liability, serve as a custodian for amounts not listed in Part X: or provide credit counseling, debt management, credit repair, or debt negotiation services? 9 X 10 Did the organization services? 11 If the organization services to any of the following questions is "yes," then complete Schedule D, Part V w. 12 Did the organization services to any of the following questions is "yes," then complete Schedule D, Part V w. 13 Did the organization services to any of the following questions is "yes," then complete Schedule D, Part X w. 14 Did the organization services or any of the following questions is "yes," then complete Schedule D, Part X w. 15 Did the organization services or consolidated francial statements for the tax year? 16 Did the organizati				Yes	No
2 Is the organization required to complete Schedule B. Schedule of Contributors 3 Did the organization engage in effect or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C. Part II 4 Section 501(6)(8) organizations. Did the organization engage in lobbying activities or have a section 501(ft) election in effect during the tax, year? If "Yes," complete Schedule C. Part II 5 Is the organization a section 501(c)(6), 501(c)(6), 50 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C. Part II 6 Did the organization an animal any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment or any or the funds are sent to preserve open space, the environment, historical areas, or historic structures? If "Yes," complete Schedule D, Part II 5 Did the organization report an amount in Part X, line 21, for escrov or custodial account liability; serve as a custodian for amounts not listed in Part X, to provide credit counseling, debt management, credit repair, or debt negotiation services? 1 If "Yes," complete Schedule D, Part IV 1 Did the organization report an amount for effect of the consuments of the report o	1				
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during the tax year // If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4, 501(c)(s), or 501(c)(s) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98.19? // "Yes," complete Schedule C, Part III Did the organization maintain may 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 of west complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures of "Yes," complete Schedule D, Part III 7	3	public office? If "Yes," complete Schedule C, Part I			х
5 Is the organization a section 501(c)(li), 501(c)(li) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 8-19? If "Yes," complete Schedule C, Part II of the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II of the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II of the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III of the organization amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not 1sted in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV of the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V or as applicable. 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V or Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V in Did the organization report an amount for investments - program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V in Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X in Did the organization report an amount for other assets in Part X, lin	4			х	
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b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the United States? 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 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 report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a Did the organization add the organization attach a copy of its audited financial statements to this return?	12a		12a		х
13	b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
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20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20a X 20b	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		- 2	_
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	202	Did the organization operate one or more beenital facilities? If "Ves " complete Schodule U			
				\dashv	<u> </u>
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LOUISVILLE METRO AFFORDABLE HOUSING TRUST FUND INC

Form 990 (2013)

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? If "Yes," complete Schedule I, Parts I and II	21		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? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			Х
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			1
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,	26		x
.=	complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		-
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	-	34.2	
28	instructions for applicable filing thresholds, conditions, and exceptions):			
2	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
Ü	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		7.	
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			Carriero.
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			.,
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X	(0040)

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Form 990 (2013) TRUST FUND INC Part V Statements Regarding Other IRS Filings and Tax Compliance 27-4155836

	Check if Schedule O contains a response or note to any line in this Part V				X
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 2			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b (
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portable gaming			
	(gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	2			
	filed for the calendar year ending with or within the year covered by this return	2a (
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions				
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	D	3b		15
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			1.18	
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	ccounts.			
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	tion?	5b		X
С	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 th	e 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 contribution	ons or gifts			
	were not tax deductible?	***************************************	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services.	rices provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required			-
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year				
. е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did				
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at a	ny time during the year?	8		parents.
9	Sponsoring organizations maintaining donor advised funds.				
а	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		NOWS.
10	Section 501(c)(7) organizations. Enter:	. 1			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b		10b			
11	Section 501(c)(12) organizations. Enter:	11a			
a	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	1 Ia			
b	The state of the s	446			
100	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b	120	SERVE.	
		12b	12a	9288	
	to the control of the	120			
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?		13a	3-20	
а	Note. See the instructions for additional information the organization must report on Schedule O.		104	100	73 FE 3.
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
D	organization is licensed to issue qualified health plans	13b			
^	Enter the amount of reserves on hand	13c		•	
с 14а		100	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14b		
		,	-	990	2013)

TRUST FUND INC

27-4155836

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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
Sec	tion 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 12	2007	1157	021
	If there are material differences in voting rights among members of the governing body, or if the governing		7 63	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		11112	24
b	Enter the number of voting members included in line 1a, above, who are independent 1b 12	e21.3	-1-1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		at de A	
	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
	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
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			and
	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:		S Let	
177.00	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
J	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion 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		Х
	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	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	vit.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
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	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent		if w	18
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			18
а	The organization's CEO, Executive Director, or top management official	15a		X
	Other officers or key employees of the organization	15b		Х
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	-1565	RAYA!	
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
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	N. C.		4.75
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	1.02		
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)	availat	ole	
.0	for public inspection. Indicate how you made these available. Check all that apply.		ya. 117 T. A.V.	
	X Own website X Another's website X 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, ar	d fina	ncial	
19	statements available to the public during the tax year.	. w initial	·Oidi	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion:	•	
20	ORGANIZATION - 502-637-5372			
	1469 S. FOURTH ST., 3RD FLOOR, LOUISVILLE, KY 40208			
_		7,779		

Part VIII 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.

(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	od a co	Π	Highest compensated employee	Ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) KEVIN DUNLAP PRESIDENT	1.00	x		х						
(2) JOHN RIPPY	1.00	^	-	Δ	-	-		0.	0.	0.
TREASURER	1.00	x		х				0.	0.	
(3) CATHY HINKO	1.00	A		Λ	-	+-		0.	0.	0.
SECRETARY	1.00	X		х				0.	0.	0.
(4) TARA BRINKMOELLER	0.50				\vdash	+		0.	0.	0.
BOARD MEMBER		x						0.	0.	0.
(5) CHRIS DISCHINGER	0.50	-				1			0.	
BOARD MEMBER		X						0.	0.	0.
(6) MICHAEL GARDNER	0.50									
BOARD MEMBER		X						0.	0.	0.
(7) LISA J. HOUSTON	0.50					Г				
BOARD MEMBER		X						0.	0.	0.
(8) CHRISTIE MCCRAVY	0.50	110								
BOARD MEMBER		X						0.	0.	0.
(9) ALETHEA SPEARMAN	0.50									
BOARD MEMBER	v*	X						0.	0.	0.
(10) JEANA DUNLAP	0.50									
BOARD MEMBER		X						0.	0.	0.
(11) HON. ATTICA SCOTT	0.50									
BOARD MEMBER		X						0.	0.	0.
(12) BECKI WINCHEL	0.50							_	1711	
BOARD MEMBER	40.00	X		_				0.	0.	0.
(13) RACHEL HURST	40.00							54 040		2 2 2
EXECUTIVE DIRECTOR				X			_	61,242.	0.	10,452.
									2. 1	
				_			\dashv			
		-		-	-	\vdash	\dashv			
									1	
			-	\dashv	-	\vdash	\dashv			
200007 40 00 40										000

332007 10-29-13

27-4155836

TRUST FUND INC

Par	Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A)	(B)	(C)						(D)	(E)	(F)			
	Name and title	Average Position (do not check more than						one	Reportable	Reportable	Estimated			
		hours per	box	, unle	ss pe	erson	is bot or/trus	h an	compensation	compensation				
		week (list any		I	I	1	T	1	from	from related		other		
		hours for	irecto						the	organizations		npensa rom th		
		related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)		ganizat		
		organizations	ruste	II trus		99/	mpen		(** 27 1000 141100)	*	1	d relat		
		below	Individual trustee or director	institutional trustee	5	Key employee	Highest compensated employee	er	#D			anizati		
		line)	Indiv	Instit	Officer	Key e	High	Former						
				\vdash	-	-		-			+			
-					П	\vdash								
						L								
			-	\vdash		\vdash	-	-		10.	+-			
											1			
	3					Г		Г						
			_	_		_								
-				<u> </u>	<u> </u>	\vdash	+	-	 		+		-	
					<u></u>				61 040		1	0 4	F 0	
	Sub-total								61,242.	0		0,4	52.	
	Total from continuation sheets to Part V								61,242.	0		0,4		
d	Total (add lines 1b and 1c) Total number of individuals (including but r							ho r				0,=	JZ.	
2	compensation from the organization	iot innited to ti	1030	ilot	cu a	DOV	C) W	110 1	eceived more triair proc	,,000 of reportable			(
												Yes	No	
3	Did the organization list any former officer	director, or tru	uste	e, ke	ey er	mple	oyee	, or	highest compensated e	mployee on	120	450	19	
	line 1a? If "Yes," complete Schedule J for s										3		X	
4	For any individual listed on line 1a, is the s										1 15	481.3	Man.	
	and related organizations greater than \$15	0,000? If "Yes,	" cc	mpl	ete :	Sch	edul	e J	for such individual		4		X	
5	Did any person listed on line 1a receive or						*				2,7,24	5576	1	
	rendered to the organization? If "Yes," con	nplete Schedu	e J	for s	uch	per.	son				5		X	
	tion B. Independent Contractors								*******************	¢100,000 of annual				
1	Complete this table for your five highest combine organization. Report compensation for										sation	irom		
	(A)	the calcindary	Cai	cria	ii ig v	VVILII	01 1		(B)	your.	(C)		
	Name and business	address	N	ON	E				Description of s	services	Compe		n	
_								-				-	-	
		VA							****					
									=					
2	Total number of independent contractors	including but	not I	imite	ed to	the	ose li	ster	d above) who received n	nore than				
2	\$100,000 of compensation from the organ		IOL I	minte	Ju ic		0	3100	a above, who received h	ioro triari				
	7.22,000 D. 50pp60001								THE RESERVE THE PROPERTY OF THE PERSON OF TH		Form	990 (2013	

