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

Applicant/Program: Auburndale Neighborhood Association, Inc. / ANA Holiday Party				
Executive Summary of Request:				
The Auburndale Neighborhood Association (ANA) has requested a total of \$650 to fund their Annual ANA Holiday Party.  \$350 - ANA's Annual Holiday Party at Kenwood Elementary School for food, supplies, entertainment.  \$300 - Liability insurance for Holiday Party also required for holding Neighborhood Association meetings at Kenwood Elementary.				
Is this program/project a fundraiser?  Is this applicant a faith based organization?  Does this application include funding for sub-grantee(s)?  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.				
25 Frimary Sponsor 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.				
N/A				
Approved by:				
<u> </u>				
Appropriations Committee Chairman Date				
Clerk's Office Only:				
Request Amount: Committee Amended Appropriation:				
Original Appropriation: Council Amended Appropriation:				

NDF NON-PROFIT APPLICATION CHECKLIST	######################################
Legal Name of Applicant Organization: Auburndale Neighborhood Association, Inc.	WARPER DOORFIG
Program Name: ANA Holiday Party Request Amount: \$650	Yes/No/N
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?	Y
Request form: Is the funding proposed less than or equal to the request amount?	Y
<b>Request form:</b> Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?	Y
Application Page 1: Has prior Metro funds committed/granted been disclosed?	Y
Application Page 1: Is the application properly signed and dated by authorized signatory?	Y
<b>Application Page 3:</b> Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?	Y
<b>Application Pages 3</b> $-$ <b>5:</b> Is the proposed public purpose of the program well-documented?	Y
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?	Y
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?	Y
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?	N/A
<ul> <li>Good Standing: Is the entity in good standing with:         <ul> <li>Kentucky Secretary of State – include Secretary of State website information on organization</li> <li>Louisville Metro Government – check OMB monthly report filed in Council Financial Reports</li> <li>Internal Revenue Service – most recent Form 990 included</li> </ul> </li> </ul>	Y
<b>Separate Taxing Districts:</b> 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
<b>Small Cities:</b> Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)	N/A
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?	N/A
IRS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Y
Operating Budget: Is the organization's current fiscal year operating budget included?	Y
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.	N
Board Members: Is the entity's board member list (with term length/term limits) included?	Y
Staff: Is a list of the highest paid staff included with their expected annual personnel costs?	N/A
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?	Y
IRS Form W-9: Is the IRS Form W-9 included?	Y
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: Brian Boles Date: 8/4/	1/5



SECTION 1 – APPLICANT INFORMATION						
Legal Name of Applicant Organization:  Auburndale Neighborhood Association						
105 IISTED OIL. TRED J / WWW. STATE OF THE S						
Main Office Street & N	Tailing A	ddress: 1	120 Franelm Roa	ad, Louisville, KY 4021	4	
Website: N/A			AAST AAST A			
Applicant Contact:	Ray Cr	ider		Title:	Treasurer	
Phone:	502-36	8-1196		Email:	raycrider2@gmail.com	
Financial Contact:	Ray Cr	ider		Title:	Treasurer	
Phone:	502-36	8-1196		Email:	raycrider2@gmail.com	
Organization's Represe	entative	who atte	ended NDF Traini	ng: Ken Williams		
				AM ACTIVITIES ARE (W	/ILL BE) PROVIDED	
Program Facility Locat	ion(s):	Kenwo	od Elementary	School		
Council District(s):	Name (Sec.	25		Zip Code(s):	40214	
	SECTI	ON 2 - P	ROGRAM REQUE	ST & FINANCIAL INFOR	MATION	
PROGRAM/PROJECT N	IAME: A	NA Holic				
Total Request: (\$)	\$650.0	00	Total Metro Av	vard (this program) in	previous year: (\$) \$650	
Purpose of Request (c	heck all t	hat appl	y): nnot exceed 33%	of agency's total opera	iting budget)	
				t to community or qual		
				furnishing, building, et		
The state of the s			a construent the p	<u> </u>	The state of the s	
The Following are Req				☐ Signed lease if rent c	osts are being requested	
IRS Exempt Status Det Current Year Projecte				IRS Form W9		
List of Board of Direct			k term limits	-	sed in the proposed program	
Current financial state				Annual audit (if requ	ired by organization)	
Most recent IRS Form	990 or 1	120-H		Faith Based Organization Certification Form, if required		
Articles of Incorporat			_	Staff including the 3	1	
Cost estimates from proposed vendor if request is for 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: Amount: (\$)						
Source:			ngagan ngaga	Amount: (\$)		
Source:		A A A SHIP OF THE		Amount: (\$)		
Has the applicant contacted the BBB Charity Review for participation? Yes						
Has the applicant met the BBB Charity Review Standards?  Yes No						