LOUISVILLE METRO AFFORDABLE HOUSING TRUST FUND INC

Form 990 (2013) TRUST F

		Check if Schedule O con	tains a response	e or note to any lin	e in this Part VIII		•	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
		Membership dues						
		Fundraising events						
		Related organizations						
	ı	Government grants (contribut	The state of the s					
	f	All other contributions, gifts, grar						
		similar amounts not included abo	ve 1f 1	,001,352.				
	g	Noncash contributions included in lines	s 1a-1f: \$	2,100.				
<u>a C</u>		Total. Add lines 1a-1f			1,001,352.			
				Business Code				
Se	2 a							
er.	b							
n S	С							
Rev	d							
Program Service Revenue	е			500000	450			
ъ.	5,000	All other program service reve		Designation of the last of the	450.	450.		
	Settleres	Total. Add lines 2a-2f			450.			
	3	Investment income (including		Stripers & Stripers Att	2 241			0.044
		other similar amounts)			2,241.			2,241.
	4	Income from investment of ta						
	5	Royalties						
			(i) Real	(ii) Personal				
		Gross rents		-				
		Less: rental expenses						
		Rental income or (loss)						
	A CONTRACT	Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses		-				
		Gain or (loss)						
		Net gain or (loss)		······				
enne	8 a	Gross income from fundraisin	•					
ver		including \$						
Re		contributions reported on line						
Other Rev		Part IV, line 18						
ŏ	0 000	Less: direct expenses Net income or (loss) from fund		D				
	9 a	Gross income from gaming at						
	h	Part IV, line 19 Less: direct expenses						
		Net income or (loss) from gar						TORSON STREET,
		Gross sales of inventory, less						
	10 a	and allowances						
	h	Less: cost of goods sold						
		Net income or (loss) from sale				BIOLOGICANO DI MARI	NEW PROPERTY.	
		Miscellaneous Revenu	UE 2 30 30 30 30 30 30 30 30 30 30 30 30 30	Business Code	1921-2016 (1921-1921)	make the rest		
	11 a			Dusiness Code		AND ROBERT PORTUGENESS OF S		
	b							
	c							
	d	All other revenue						
		Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			L,004,043.	450.	0.	2,241.
33200								Form 990 (2013)

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 (C) (A) Total expenses Do not include amounts reported on lines 6b, Management and general expenses Fundraising Program service 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States, See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 Payroll taxes 10 Fees for services (non-employees): 11 77,568. 57,400. 20,168 a Management 25. 25. b Legal 2,538. 2,538. Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 12,974. 9,601. 3,373 column (A) amount, list line 11g expenses on Sch O.) 104. 104. Advertising and promotion 12 Office expenses 13 Information technology 14 15 Royalties 16 Occupancy 994. 736. 258 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 1,400. 1,036. 364. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 50. 144. 194. Depreciation, depletion, and amortization 22 3,958. 2,929. 1,029. 23 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.) 6,317. 4,675. 1,642. PRINTING 1,476. 1,093. 383. SUPPLIES h TELEPHONE & INTERNET 1,181. 874. 307. С 288. 213. 75. BOOKS, SUBSCRIPTIONS, 42. 118. 160. All other expenses 109,177. 78,923. 30,254. 0. Total functional expenses. Add lines 1 through 24e 25 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 METRO AFFORDABLE HOUSING TRUST FUND INC

Form 990 (2013)

Dart X | Balance Sheet

² ar	t X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any line i	this Part X		······	
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			143,905.	1	454,068
- 1	2	Savings and temporary cash investments	I	130,553.	2	50,596	
	3	Pledges and grants receivable, net		1,099,765.	3	1,750,917	
	4	Accounts receivable, net				4	
		Loans and other receivables from current and fo		32028	05-15		
- 1	•	trustees, key employees, and highest compens					
		Part II of Schedule L				5	
- 1	6	Loans and other receivables from other disquali		and the second s		en 64 (5	
	0	section 4958(f)(1)), persons described in section	consistence vacanasses	The second secon			
		employers and sponsoring organizations of sec					
,		employees' beneficiary organizations (see instr)		100	CHICKEL BRANCH COCCURS	6	
	-	9-10-1 (M-54 0-10-05 0				7	
Assets	7	Notes and loans receivable, net				8	
1	8	Inventories for sale or use				9	7.51
	9	Prepaid expenses and deferred charges	I I			9	
	10a	Land, buildings, and equipment: cost or other	10	971.			
		basis. Complete Part VI of Schedule D		291.	874.	10-	680
		Less: accumulated depreciation			0/4.	10c	000
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		1 275 007	15	2 256 261	
	16	Total assets. Add lines 1 through 15 (must equ		1,375,097.	16	2,256,261	
	17	Accounts payable and accrued expenses		13,808.	17	106	
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	edule D		21		
20	22	Loans and other payables to current and forme					
Liabilities		key employees, highest compensated employe	es, and disqua	alified persons.			
ap		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrel	ated third part	ies		23	
	24	Unsecured notes and loans payable to unrelate	d third parties			24	
	25	Other liabilities (including federal income tax, pa	yables to rela	ted third			
		parties, and other liabilities not included on line	s 17-24). Com	plete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			13,808.	26	106
		Organizations that follow SFAS 117 (ASC 958	B), check here	■ X and			
S		complete lines 27 through 29, and lines 33 ar	nd 34.				
Ē	27	Unrestricted net assets		116,545.	27	296,15	
Salc	28	Temporarily restricted net assets		1,244,744.	28	1,960,000	
<u> </u>	29				29		
Net Assets or Fund balances		Organizations that do not follow SFAS 117 (A	SC 958), che	ck here ▶☐			
5		and complete lines 30 through 34.					
2	30	Capital stock or trust principal, or current funds			30		
22	31	Paid-in or capital surplus, or land, building, or e				31	
et A	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances			1,361,289.	33	2,256,155
				1,375,097.		2,256,261	

Form 990 (2013)

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI				Ш			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,00					
2	Total expenses (must equal Part IX, column (A), line 25)	2			77.			
3	Revenue less expenses. Subtract line 2 from line 1	3	89 1,36		66.			
4								
5	Net unrealized gains (losses) on investments	5						
6	Donated services and use of facilities	6			3			
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	2,25	6,1	55.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		A 18					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	See.	ici				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	5500(4	tid.	15 II.			
	separate basis, consolidated basis, or both:		15 6 5 3					
	Separate basis Consolidated basis Both consolidated and separate basis		28.35					
b	Were the organization's financial statements audited by an independent accountant?		2b		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,	Fig. 4					
	consolidated basis, or both:		200	114				
	Separate basis Consolidated basis Both consolidated and separate basis		inin'i	LA				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	- WA	2.15				
	review, or compilation of its financial statements and selection of an independent accountant?		2c					
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.	174	117				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit	1005	102				
	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 requi	ired audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b					
			Form	990	(2013)			

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

LOUISVILLE METRO AFFORDABLE HOUSING TRUST FUND INC

Employer identification number 27-4155836

-	-	- CANADA CONTRACTOR OF THE PARTY OF THE PART		Marian Marian Company of the Company		-							
Pa	rt I	Reason	for Public Cha	arity Status (All organiz	zations mu	ist comple	te this par	t.) See ins	tructions.				
The	organ	ization is not	a private foundation	n because it is: (For lines	1 through	11, check	only one I	oox.)					
1		A church, co	nvention of church	es, or association of chui	rches desc	cribed in se	ection 170)(b)(1)(A)(i	i).				
2		A school des	scribed in section 1	170(b)(1)(A)(ii). (Attach So	chedule E.))							
3		A hospital or	a cooperative hos	pital service organization	described	in section	170(b)(1)	(A)(iii).					
4				operated in conjunction					D(b)(1)(A)(i	ii). Enter	the hospita	al's n	ame.
		city, and star									•		
5		An organizat	ion operated for the	e benefit of a college or u	niversity o	wned or o	perated by	a govern	mental un	it describ	ed in		
			(b)(1)(A)(iv). (Comp				•						
6	. I			ment or governmental uni	it describe	d in sectio	on 170(h)(1)(A)(v)					
7	X			ceives a substantial part					or from the	e general	nublic des	crihe	d in
•			(b)(1)(A)(vi). (Comp	50 DO 100 DO	or no oup	3011 110111 0	governin	orrear arme v	or morn an	general	public des	UIIDE	u III
8				section 170(b)(1)(A)(vi).	(Complete	Part II)							
a				eceives: (1) more than 33			rom contr	ibutions r	namharch	in food o	nd aroos r	agoin	to from
-				unctions - subject to certa									
				taxable income (less sec							-		
			509(a)(2). (Comple		tion 511 ta	1A) 110111 DC	1311103503	acquireu t	by the orga	anization	arter June	3U, I	9/5.
10				operated exclusively to te	et for publ	lic safety !	See cectic	n 500(a)(4)				
11				operated exclusively for the	Report Continue - Management					ny out the	nurnacca	of on	
• •				zations described in secti									
				g organization and compl				2). Oce 3e	CHOII 309	(a)(3). One	eck the bo.	(triai	ι
		a Type			ype III - Fu				d 🔲 Typ	o III - Nor	n-functiona	Iller ins	la avata
е				nat the organization is not			9						-
-				than one or more publicl									
										9(a)(1) or	section 50	9(a)(2	<u>2</u>).
f				ritten determination from									
_			rganization, check										
g				organization accepted ar	151				2.432.533			Ţ.,	T.,
				directly controls, either al								Ye	s No
		_		supported organization?									-
		(ii) A ramily	member of a perso	on described in (i) above?	·						11g(ii)		-
				a person described in (i)							11g(iii	Ш	
h		Provide the f	following information	n about the supported or	ganization	(s).							
	10-19-1		Γ		la ve a		1 5		()	AL T			
(i)		of supported	(ii) EIN	(iii) Type of organization		organization sted in your		u notify the ion in col.	(vi) Is	on in col.	(vii) Amoun	t of m	nonetary
	orga	nization		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	(i) organiz U.S	ed in the	sup	port	
				(see instructions))									
					Yes	No	Yes	No	Yes	No			
										1			
					-				_				
										1 1			
				-	<u> </u>								
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			*										
											1.7		
					Kathan	100000							
Cotal					STEED STEED	district the state of	THE PARTY OF	Service Control					