Page 1 Effective April 2014 Applicant's Initials \_\_\_\_



SECTION 3 – AGENCY DETAILS	_
Describe Agency's Vision, Mission and Services:	
Please see the attached ANA Vision Statement	
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#### VISIONING STATEMENT

#### **Auburndale Neighborhood Association**

We are a safe neighborhood with a strong sense of community and connectivity.

Those elements that make Auburndale neighborhood special for us and reflect our values are seen in our commitments. We are committed to:

- 1. Safety and public health within the Auburndale community
- 2. Education and activities for children and adults.
- 3. Vibrant business growth, consistent with our area standards
- 4. Communication and involvement the neighborhood.
- 5. Respectful use and care for the environment including the city, river, parks and trails
- 6. Well thought out neighborhood planning which sustains the value of the land
- Systemic and fiscally responsible long-term planning, working with the neighborhood, community, city, county, and state partners.

#### 1. Safety and public health within the Auburndale community

- Support police and fire services; encourage use of neighborhood programs such as Block Watch and Arson Prevention.
- Sufficient lighting, parking and traffic control in our commercial areas.
- To support and protect the students of Kenwood Elementary and other neighboring schools.
- Encourage planning for sidewalks and bike paths along major streets
- Improved accessibility to and from the residential areas.
- Streets are repayed as required. The City informs the community of paying schedules on a yearly basis.
- An aggressively maintained drainage system for Bruce Ditch and adjoining residential areas.
- A mosquito control program.

#### 2. Education and activities for children and adults

- Continuing the ANA "Holiday Party"
- To explore and develop a neighborhood based summertime event.
- In cooperation with JCPS board members and school administrators, promote volunteerism and involvement in public school activities such as Everyone Reads.
- To explore development of a neighborhood "pocket park".
- To study the need for a community center to be shared with adjoining neighborhoods.

#### 3. Vibrant business growth, consistent with our area standards

- Be vigilant and maintain strict standards and codes regarding the types of businesses and structures in our commercial areas.
- To aggressively pursue commercial activities that positively impact to our neighborhood.
- Use planters, and landscaping to beautify our neighborhood streets.

#### 4. Communication and involvement with the neighborhood.

- That we have an active Neighborhood Association that listens to all input, actively engages those impacted by decisions, employs behaviors that treat all with respect, and works collaboratively with City, State and Federal leaders to plan effectively.
- To maintain up-to-date neighborhood resources and information on the Web.

#### 5. Respectful use and care for the environment including the city, river, parks and trails

- Support Metro Government's Brightside program through use environmentally friendly solutions and support recycling in all things.
- Advocate regular maintenance of Iroquois and surrounding our parks; connecting trails and to assure that area parks are an
  integral part of the systemic planning for Metro Parks and Recreation.
- To try to save and actively plant trees and local flora throughout our neighborhood.

#### 6. Well thought out neighborhood planning which sustains the value of the land

- Our freeway (Snyder and Watterson) neighborhood and business access is effective, efficient and safe for pedestrians and bicyclists.
- That Auburndale be served by an effective neighborhood public transportation that focuses on connectivity to centers of employment and commerce.
- Development needs to be consistent with the value of the area.
- Those developers take ownership for impact to the infrastructure such as streets, sidewalks, schools, water, sewer, etc.
- To foster and encourage development that sustains a park-like environment with homes with livable lot sizes that add value and beauty to the neighborhood.
- Sponsor a farmers market

# 7. Systemic and fiscally responsible long-term planning, working with the neighborhood, community, city, county, and state partners.