332021 09-25-13

Schedule A (Form 990 or 990-EZ) 2013

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2013 TRUST FUND INC

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	tion A. Public Support			T		—————	
	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
*	membership fees received. (Do not			100 000		1 001 050	0 460 001
	include any "unusual grants.")			100,600.	1,366,049.	1,001,352.	2,468,001.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to					1	
	or expended on its behalf						
3	The value of services or facilities		*				
	furnished by a governmental unit to	49					
	the organization without charge			100 600	1 266 040	1 001 250	2 460 001
	Total. Add lines 1 through 3			100,600.	1,366,049.	1,001,352.	2,468,001.
5	The portion of total contributions		CALL SQ 15 - 12 S		Carlon School		
	by each person (other than a	ANT PLENGTHER		and the second of the		Part of the Control	
	governmental unit or publicly				had so a deposit	Manager Carry	
	supported organization) included			10-101 (1997) (1997)		and the district	
	on line 1 that exceeds 2% of the		on the special to	中国在1870年	A CHARLES	dean a galloui	
	amount shown on line 11,	-171-12160	100			STATES LUNA	
	column (f)	ahii 26-se aas	a subject	Thomas will for	MV PROPERTY OF THE PARTY OF THE	period 25 xisotesk	
	Public support. Subtract line 5 from line 4.				EN THE SPONSOR	all its acaded Gama	2,468,001.
	ction B. Total Support			1			
	ndar year (or fiscal year beginning in) 🖊	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4			100,600.	1,366,049.	1,001,352.	2,468,001.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties				600	2 241	2 020
	and income from similar sources			6.	692.	2,241.	2,939.
9	Net income from unrelated business						
	activities, whether or not the					450.	450.
	business is regularly carried on					450.	450.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						0 484 200
11	Total support. Add lines 7 through 10			9 (Kett Ed.), Standard	SERBAT N. 1.38 TA		2,471,390.
12						12	
			s first second th	ird, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
13	First five years. If the Form 990 is for						N V
	organization, check this box and stop	here					<u>X</u>
Se	organization, check this box and stop ction C. Computation of Publ	here ic Support Pe	ercentage				
Sec. 14	organization, check this box and stop ction C. Computation of Publ Public support percentage for 2013 (I	here ic Support Pe ine 6, column (f) o	rcentage livided by line 11	column (f))		14	%
Sec 14 15	organization, check this box and stop ction C. Computation of Publ Public support percentage for 2013 (I Public support percentage from 2012	here ic Support Pe ine 6, column (f) d Schedule A, Part	ercentage livided by line 11	column (f))		14 15	%
Sec 14 15	organization, check this box and stop ction C. Computation of Publi Public support percentage for 2013 (I Public support percentage from 2012 a 33 1/3% support test - 2013. If the co	here ic Support Pe ine 6, column (f) d Schedule A, Parl organization did no	ercentage livided by line 11 II, line 14 ot check the box	column (f))on line 13, and line	14 is 33 1/3% or r	14 15 nore, check this box	% % x and
14 15 16a	organization, check this box and stop ction C. Computation of Public Public support percentage for 2013 (I Public support percentage from 2012 a 33 1/3% support test - 2013. If the computation stop here. The organization qualifies	ic Support Pe ine 6, column (f) of Schedule A, Part organization did no as a publicly supp	ercentage livided by line 11 II, line 14 ot check the box ported organization	column (f))on line 13, and line	14 is 33 1/3% or r	14 15 nore, check this box	% % x and
14 15 16a	organization, check this box and stop ction C. Computation of Public Public support percentage for 2013 (I Public support percentage from 2012 a 33 1/3% support test - 2013. If the c stop here. The organization qualifies a 33 1/3% support test - 2012. If the c	ic Support Pe ine 6, column (f) of Schedule A, Part organization did no as a publicly supporganization did no	livided by line 11 II, line 14 ot check the box ported organization the check a box or	column (f))on line 13, and line on	14 is 33 1/3% or r	14 15 nore, check this box	% and so box
14 15 16a	organization, check this box and stop ction C. Computation of Public Public support percentage for 2013 (I Public support percentage from 2012 a 33 1/3% support test - 2013. If the c stop here. The organization qualifies and stop here. The organization qual	ic Support Pe ine 6, column (f) of Schedule A, Part organization did no as a publicly supporganization did no ifies as a publicly	livided by line 11. II, line 14ot check the box ported organization the check a box or supported organ.	column (f)) on line 13, and line on n line 13 or 16a, and ization	14 is 33 1/3% or r d line 15 is 33 1/3%	14 15 nore, check this box	% and s box
14 15 16a	organization, check this box and stop ction C. Computation of Public support percentage for 2013 (I Public support percentage from 2012 a 33 1/3% support test - 2013. If the constant of the stop here. The organization qualifies and stop here.	ic Support Perine 6, column (f) of Schedule A, Partorganization did not as a publicly supporganization did not iffes as a publicly t - 2013. If the org	livided by line 11. II, line 14. ot check the box ported organization to check a box or supported organization did no	on line 13, and line on line 13 or 16a, and ization	14 is 33 1/3% or r I line 15 is 33 1/3% e 13, 16a, or 16b,	14 15 nore, check this box 6 or more, check this and line 14 is 10% 6	% and sis box pr more,
14 15 16a	organization, check this box and stop ction C. Computation of Public Public support percentage for 2013 (I Public support percentage from 2012 a 33 1/3% support test - 2013. If the computation qualifies a 33 1/3% support test - 2012. If the computation qualifies and stop here. The organization qualifies and stop here. The organization qualifies and if the organization meets the "facts and if the organization meets and if	ine 6, column (f) of Schedule A, Partorganization did not as a publicly supporganization did not ifies as a publicly t - 2013. If the orgatists and circumstant	ercentage livided by line 11 II, line 14 ot check the box corted organization supported organ ganization did nonces" test, check	on line 13, and line on line 13 or 16a, and ization theck a box on linthis box and stop is	14 is 33 1/3% or r d line 15 is 33 1/3% e 13, 16a, or 16b, nere. Explain in Pa	14 15 nore, check this box 6 or more, check this and line 14 is 10% or IV how the organi	% and s box por more, zation
Sec 14 15 16a 1	organization, check this box and stop ction C. Computation of Public Public support percentage for 2013 (I Public support percentage from 2012 a 33 1/3% support test - 2013. If the computation qualifies a 33 1/3% support test - 2012. If the computation public support test - 2012. If the computation qualifies and stop here. The organization qualifies and stop here. The organization qualifies and if the organization meets the "facts-and-circumstances"	ine 6, column (f) of Schedule A, Partorganization did not as a publicly supporganization did not iffes as a publicly t - 2013. If the organization did not contain the contains a publicly to the contains a publi	ercentage livided by line 11 II, line 14 ot check the box ported organization to check a box or supported organization did nonces" test, check ation qualifies as	on line 13, and line on line 13 or 16a, and ization the check a box on line this box and stop I a publicly supporte	14 is 33 1/3% or r d line 15 is 33 1/3% e 13, 16a, or 16b, nere. Explain in Pa d organization	nore, check this box or more, check this and line 14 is 10% or t IV how the organi	% and s box or more, zation
Sec 14 15 16a 1	organization, check this box and stop ction C. Computation of Public Public support percentage for 2013 (I Public support percentage from 2012 a 33 1/3% support test - 2013. If the computation qualifies a 33 1/3% support test - 2012. If the computation percentage from 2012 and stop here. The organization qualifies and stop here. The organization qualifies and if the organization meets the "facts-and-circumstances" and if the organization meets the "facts-and-circumstances" and 10% -facts-and-circumstances test and -facts-and-circumstances test -facts-and-circumstances -facts	ine 6, column (f) of Schedule A, Parlorganization did not as a publicly supporganization did notifies as a publicly t - 2013. If the organization that test. The organization of the column test and column test.	ercentage livided by line 11 II, line 14 ot check the box ported organization to check a box or supported organ ganization did no nees" test, check ation qualifies as ganization did no need to check a signification did no need to check ation qualifies as ganization did no	on line 13, and line on line 13 or 16a, and ization the check a box on line this box and stop I a publicly supporte the check a box on line theck a box on line a publicly supported the check a box on line the check a box o	14 is 33 1/3% or r d line 15 is 33 1/3% e 13, 16a, or 16b, nere. Explain in Pa d organization e 13, 16a, 16b, or	nore, check this box or more, check this and line 14 is 10% or t IV how the organi	x and s box or more, zation
Sec 14 15 16a 1	organization, check this box and stop ction C. Computation of Public Public support percentage for 2013 (I Public support percentage from 2012 a 33 1/3% support test - 2013. If the castop here. The organization qualifies and stop here. The organization qualifies and stop here. The organization qualifies and if the organization meets the "facts-and-circumstances" to 10% -facts-and-circumstances test more, and if the organization meets the more and if the organization meets the m	ine 6, column (f) of Schedule A, Parlorganization did no as a publicly supportanization did no iffes as a publicly t - 2013. If the organization that test. The organization of the "facts-and-circumstanites".	ercentage livided by line 11. II, line 14. ot check the box ported organization to check a box or supported organization did no checs" test, check ation qualifies as ganization did no umstances" test,	on line 13, and line on line 13 or 16a, and ization this box and stop I a publicly supporte to check a box on line check this box and	14 is 33 1/3% or r d line 15 is 33 1/3% e 13, 16a, or 16b, here. Explain in Pad d organization e 13, 16a, 16b, or stop here. Explain	14 15 nore, check this box 6 or more, check this and line 14 is 10% or IV how the organi 17a, and line 15 is 1 in in Part IV how the	s box or more, zation 0% or
Sec 14 15 16a 17a	organization, check this box and stop ction C. Computation of Public Public support percentage for 2013 (I Public support percentage from 2012 a 33 1/3% support test - 2013. If the computation qualifies a 33 1/3% support test - 2012. If the computation percentage from 2012 and stop here. The organization qualifies and stop here. The organization qualifies and if the organization meets the "facts-and-circumstances" and if the organization meets the "facts-and-circumstances" and 10% -facts-and-circumstances test and -facts-and-circumstances test -facts-and-circumstances -facts	ine 6, column (f) of Schedule A, Parl organization did no as a publicly supportanization did no ifies as a publicly t - 2013. If the organization did not test.	ercentage livided by line 11 II, line 14 ot check the box ported organization to check a box or supported organ ganization did nonces" test, check ation qualifies as ganization did noumstances" test,	on line 13, and line on line 13 or 16a, and ization this box and stop I a publicly supporte to check a box on line theck this box and a qualifies as a publ	14 is 33 1/3% or r I line 15 is 33 1/3% e 13, 16a, or 16b, nere. Explain in Pad d organization e 13, 16a, 16b, or stop here. Explain icly supported org	nore, check this box or more, check this and line 14 is 10% or it IV how the organi 17a, and line 15 is 1 in in Part IV how the anization	% and s box pr more, zation 10% or

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and		, ,			(3/ = 3.5	(i) rotar
	membership fees received. (Do not					ľ	
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	,					
2	Gross receipts from activities that				<u> </u>		
3	are not an unrelated trade or bus-		8 8				
	iness under section 513						
4	Tax revenues levied for the organization's benefit and either paid to						
	as as mandad on its habalf						
5	The value of services or facilities				 		
	furnished by a governmental unit to the organization without charge		Q C				
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
-	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						et .
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)					de su de la company	
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6	(a) 2005	(6) 2010	(0) 2011	(u) 2012	(e) 2013	(f) Total
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on			4)			
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for t	he organization's	first, second, third	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3) organiza	ation,
	check this box and stop here						>
Sec	tion C. Computation of Public	Support Per	rcentage				
15	Public support percentage for 2013 (lin	e 8, column (f) di	vided by line 13, c	olumn (f))		15	%
	Public support percentage from 2012 S					16	%
	tion D. Computation of Invest						70
	Investment income percentage for 201			e 13. column (fl)		17	%
	Investment income percentage from 20					18	
	33 1/3% support tests - 2013. If the o						%
	more than 33 1/3%, check this box and 33 1/3% support tests - 2012. If the o						
	line 18 is not more than 33 1/3%, chec						
	Private foundation. If the organization						

332023 09-25-13

LOUISVILLE METRO AFFORDABLE HOUSING

Schedule A	(Form 990 or 990-EZ) 2013 TRUST FUND INC	27-4155836 Page 4
Part IV	(Form 990 or 990-EZ) 2013 TRUST FUND INC Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line	e 17a or 17b; and Part III, line 12.
1 diciv	Supplemental information. Provide the explanation required by Furth, line 19,7 aren, line	
	Also complete this part for any additional information. (See instructions).	
	4	
		¥
7 22		
-		
800 TE 1 TE 1		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.
 ▶ Attach to Form 990 or Form 990-EZ.
 ▶ See separate instructions.
 ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
	ne of organization LOUISVI	LLE METRO AFFORI	ABLE HOUSIN	IG Emp	loyer identification number
	TRUST F				27-4155836
Pa	rt I-A Complete if the org	janization is exempt und	der section 501(c	or is a section 527 o	organization.
1	Provide a description of the organiz	ation's direct and indirect politic	cal campaign activities	in Part IV.	
	Political expenditures		10.00		
	Volunteer hours				
500.50					
Pa	rt I-B Complete if the org	anization is exempt und	der section 501(c))(3).	
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955	> 9	S
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 495	5	3
	If the organization incurred a section				
4a	Was a correction made?			***************************************	Yes No
b	If "Yes," describe in Part IV.				
	ert I-C Complete if the org				
1	Enter the amount directly expended	by the filing organization for se	ection 527 exempt fund	ction activities 🕨 🤄	8
2	Enter the amount of the filing organ			22.7	
	exempt function activities				
3	Total exempt function expenditures				
	line 17b				S
4	Did the filing organization file Form				
5	Enter the names, addresses and en				
	made payments. For each organiza				
	contributions received that were propolitical action committee (PAC). If				ate segregated fund or a
				T	T ///
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

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Schedule C (Form 990 or 990-EZ) 2013 Th			RDABLE HOUSIN		155836 Page
Part II-A Complete if the organ	nization is exe	mpt under section	on 501(c)(3) and file	ed Form 5768	
(election under section		filiated average (and list	in Part IV each affiliated		a adduces FINI
A Check if the filing organization expenses, and share of		· · · · · · · · · · · · · · · · · · ·	in Part IV each amiliated	group member's nam	ie, address, Ein,
		and "limited control" pr	ovisions apply.		
Limits	on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influer	nce public opinion	(grass roots lobbying)		2,316.	
b Total lobbying expenditures to influer			-	5,190.	
c Total lobbying expenditures (add line	•			7,506.	
d Other exempt purpose expenditures				101,671.	
e Total exempt purpose expenditures (109,177.	
f Lobbying nontaxable amount. Enter t				21,835.	
If the amount on line 1e, column (a) or (77. 5	obying nontaxable an		nai Tausi	
Not over \$500,000	20% of	f the amount on line 1e	e	ALL OF NOTES	7.1.18
Over \$500,000 but not over \$1,000,0	000 \$100,0	00 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,500		00 plus 10% of the ex		escutardia descuta	distribution in the same
Over \$1,500,000 but not over \$17,00	0,000 \$225,0	00 plus 5% of the exc	ess over \$1,500,000.		montana tagai.
Over \$17,000,000	\$1,000	,000.			Service of the Service of
g Grassroots nontaxable amount (enter	r 25% of line 1f)			5,459.	
h Subtract line 1g from line 1a. If zero of	or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zero o				0.	
j If there is an amount other than zero	on either line 1h o	r line 1i, did the organi:	zation file Form 4720	-	_
reporting section 4911 tax for this ye	ar?				Yes N
,	ions that made a	recorder for an executive control of the principle of the formation of the	r Section 501(h) on do not have to comp es 2a through 2f on pag		
	Lobbying Expe	enditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying coming amount		ge sente etning om in t a fina i skop otken in d	r cau dan in 1964 Princ graph of 1	en sample e e f Karaman I jaren e e	
c Total lobbying expenditures	d			5,190.	5,190
d Grassroots nontaxable amount				2,316.	2,316
e Grassroots ceiling amount (150% of line 2d, column (e))					3,474

Schedule C (Form 990 or 990-EZ) 2013

2,316.

2,316.

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2013 TRUST FUND INC 27-415583