- To view planning as multiple "phases" that will eventually reach our goals within neighborhood and legal boundaries.
- To partner with Metro Government and it's planners for effective planning for Auburndale.
- That we work to influence improvement to the regulations, laws and initiatives that impact our neighborhood.



#### 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.):

ANA Annual Holiday Party will be held Tuesday, December 15th, 2015 at Kenwood Elementary School.

This Event will feature both purchased food and pot luck, musical entertainment for adults and children, as well as displays by LMPD & LMFD.

This event's purpose is to afford our ethnic diverse community an opportunity to meet and socialize as well as promote public safety in our community by getting to know our community neighbors.

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

All funding for the ANA Annual Holiday Party will be for: \$650

Food Condiments Musical Entertainment. Printing/Fliers

Liability Insurance (\$300) for ANA Meetings & Holiday Party.





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

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Effective April 2014

Applicant's Initials  $R^{0}$ 



E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served:
The Computer Program "Next Door" has generated more community participation by providing a communication device for the community and increased Public Safety Awareness.
The Holiday Party encourages community involvement in Neighborhood Watch Programs and other Civic Activities.
This event's purpose is to afford our ethnic diverse community an opportunity to meet and socialize.
Participation has increased throughout the years.
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.
LG&E assists with some printing.
We have a partnership with Kenwood Elementary School in which the ANA supports various school activities in exchange for monthly meeting space.



#### 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.

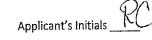
	Column 1	Column 2	Column (1+2)=3
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits	0	300	300
B: Rent/Utilities	0	720	720
C: Office Supplies	0	200	200
D: Telephone	0	0	0
E: In-town Travel	0	0	0
F: Client Assistance (Attach Detailed List)	0	0	0
G: Professional Service Contracts	300	0	300
H: Program Materials	0	0	0
1: Community Events & Festivals (Attach Detail List)	350	200	550
J: Small Equipment	0	0	0
K: Capital Equipment	0	0	0
L: Other Expenses (Attach Detail List)	0	0	0
*TOTAL PROGRAM/PROJECT FUNDS	650	1,420	2,070
% of Program Budget	31% %	69 %	100%

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

0	
0	
\$1,420.00	
0	
0	
\$1,420.00	

<sup>\*</sup>Total of Column 1 MUST match "Total Request on Page 1, Section 2"

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<sup>\*\*</sup>Must equal or exceed total in column 2.

	А	В	С
1			
2		Auburndale Holiday Party	
3	Needs:	Number, Reason, Etc.	Estimated Cost
4	Insurance Cost for Parties & Meetings	State Farm Liability Insurance - Usually split 1/2 for Summer Picnic and 1/2 Holiday Party	\$300
5	Paper products, Napkins	Paper products, Napkins for Holiday Party	\$30
6	Pizza, Fruit, Popcorn, 2 Liters	Majority of Food, Drinks for Holiday Party	\$100
7	Ice	Ice for Drinks & Keeping Food Safe to Eat	\$20
8	Entertainment	Microphone/Santa Claus	\$100
9	Advertisement	Paper & Ink for Fliers, etc.	\$75-\$100
10	Total		\$650
11			
12	*Costs are estimates and not re	eflective of the exact amount Auburndale Neighbor	rhood Association
13	may use per any category lis	ted here. Any costs over the amount appropriated	for the overall
14	Summe	er Picnic will be Auburndale's Responsibility.	



#### A STOCK COMPANY WITH HOME OFFICES IN BLOOMINGTON, ILLINOIS

2500 Memorial Boulevard Murreesboro, TN 37131-0001

#### Named Insured

AT2

E-11-2138-FB9E F N

AUBURNDALE NEIGHBORHOOD ASSOCIATION, INC 1120 FRANELM RD LOUISVILLE KY 40214-4152

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#### **RENEWAL DECLARATIONS**

**Policy Number** 

97-BT-D720-9

Policy Period 12 Months Effective Date AUG 23 2014 Expiration Date AUG 23 2015

The policy period begins and ends at 12:01 am standard time at the premises location.

Agent and Mailing Address
VINCE JARBOE INS AGCY INC
5101 NEW CUT RD
LOUISVILLE KY 40214-2738

PHONE: (502) 380-3800

#### **Businessowners Policy**

Automatic Renewal - If the policy period is shown as 12 months, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

**Entity: NON PROFIT** 

NOTICE: Information concerning changes in your policy language is included. Please call your agent if you have any questions.

POLICY PREMIUM Minimum Premium

\$ 275.00

Claim Record

KY Municipal Tax/Fee KY Revenue Surchg

\$ 15.81 \$ 4.95

**Total Amount** 

\$ 295.76

Discounts Applie Years in Busine

Prepared JUN 04 2014 CMP-4000

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

	Donor*/Type of Contribution	Value of Contribution	Method of Valuation			
	Kenwood Meeting Space	\$720.00	Actual Cost			
	Event Volunteers	\$300.00	30 Hrs. X \$10			
	Food Donations	\$200.00	\$100 Pizza/\$100 Pot Luck			
	Office Essentials - Fliers, Printing.	\$200.00	Cost of Ink & Paper			
	Total Value of In-Kind  (to match Program Budget Line Item.  Volunteer Contribution &Other In Kind)	\$1420.00				
* DONOR INFORMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION. VOLUNTEERS NEED NOT BE LISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NOTING HOW MANY HOURS PER PERSON PER WEEK  Agency Fiscal Year Start Date: January 1st						
u	es your Agency anticipate a significant increas dget projected for next fiscal year? NO   /ES, please explain:	e or decrease in your budget YES	from the current fiscal year to the			

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#### SECTION 6 - CERTIFICATIONS & ASSURANCES

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

#### Standard Assurances

- 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
- Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic 3, 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.
- Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal 7.
- 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.
- 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.
- 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.
- Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its malling to the applicant, the approval is automatically revoked.

#### Standard Certifications

- The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
- The Agency has a written Affirmative Action/Equal Opportunity Policy.
- 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.
- 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.
- 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.

I, Ray Crider, am the father of Andrea Derouen, CW Madonna Flood's Assistant.

#### 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.	-/-/-/	<del>1 1</del>		Of te
Signature of Legal Signatory:	Kalu (	wh	Date:	0/3/13
Legal Signatory: (please print):	Ray Crider		Title:	Treasurer
Phone: 502-368-1196	Extension:	Email:	raycrider2	@gmail.com

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# Commonwealth of Kentucky Alison Lundergan Grimes, Secretary c

NARP 0744470 Alison Lundergan Grimes KY Secretary of State Received and Filed 1/5/2015 9:21:27 AM Fee receipt: \$15.00

Alison Lundergan Grimes Secretary of State P. O. Box 1150 Frankfort, KY 40602-1150 (502) 564-3490 http://www.sos.ky.gov

# Annual Report Online Filing

ARP

Company:

AUBURNDALE NEIGHBORHOOD ASSOCIATION, INC.

Company ID: State of origin:

0744470 Kentucky

Formation date:

9/24/2009 12:00:00 AM 1/5/2015 9:21:27 AM

Date filed: Fee:

\$15.00

#### **Principal Office**

1120 FRANELM RD LOUISVILLE, KY 40214

#### Registered Agent Namel Address

RAY CRIDER 1120 FRANELM RD LOUISVILLE, KY 40214

#### Current Officers

President Secretary Treasurer KEN WILLIAMS SHARON SPATT RAY CRIDER

Vice President

KENNY MCFARLAND

#### **Directors**

Director Director Director PATSY BLACK JOYCE WHALIN KAREN BOSTON

#### Signatures

Signature Title

Ray Crider Treasurer



Do not use the browser's back, forward, refresh, nome, or stop buttons to navigate through this program. Always use the buttons provided on the forms to proceed through the annuareport process.