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

of the lobbying activity.			a)	1 (
		Yes	No	Am	ount
local legislation, inc or referendum, thro	A CONTRACTOR CONTRACTO				
a Volunteers?					
b Paid staff or manag	ement (include compensation in expenses reported on lines 1c through 1i)? hts?		•		
d Mailings to member	s, legislators, or the public?				
	lished or broadcast statements?				
	anizations for lobbying purposes?				
	egislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrat	ons, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?					
j Total. Add lines 1c	hrough 1i				
2a Did the activities in	ine 1 cause the organization to be not described in section 501(c)(3)?				
	mount of any tax incurred under section 4912			Maria 11 11 11 11 11 11 11 11 11 11 11 11 11	
	mount of any tax incurred by organization managers under section 4912				
	ion incurred a section 4912 tax, did it file Form 4720 for this year?				
	te if the organization is exempt under section 501(c)(4), sect	ion 501(c)	(5), or se	ection	
501(c)(6)					
				Yes	No
	Il (90% or more) dues received nondeductible by members?		1		
1 Were substantially a					
2 Did the organization	make only in-house lobbying expenditures of \$2,000 or less?		2		
2 Did the organization3 Did the organization	agree to carry over lobbying and political expenditures from the prior year?		3	ection	
2 Did the organization 3 Did the organization Part III-B Comple 501(c)(6)	make only in-house lobbying expenditures of \$2,000 or less? agree to carry over lobbying and political expenditures from the prior year? te if the organization is exempt under section 501(c)(4), section and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	on 501(c)	(5), or se		ne 3, is
2 Did the organization 3 Did the organization Part III-B Complet 501(c)(6) answere	agree to carry over lobbying and political expenditures from the prior year? te if the organization is exempt under section 501(c)(4), sect and if either (a) BOTH Part III-A, lines 1 and 2, are answered d "Yes."	ion 501(c) i "No," Of	3 (5), or se R (b) Par		ne 3, is
2 Did the organization 3 Did the organization Part III-B Comple 501(c)(6) answere 1 Dues, assessments	agree to carry over lobbying and political expenditures from the prior year? te if the organization is exempt under section 501(c)(4), sect and if either (a) BOTH Part III-A, lines 1 and 2, are answered	ion 501(c) d "No," Of	3 (5), or se R (b) Par		ne 3, is
2 Did the organization 3 Did the organization Part III-B Comple 501(c)(6) answere 1 Dues, assessments 2 Section 162(e) none	agree to carry over lobbying and political expenditures from the prior year? te if the organization is exempt under section 501(c)(4), sect and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." and similar amounts from members	ion 501(c) d "No," Of	3 (5), or se R (b) Par		ne 3, is
2 Did the organization 3 Did the organization Part III-B Comple 501(c)(6) answere 1 Dues, assessments 2 Section 162(e) none expenses for which	agree to carry over lobbying and political expenditures from the prior year? te if the organization is exempt under section 501(c)(4), section and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." and similar amounts from members eductible lobbying and political expenditures (do not include amounts of political the section 527(f) tax was paid).	ion 501(c) d "No," Of	3 (5), or se R (b) Par		ne 3, is
2 Did the organization 3 Did the organization Part III-B Complet 501(c)(6) answere 1 Dues, assessments 2 Section 162(e) none expenses for which a Current year	agree to carry over lobbying and political expenditures from the prior year? te if the organization is exempt under section 501(c)(4), section and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." and similar amounts from members eductible lobbying and political expenditures (do not include amounts of political the section 527(f) tax was paid).	ion 501(c) d "No," OF	3 (5), or se R (b) Par		ne 3, is
2 Did the organization 3 Did the organization Part III-B Complet 501(c)(6) answere 1 Dues, assessments 2 Section 162(e) none expenses for which a Current year b Carryover from last	agree to carry over lobbying and political expenditures from the prior year? te if the organization is exempt under section 501(c)(4), section and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." and similar amounts from members eductible lobbying and political expenditures (do not include amounts of political the section 527(f) tax was paid).	ion 501(c) d "No," Of	3 (5), or se R (b) Par 1 2a 2b		ne 3, is
2 Did the organization 3 Did the organization Part III-B Complet 501(c)(6) answere 1 Dues, assessments 2 Section 162(e) nonceexpenses for which a Current year b Carryover from last c Total	agree to carry over lobbying and political expenditures from the prior year? te if the organization is exempt under section 501(c)(4), section and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." and similar amounts from members eductible lobbying and political expenditures (do not include amounts of political the section 527(f) tax was paid).	ion 501(c) d "No," Of	3 (5), or se R (b) Par 1 2a 2b 2c		ne 3, is
Did the organization Did the organization That III-B Completed 501(c)(6) Completed 501	agree to carry over lobbying and political expenditures from the prior year? te if the organization is exempt under section 501(c)(4), section and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." and similar amounts from members eductible lobbying and political expenditures (do not include amounts of political the section 527(f) tax was paid).	ion 501(c) d "No," Of	3 (5), or se R (b) Par 1 2a 2b 2c		ne 3, is
Did the organization Did the organization That III-B Comple 501(c)(6) answere Dues; assessments Section 162(e) none expenses for which Carryover from last C Total Aggregate amount of If notices were sent	agree to carry over lobbying and political expenditures from the prior year? te if the organization is exempt under section 501(c)(4), sect and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." and similar amounts from members eductible lobbying and political expenditures (do not include amounts of political the section 527(f) tax was paid). year eported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ion 501(c) d "No," OF ical	3 (5), or se R (b) Par 1 2a 2b 2c		ne 3, is
Did the organization Did the organization That III-B Comple 501(c)(6) answere Dues; assessments Section 162(e) none expenses for which Carryover from last C Total Aggregate amount of If notices were sent	agree to carry over lobbying and political expenditures from the prior year? the if the organization is exempt under section 501(c)(4), section and if either (a) BOTH Part III-A, lines 1 and 2, are answered by "Yes." and similar amounts from members eductible lobbying and political expenditures (do not include amounts of polition the section 527(f) tax was paid). year eported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure of nondeductible lobbying and	ion 501(c) d "No," OF	3 (5), or see R (b) Par 1 2a 2b 2c 3		ne 3, is
2 Did the organization 3 Did the organization Part III-B Comple 501(c)(6) answere 1 Dues, assessments 2 Section 162(e) none expenses for which a Current year b Carryover from last c Total 3 Aggregate amount in 4 If notices were sent does the organization expenditure next ye	agree to carry over lobbying and political expenditures from the prior year? the if the organization is exempt under section 501(c)(4), section and if either (a) BOTH Part III-A, lines 1 and 2, are answered by the section of the section similar amounts from members and similar amounts from members and political expenditures (do not include amounts of political exection 527(f) tax was paid). The section 527(f) tax was paid). The section 6033(e)(1)(A) notices of nondeductible section 162(e) dues and the amount on line 2c exceeds the amount on line 3, what portion of the exection agree to carryover to the reasonable estimate of nondeductible lobbying and	ion 501(c) d "No," OF	3 (5), or see R (b) Par 1 2a 2b 2c 3		ne 3, is

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

➤ Attach to Form 990.

➤ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

LOUISVILLE METRO AFFORDABLE HOUSING

Employer identification number 27-4155836

TRUST FUND INC Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year _____ Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051

Schedule D (Form 990) 2013

Pa	rt III Organizations Maintaining	Collections of A	Art, Hi	storical T	reasures.	or Oth	ner Sir	nilar As	sets/cor	ntinue	d)
3	Using the organization's acquisition, access	ion, and other reco	rds, che	ck any of th	e following th	nat are a	significa	nt use of	its collec	tion it	ems
	(check all that apply):				3				no comoc	cion ic	CIIIS
а	Public exhibition		d	Loan or ex	change prog	ırams					
b	Scholarly research		е 🗀		J -3						
С	Preservation for future generations			-							
4	Provide a description of the organization's of	ollections and expla	ain how	they further	the organiza	ition's ex	empt pu	rnose in l	Part XIII		
5	During the year, did the organization solicit	or receive donations	of art, h	nistorical tre	asures, or ot	her simil	ar assets		art /xiii.		
	to be sold to raise funds rather than to be m	aintained as part of	the org	anization's	collection?				Yes	Γ	□ No
Pa	rt IV Escrow and Custodial Arrar	gements. Comp	lete if th	e organizati	on answered	"Yes" to	Form 9	90 Part I	V line 9	or	
	reported an amount on Form 990, Pa	rt X, line 21.		3				oo, r are i	v, mic 5,	01	
1a	Is the organization an agent, trustee, custod	ian or other interme	diary fo	r contributio	ns or other a	assets no	t include	ed			
	on Form 990, Part X?								Yes	Γ	□ No
b	If "Yes," explain the arrangement in Part XIII	and complete the f	ollowing	table:					103		
		*************************************	J					1	Amou	ınt	
С	Beginning balance						10		7 11100		
d	Additions during the year						10				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?						Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the e	xplanati	ion has beer	n provided in	Part XIII				F	
Pa	rt V Endowment Funds. Complete	f the organization a	nswered	"Yes" to Fo	orm 990, Par	t IV. line	10.				
		(a) Current year		Prior year	(c) Two year			e years bad	ck (e) Fo	III VAAI	rs hack
1a	Beginning of year balance				107		(4)	o your o but	JK (C)10	ur you	3 Dack
b	Contributions								+		
	Net investment earnings, gains, and losses								-		
	Grants or scholarships										
	Other expenditures for facilities							-	-		
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end haland	ce (line 1	la column /	a)) held as:						-
а	Board designated or quasi-endowment		%	ig, coluinii (ajj riciu as.						
b	Permanent endowment	%									
С	Temporarily restricted endowment										
	The percentages in lines 2a, 2b, and 2c should										
За	Are there endowment funds not in the posse		ation the	at are hold a	and administ	arad far t	h = =	.:			
	by:	ocion of the organiz	ation the	at are rielu a	ina administr	ered for t	ne organ	nzation		T.,	Γ
	(i) unrelated organizations								[n	_	No
	(ii) related organizations			••••••					3a(i)	-	-
b	If "Yes" to 3a(ii), are the related organizations	listed as required o	n Sche	dula D2					3a(ii)	-	-
4	Describe in Part XIII the intended uses of the	organization's ende	wment	funde				• • • • • • • • • • • • • • • • • • • •	3b	L	L
Par	t VI Land, Buildings, and Equipm	ent.	WITICITE	iuiius,							
	Complete if the organization answered		Part IV	line 11a S	ee Form 900	Dart V	lino 10				
	Description of property	(a) Cost or o			or other			4	(0 5		
	2 south and property	basis (investr			(other)		ccumula oreciatio		(d) Boo	k valu	ıe
1a	Land		/	24013	(-2)	ue	o, colatio	E-mar-			
b	Buildings							12/2/2011			
	Leasehold improvements				1.2.						
	Equipment										
	Other				971.			291.		-	80.
Total	Add lines 1a through 1e. (Column (d) must ed	ual Form 990 Part	X colun	nn (R) line 1				171.			80.
- 101	The state of the s	auri omi 300, i ait	A, COIUII	", (D), III e 1	U(C).)					0	00.

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Part VIII Investments - Other Securities.	to Form 000 Port IV lin	- 11h Coo Form 000 Book V line	10
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value		ost or end-of-year market value
(1) Financial derivatives	(0) 20011 10100	(0,	
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			9
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	\$	SUBMITTED TO STATE OF STATE	
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: C	ost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)		•	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.			<u> </u>
Complete if the organization answered "Yes"	to Form 990, Part IV, lin	e 11d. See Form 990, Part X, line	15.
(a)	Description	~	(b) Book value
(1)			
(2)			_
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		Committee of the second	
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	<u> </u>		>
Complete if the organization answered "Yes"	to Form 990, Part IV, lin	e 11e or 11f. See Form 990, Part	X, line 25.
1. (a) Description of liability	60140	(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)		*	
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	9 25.)▶		
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote	to the organization's financial sta	atements that reports the
organization's liability for uncertain tax positions under	FIN 48 (ASC 740). Cher	ck here if the text of the footnote	has been provided in Part XIII

Schedule D (Form 990) 2013

MDITOR	****	
TRUST	F.OND.	TM

Total revenue, gains, and other support per audited financial statement	ents	1
Amounts included on line 1 but not on Form 990, Part VIII, line 12:		-
Net unrealized gains on investments	2a	(A)
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII.)	2d	
e Add lines 2a through 2d		2e
Subtract line 2e from line 1		3
Amounts included on Form 990, Part VIII, line 12, but not on line 1:		RAY .
a Investment expenses not included on Form 990, Part VIII, line 7b		
o Other (Describe in Part XIII.)		
Add lines 4a and 4b		4c
Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I,	line 12.)	5
art XII Reconciliation of Expenses per Audited Finance		nses per Return.
Complete if the organization answered "Yes" to Form 990, Pa		
Total expenses and losses per audited financial statements		
Amounts included on line 1 but not on Form 990, Part IX, line 25:		1314
Donated services and use of facilities	2a	
Prior year adjustments		
Other losses		
d Other (Describe in Part XIII.)	2d	
Add lines 2a through 2d		2e
Subtract line 2e from line 1		3
Amounts included on Form 990, Part IX, line 25, but not on line 1:		
Investment expenses not included on Form 990, Part VIII, line 7b	4a	
Other (Describe in Part XIII.)	4b	
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part art XIII Supplemental Information.	l, line 18.)	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part and XIII Supplemental Information. ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part AIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part AIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part AIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part AIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part AIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part ATT XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5
Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part AIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	<i>I, line 18.)</i> Ia and 4; Part IV, lines 1b and 2b; F	5

SCHEDULE 0

(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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

LOUISVILLE METRO AFFORDABLE HOUSING Emplo TRUST FUND INC

Employer identification number 27-4155836

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
STARTING OUT; FOR VETERANS; AND FOR WORKING PEOPLE WHOSE WAGES ARE NOT
ENOUGH TO LIVE IN METRO LOUISVILLE. THE HOUSING TRUST FUND IS FOUNDED
ON THE PRINCIPLE THAT A PLACE TO CALL HOME OPENS THE DOOR TO
OPPORTUNITY, AND THAT THE WHOLE COMMUNITY DOES BETTER WHEN EVERYONE HAS
A DECENT PLACE TO CALL HOME.
FORM 990, PART VI, SECTION B, LINE 11:
EXPLANATION: SENT TO EXECUTIVE COMMITTEE BEFORE FILED.
PART V, LINE 2A
EXPLANATION: THE AHTF LEASES ITS ONE EMPLOYEE FROM ANOTHER ORGANIZATION
FORM 990, PART VI, SECTION B, LINE 12C:
EXPLANATION: MONITORS ANNUALLY.
FORM 990, PART VI, SECTION C, LINE 19:
EXPLANATION: UPON REQUEST.
FORM 990, PART IX, LINE 11G, OTHER FEES:
OTHER FEES:
PROGRAM SERVICE EXPENSES 3,856.
MANAGEMENT AND GENERAL EXPENSES 1,355.
FUNDRAISING EXPENSES 0.
TOTAL EXPENSES 5,211.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization LOUISVILLE METRO AFFORDABLE HOUSING TRUST FUND INC	Employer identification number 27-4155836
ADMIN FEES:	
PROGRAM SERVICE EXPENSES	5,745.
MANAGEMENT AND GENERAL EXPENSES	2,018.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	7,763.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	12,974.
	<u> </u>

Form **8868**

(Rev. January 2014)

Department of the Treasury

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No. 1545-1709

internal Reve	enue Service	Information about Form 660	o and its	instructions is at www.irs.gov/form	า8868 •	*	
• If you a	are filing for an Aut	omatic 3-Month Extension, complet	te only Pa	art I and check this box			X
• If you a	are filing for an Add	ditional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form).		
Do not co	omplete Part II unle	ess you have already been granted a	an automa	atic 3-month extension on a previous	sly filed Fo	rm 8868.	
		ou can electronically file Form 8868 if y					oration
		or an additional (not automatic) 3-mor					
	and the second of the second second second	ns listed in Part I or Part II with the exc					
		which must be sent to the IRS in pap					
		lick on e-file for Charities & Nonprofits		(and thing or time	,
Part I		c 3-Month Extension of Time		submit original (no copies nee	eded).		
		e Form 990-T and requesting an autor					
Part I only		o , o,,,, ooo , ana ,oquoo,g a,, aa.o.					•
		ding 1120-C filers), partnerships, REM					
	ome tax returns.	unig 1120 O meraj, partnerampa, 112.01	ros, una t	rusts must use rom root to reques		er's identifying nu	mher
Tymo or	Name of exemp	ot organization or other filer, see instru-	ctions		1000		5. 100 Sept. 100 Sep
Type or		LE METRO AFFORDABLE		SING	Employer identification number (EIN) or		
print	TRUST FU		11001	BING	27-4155836		
File by the							
due date for filing your		and room or suite no. If a P.O. box, so FOURTH ST., 3RD FLO		tions.	Social se	curity number (SSI	V)
return. See instructions.		ost office, state, and ZIP code. For a fo		Iress see instructions	l		
	LOUISVII		oroigir add	ness, see manachana.			
		,					
Enter the	Return code for th	ne return that this application is for (file	a senara	te application for each return)			01
Litter tile	netuin code for ti	ie return that this application is for the	a separa	te application for each return,			[] _
Applicati	ion	300	Return	Application			Return
	OII		The control of the co	ALVERT AND			(1998) (1998) (1999) (1999)
Is For	000 F7		Code	Is For			Code
	or Form 990-EZ		01	Form 990-T (corporation)	-		07
Form 990			02	Form 1041-A			08
	(individual)		03	Form 4720 (other than individual)			09
Form 990		· · · · · · · · · · · · · · · · · · ·	04	Form 5227			10
	0-T (sec. 401(a) or 4		05	Form 6069			11
Form 990)-T (trust other than	ORGANIZATION	06	Form 8870			12
	20 20		сm	2DD ELOOD LOUIS	777777	TZZ 4020	0
		e of 1469 S. FOURTH	51.,		ATTTE	, KY 4020	5
53		2-637-5372		Fax No.			
		not have an office or place of business					• []
- 2		urn, enter the organization's four digit					
box 🕨	The second secon	t of the group, check this box 🕨 🔙				ers the extension is	s for.
1 re		c 3-month (6 months for a corporation					
90130	AUGUST 15	to file the exemp	t organiza	tion return for the organization name	ed above.	The extension	
409,01000	or the organization						
	X calendar year						
	tax year begir	nning	, an	d ending		<u>.</u> .	
2 If th	ne tax year entered	d in line 1 is for less than 12 months, c	heck reas	on: Initial return	Final retur	n	
	Change in acco	ounting period					
3a If th	nis application is fo	or Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any			
nonrefundable credits. See instructions.					0.		
b If th					-		
estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$				0.			
		ct line 3b from line 3a. Include your pa					
		tronic Federal Tax Payment System).	*	5) 1360 450	Зс	\$	0.
		make an electronic funds withdrawal			3453-EO ai	nd Form 8879-EO fo	or payment
instructio			,				

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. 323841 12-31-13

Form 8868 (Rev. 1-2014)

Fee Receipt: \$8.00

dcornish

Trey Grayson, Secretary of State Received and Filed: 12/3/2010 3:44 PM

ARTICLES OF INCORPORATION OF LOUISVILLE METRO AFFORDABLE HOUSING TRUST FUND, INC.

The undersigned, acting as incorporator of a Kentucky nonstock, nonprofit corporation organized pursuant to Chapter 273 of the Kentucky Revised Statutes, hereby adopts the following Articles of Incorporation (the "Articles").

ARTICLE 1 NAME OF CORPORATION

The name of the corporation is Louisville Metro Affordable Housing Trust Fund, Inc. (the "Corporation").

ARTICLE 2 PURPOSE AND POWERS

- (1) The Corporation is organized exclusively for charitable, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"), or corresponding section of any future federal tax code.
- (2) Subject to this Article 2, the charitable and educational purposes for which the Corporation is organized shall be to receive monies and disburse monies by methods determined by the Corporation, including grants or loans, to organizations dedicated to addressing the affordable housing needs of individuals and families of low- and moderate-income households by promoting, preserving, and producing long-term affordable housing and providing housing-related services to low- and moderate-income households with the benefit of lessening the burden on governmental entities that may provide monies or support to the Corporation. The Corporation may provide financial support and enter into agreements or form additional entities for a wide variety of eligible activities to organizations serving persons in low- and moderate-income households, including, without limitation:
 - (a) Seniors on fixed incomes;
 - (b) Persons with disabilities who require accessible affordable housing;
- (c) Persons employed in Louisville Metro but financially unable to live in Louisville Metro;
 - (d) Single-parent families; and
 - (e) Households with incomes at or below 110% Area Median Income.

- (3) The Corporation may organize, promote, conduct, foster and assist, financially and otherwise, civic educational programs, activities and institutions. The Corporation may accept any conveyance of any interest in real property, private gifts, grants, donations, and other contributions to further the foregoing purposes.
- (4) No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to its members, trustees, 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 the purpose clause hereof. No substantial part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office. Notwithstanding any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on (a) by an organization exempt from federal income tax under section 501(c)(3) of the Code, or corresponding section of any future federal tax code, or (b) by an organization, contributions to which are deductible under section 170(c)(2) of the Code, or corresponding section of any future federal tax code.
- (5) Notwithstanding any other provision of these Articles of Incorporation, if, at any time, the Corporation shall be determined to be a private foundation or private operating foundation as defined in section 509 or section 4942 of the Code, then:
- (a) The Corporation shall distribute its income for each taxable year at such time and in such manner as not to become subject to the tax on undistributed income imposed by section 4942 of the Code;
- (b) The Corporation shall not engage in any act of self-dealing as defined in section 4941(d) of the Code;
- (c) The Corporation shall not purchase nor retain any excess business holding as defined in section 4943(c) of the Code;
- (d) The Corporation shall not make any investment in such manner as to subject it to tax under section 4944 of the Code; and
- (e) The Corporation shall not make any taxable expenditures as defined in section 4945(d) of the Code.

ARTICLE 3 PRINCIPAL OFFICE, INITIAL REGISTERED OFFICE AND AGENT

The mailing address of the Corporation's principal office is Post Office Box 4533, Louisville, Jefferson County, Commonwealth of Kentucky 40304. The name and address,

including street and number, of its resident agent for service of process is John T. Rippy, 601 West Market Street, Louisville, Kentucky 40202.

ARTICLE 4 INCORPORATOR

The name and address of the sole incorporator is:

Name

Address

Richard A. Vance

400 West Market Street, Ste. 1800, Louisville, Kentucky

40202

ARTICLE 5 BOARD OF DIRECTORS

The Corporation shall have no members. The affairs of the Corporation shall be managed and conducted by a board of directors. The number of directors shall be thirteen (13).

The appointment and approval of directors shall be as prescribed by the bylaws. Directors may make and adopt bylaws not inconsistent with the provisions of these Articles or the laws of the Commonwealth of Kentucky, provided, however, that directors shall not modify or alter the number of directors by amendment to the bylaws.

The initial board of directors shall consist of the following thirteen (13) persons:

Name	Address
John Rippy	601 West Market Street Louisville, Kentucky 40202
Benjamin Cook	904 Old Hobbs Place Louisville, Kentucky 40223
Alethea Spearman	1075 Garrs Lane Louisville, Kentucky 40211
Cathy Hinko	1941 Payne Street Louisville, Kentucky 40206
Kevin Dunlap	1435 S. 6th Street Louisville, Kentucky 40208
Jim Mims	444 S. 5th Street Louisville, Kentucky 40202
Michael Gardner	4329 Southern Parkway

Louisville, Kentucky 40214

Christie McCravy 2

2117 Allston Avenue

Louisville, Kentucky 40210

Ken Thieneman

1114 Balmoral Drive

Louisville, Kentucky 40205

Chris Dischinger

1469 S. 4th Street

Louisville, Kentucky 40208

Marlene Gordon

7118 Greengate Court

Louisville, Kentucky 40241

Darrell Defler

3021 Windsor Lakes Parkway

Louisville, Kentucky 40214

Tina Ward-Pugh

601 W. Jefferson Street

Louisville, Kentucky 40202

ARTICLE 6 DISTRIBUTION OF ASSETS UPON DISSOLUTION

Upon the dissolution of the Corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by the circuit court 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 7 LIMITATION OF LIABILITY; INDEMNIFICATION

- (1) No director of the Corporation shall be personally liable to the Corporation for monetary damages for any breach of his duties as a director, except for liability (i) for any transaction in which the director's personal financial interest is in conflict with the financial interests of the Corporation; (ii) 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 (iii) for any transaction from which the director derived an improper personal benefit.
- (2) Any repeal or modification of this <u>Article 7</u> shall not adversely affect any right or protection of a director of the Corporation hereunder in respect of any act or omission occurring prior to the time of such repeal or modification.

- (3) The Corporation shall, to the fullest extent permitted by Kentucky law, indemnify any director or officer of the Corporation from and against any and all reasonable costs and expenses (including, but not limited to, attorneys' fees) and any liabilities including, but not limited to, judgments, fines, penalties and reasonable settlements paid by or on behalf of, or imposed against, such person in connection with any threatened, pending or completed claim, action, suit or proceeding, whether civil, criminal, administrative, investigative or other (including any appeal relating thereto), whether formal or informal, and whether made or brought by or in the right of the Corporation or otherwise, in which such person is, was or at any time becomes a party or witness, or is threatened to be made a party or witness, or otherwise, by reason of the fact that such person is, was or at any time becomes a director, officer, employee or agent of the Corporation or, at the Corporation's request, a director, officer, partner, trustee, employee or agent of another corporation, partnership, joint venture, trust, employee benefit plan or other enterprise.
- (4) The indemnification authorized by this <u>Article 7</u> shall not be exclusive of any other right of indemnification which any such person may have or hereafter acquire under any provision of these Articles or the bylaws of the Corporation, agreement, or resolution of disinterested directors or otherwise. The Corporation may take such steps as may be deemed appropriate by the board of directors to provide and secure indemnification to any such person, including, without limitation, the execution of agreements for indemnification between the Corporation and individual directors, officers, employees or agents which may provide rights to indemnification which are broader or otherwise different than the rights authorized by this <u>Article 7</u>.

Dated: 2 day of December, 2010.

Richard A. Vance, Incorporator

CONSENT OF INITIAL REGISTERED AGENT

The initial registered agent identified in Article 3 of these Articles of Incorporation of Louisville Metro Affordable Housing Trust Fund, Inc. (the "Corporation"), hereby consents to serve the Corporation in that capacity until such time as such appointment is terminated or until the undersigned resigns in accordance with Kentucky law.

John T. Rippy

Bv:

The foregoing instrument was prepared by:

Tyson K. Adams

STITES & HARBISON

400 West Market Street, Ste. 1800

Louisville, Kentucky 40202

(502) 587-3400

Form W-9

(Rev. January 2011)
Department of the Treasury

Request for Taxpayer Identification Number and Certification

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

enue Service					
me (as shown on your income tax return)					
Louisville Metro Affordable Housing Trust Fund, Inc.					
siness name/disregarded entity name, if different from above					
Limited liability company. Enter the tax classification (C=C corporation, S= Other (see instructions) ▶ dress (number, street, and apt. or suite no.) 69 S 4th St, 3rd floor y, state, and ZIP code uisville, KY 40208 it account number(s) here (optional) Taxpayer Identification Number (TIN) r TIN in the appropriate box. The TIN provided must match the name	=S corporation, P=partnershi	ne Social security number			
		' - -			
entities, it is your employer identification number (EIN). If you do not have a number, see How to get a					
	uidelines on whose	Employer identification number			
enter.	aradimos on whose				
		2 7 - 4 1 5 5 8 3 6			
Certification					
nalties of perjury, I certify that:					
Commence of the Commence of th					
 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 					
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U.S. citizen or other U.S. person (defined below).					
	n notified by the IRS that n. For real estate transact of debt, contributions to a	you are currently subject to backup withholding tions, item 2 does not apply. For mortgage an individual retirement arrangement (IRA), and			
U.S. citizen or other U.S. person (defined below). tion instructions. You must cross out item 2 above if you have beer you have failed to report all interest and dividends on your tax return aid, acquisition or abandonment of secured property, cancellation or payments other than interest and dividends, you are not required to	n notified by the IRS that n. For real estate transact of debt, contributions to a	you are currently subject to backup withholding tions, item 2 does not apply. For mortgage an individual retirement arrangement (IRA), and ut you must provide your correct TIN. See the			
U.S. citizen or other U.S. person (defined below). tion instructions. You must cross out item 2 above if you have beer you have failed to report all interest and dividends on your tax return aid, acquisition or abandonment of secured property, cancellation or payments other than interest and dividends, you are not required to us on page 4. Signature of U.S. person	n notified by the IRS that n. For real estate transact of debt, contributions to a o sign the certification, bu Date Note. If a requester giv your TIN, you must use	you are currently subject to backup withholding tions, item 2 does not apply. For mortgage an individual retirement arrangement (IRA), and ut you must provide your correct TIN. See the			
U.S. citizen or other U.S. person (defined below). cion instructions. You must cross out item 2 above if you have beer you have failed to report all interest and dividends on your tax return aid, acquisition or abandonment of secured property, cancellation of payments other than interest and dividends, you are not required to so on page 4. Signature of U.S. person	n notified by the IRS that n. For real estate transact of debt, contributions to a o sign the certification, bu Date Note. If a requester giv your TIN, you must use to this Form W-9.	you are currently subject to backup withholding tions, item 2 does not apply. For mortgage an individual retirement arrangement (IRA), and ut you must provide your correct TIN. See the			
U.S. citizen or other U.S. person (defined below). tion instructions. You must cross out item 2 above if you have beer you have failed to report all interest and dividends on your tax return aid, acquisition or abandonment of secured property, cancellation or payments other than interest and dividends, you are not required to us on page 4. Signature of U.S. person	n notified by the IRS that n. For real estate transact of debt, contributions to a o sign the certification, bu Date Note. If a requester giv your TIN, you must use to this Form W-9.	response form other than Form W-9 to request the requester's form if it is substantially similar erson. For federal tax purposes, you are			
Transition of the state of the	uisville Metro Affordable Housing Trust Fund, Inc. siness name/disregarded entity name, if different from above eck appropriate box for federal tax scification (required): ☐ Individual/sole proprietor ☐ C Corporation] Limited liability company. Enter the tax classification (C=C corporation, Scideress (number, street, and apt. or suite no.) Gress (number, street, and apt. or suite no.) Gress (number, street, and apt. or suite no.) Gress (number, street, and apt. or suite no.) Taxpayer Identification Number (TIN) TIN in the appropriate box. The TIN provided must match the name ackup withholding. For individuals, this is your social security number in the sport of the proprietor, or disregarded entity, see the Part I instruction is your employer identification number (EIN). If you do not have a rege 3. The account is in more than one name, see the chart on page 4 for greater. Certification Taxities of perjury, I certify that: The shown on this form is my correct taxity identification number is subject to backup withholding because: (a) I am exempt from backup withholding because: (b) I am exempt from backup withholding because: (a) I am exempt from backup withholding because: (a) I am exempt from backup withholding because: (b) I am exempt from backup withholding because: (a) I am exempt from backup withholding because: (b) I am exempt from backup withholding because: (a) I am exempt from backup withholding because: (b) I am exempt from backup withholding because: (b) I am exempt from backup withholding because: (c) I am exempt from backup withholding because: (d) I am exempt from backup withholding because: (d) I	uisville Metro Affordable Housing Trust Fund, Inc. siness name/disregarded entity name, if different from above ack appropriate box for federal tax sistication (required): ☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnersh Other (see instructions) ▶ fress (number, street, and apt. or suite no.) 39 S 4th St, 3rd floor 7, state, and ZIP code uisville, KY 40208 account number(s) here (optional) Taxpayer Identification Number (TIN) TIN in the appropriate box. The TIN provided must match the name given on the "Name" liad ackup withholding. For individuals, this is your social security number (SSN). However, for a lien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other is your employer identification number (EIN). If you do not have a number, see How to get a ge 3. e account is in more than one name, see the chart on page 4 for guidelines on whose enter. Certification falties of perjury, I certify that: mber shown on this form is my correct taxpayer identification number (or I am waiting for a lot subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I			

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.
- 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.

Louisville Affordable Housing Trust Fund

Economic, Fiscal, and Social Impact of the LAHTF Study:

Scope of Work and Project Budget

The Louisville Metro Affordable Housing Trust Fund is seeking funding to complete an updated economic, fiscal, and social impact study, to be completed by November 2014. The study will look at the effects (economically, fiscally, and socially) of rehabilitating vacant/abandoned properties; revitalizing neighborhoods; creating affordable rental and homeownership opportunities; increasing the property tax base; and the impact of the insurance premium tax to fund these activities; as well as what happens when families and individuals are affordably housed in terms of reduced crisis care costs, increased educational attainment, and decreased health problems. The study will be partially funded by Louisville Metro Council; additional funding is needed immediately to proceed with the study.

The University of Louisville Urban Studies Institute (USI) will provide an impact analysis of additional spending from a 1% increase in the insurance premium tax to fund affordable housing in Louisville Metro to the Louisville Affordable Housing Trust Fund (LAHTF). USI's responsibilities for the report will consist of the following:

- 1. Prepare an executive summary of approximately 5 pages with graphics and images suitable for reproduction for distribution to a wider audience of readers.
- 2. Present most current data on rents, income of renters and other housing related data in Jefferson County, showing trends when meaningful.
- 3. Present rankings on different indicators of need for affordable housing for 16 (new group) peer cities.
- 4. Review recent relevant literature and summarize related local studies.
- In consultation with LAHTR, estimate the percentage of any additional spending on new construction, rehabilitation of existing construction, land purchase, support and administration.
- 6. In consultation with LAHTR, determine the appropriate state and federal leverage ratios by housing type.
- 7. Discuss an increase in the insurance premium tax as a means to fund additional spending on affordable housing, including, but not limited to: yield, adequacy, efficiency, incidence, and market effects.
- 8. Calculate relative tax burden for 16 peer cities before and after a 1% increase in the insurance premium tax and present rankings.

- 9. Using IMPLAN software customized for Jefferson County, examine direct, indirect and induced impacts of additional spending (yield from a 1% increase in IPT) on affordable housing programs on: employment, wages, output, household spending.
- 10. Distinguish between short term (e.g., construction) and longer term economic impacts (e.g., increase in disposable incomes of renters) and prepare ten year graph of dollar impacts for employment and output.
- 11. Using the results of (9) and (10) estimate the local tax revenues generated by the increase in activity.
- 12. Discuss other economic impacts of additional spending for affordable housing, including, but not limited to: property values, vacant and abandoned properties, employment, and economic development.
- 13. Discuss noneconomic impacts of additional spending for affordable housing, including, but not limited to, homelessness, family stability and environmental benefits.
- 14. Prepare a full bibliography.
- 15. Prepare a technical appendix on the use of social accounts based regional input-output models to determine economic impacts of certain events.

PROJECT BUDGET

PERSONNEL		
U of L Personnel Salaries		
Janet Kelly at 3% (cost recovery)	\$3,805	
Barry Kornstein at 5%	\$2,946	
Graduate Research Assistant (Hourly - 320 hours at 17.50/hour)	\$5,600	
Fringe Benefits	\$1,924	
Total Salaries and Benefits		\$14,275
OTHER DIRECT COSTS		
Supplies - IMPLAN Data		\$1,800
INDIRECT COSTS (F&A @ 36%)	_	\$5,139
TOTAL COST		\$21,214

BUDGET JUSTIFICATION

The project will require a graduate intern and staff time. Mr. Kornstein will supervise the economic modeling using the most recent (2012) data for Jefferson County, the Louisville MSA, and the Commonwealth from the IMPLAN modeling software. Dr. Kelly will supervise the entire

project. The pro-rated portion of the economic modeling software IMPLAN data is \$1800. The University assigns fringe benefits at 28.5% to staff salaries. The University establishes an overhead rate of 36% to be to be applied to salaries, fringe benefits, materials and supplies.

PROJECT TIMETABLE

The project will commence as soon as the University of Louisville Foundation notifies USI that the signed contract from Louisville Metro has been received. The project will be completed within three months of the date of receipt of the contract. USI will be paid in full after the report is submitted and found satisfactory by LAHTF and/or their designees.

LOUISVILLE METRO AFFORDABLE HOUSING TRUST FUND, INC.

General Information

Organization Number

0776713

Name

LOUISVILLE METRO AFFORDABLE HOUSING TRUST FUND, INC.

Profit or Non-Profit

N - Non-profit

Company Type

KCO - Kentucky Corporation

Status

A - Active

Standing

G - Good

State

KY

File Date

12/3/2010

Organization Date

12/3/2010

Last Annual Report

2/11/2014

Principal Office

1469 S 4TH ST

3RD FLOOR

LOUISVILLE, KY 40208

Registered Agent

JOHN T. RIPPY

601 WEST MARKET STREET

LOUISVILLE, KY 40202

Current Officers

Chairman

Kevin Dunlap

Director

Cathy Hinko

Director

Kevin Dunlap

Director

John Rippy

Individuals / Entities listed at time of formation

Director

IOHN RIPPY

Director

BENJAMIN COOK

Director

ALETHA SPEARMAN

Director

CATHY HINKO

Director

KEVIN DUNLAP

Director

JIM MIMS

Director

MICHAEL GARDNER

Director

CHRISTIE MCCRAVY

Director

CHRIS DISCHINGER

Director Director MARLENE GORDON

DARRELL DEFLER

Incorporator

RICHARD A VANCE

Images available online

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

Annual Report	2/11/2014	1 page	<u>PDF</u>	
Annual Report	4/27/2013	1 page	<u>PDF</u>	
<u>Principal Office Address</u> <u>Change</u>	4/25/2013 12:45:50 PM	1 page	<u>PDF</u>	
Annual Report	5/18/2012	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	6/17/2011	1 page	<u>PDF</u>	
<u>Principal Office Address</u> <u>Change</u>	12/6/2010 2:37:11 PM	1 page	<u>PDF</u>	
Articles of Incorporation	12/3/2010	6 pages	tiff	PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	2/11/2014 5:40:41 PM	2/11/2014 5:40:41 PM	
Annual report	4/27/2013 11:28:47 AM	4/27/2013 11:28:47 AM	
Principal office change	4/25/2013 12:45:50 PM	4/25/2013 12:45:50 PM	
Annual report	5/21/2012 10:35:33 AM	5/21/2012	
Annual report	6/17/2011 3:58:47 PM	6/17/2011 3:58:47 PM	
Principal office change	12/6/2010 2:37:11 PM	12/6/2010 2:37:11 PM	
Add	12/3/2010 3:44:24 PM	12/3/2010	

Microfilmed Images