#### 0744470 - AUBURNDALE NEIGHBORHOOD ASSOCIATION, INC.

#### Your annual report has been filed successfully.

Click here to view the filing created for this annual report.

You can print this page to use as your verification that the annual report has been filed, and as a receipt for your payment.

Company ID:

0744470.09,99999

Annual Report Date:

1/5/2015

Principal Office:

1120 FRANELM RD

LOUISVILLE. KY 40214

Registered Agent:

RAY CRIDER

1120 FRANELM RD LOUISVILLE, KY 40214

EPay Transaction ID:

14984360

Credit Card Authorization Number:

025416

SOS Accounting ID:

3648871.4925909

Filing Fee:

\$15.00

Signature:

Ray Crider

Title:

Treasurer

#### Current Officers

Office

Name and Address

President

KEN WILLIAMS, 1018 Franelm Rd., Louisville, Ky 40214

Secretary

SHARON SPATT, 1036 Francim Rd, Louisville, Ky 40214

Treasurer

RAY CRIDER, 1120 Franelm Rd., Louisville, Ky 40214

Vice President

KENNY MCFARLAND, 7520 Merlyn Cir, Louisville, Ky 40214

#### Directors

#### Name and Address

PATSY BLACK, 1011 Cristland Rd, Louisville, Ky 40214 JOYCE WHALIN, 1050 Runnel, Louisville, Ky 40214 KAREN BOSTON, 1048 Francim Rd. Louisville, Ky 40214

View entity

#### AUBURNDALE NEIGHBORHOOD ASSOCIATION, INC.

#### **General Information**

Organization Number 0744470

Name AUBURNDALE NEIGHBORHOOD ASSOCIATION, INC.

**Profit or Non-Profit** N - Non-profit

Company Type KCO - Kentucky Corporation

StatusA - ActiveStandingG - Good

State KY

 File Date
 9/24/2009

 Organization Date
 9/24/2009

 Last Annual Report
 1/5/2015

Principal Office 1120 FRANELM RD

LOUISVILLE, KY 40214

Registered Agent RAY CRIDER

1120 FRANELM RD LOUISVILLE, KY 40214

#### **Current Officers**

President <u>KEN WILLIAMS</u>

Vice President KENNY MCFARLAND

SecretarySHARON SPATTTreasurerRAY CRIDERDirectorPATSY BLACKDirectorJOYCE WHALINDirectorKAREN BOSTON

#### Individuals / Entities listed at time of formation

DirectorRAY WHITENERDirectorKEN MCFARLAND

**Director** RAY CRIDER

**Director** <u>STEPHEN COTTON</u>

Incorporator <u>KATHY RECKTENWALD</u>

#### Images available online

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

<u>Annual Report</u>	1/5/2015	1 page	<u>PDF</u>
<u>Annual Report</u>	1/4/2014	1 page	<u>PDF</u>
Annual Report	1/2/2013	1 page	<u>PDF</u>
Annual Report	1/11/2012	1 page	PDF

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Reinstatement Certificate of Existence	7/19/2011 11:22:56 AM	2 pages	<u>PDF</u>	
Reinstatement	7/19/2011 11:21:38 AM	2 pages	<u>PDF</u>	
Reinstatement Approval Letter Revenue	7/19/2011 10:15:14 AM	1 page	<u>PDF</u>	
<u>Principal Office Address</u> <u>Change</u>	7/19/2011	1 page	<u>tiff</u>	<u>PDF</u>
Registered Agent name/address change	7/19/2011	1 page	<u>tiff</u>	<u>PDF</u>
Administrative Dissolution	11/2/2010	1 page	<u>PDF</u>	
Articles of Incorporation	9/24/2009	3 pages	<u>tiff</u>	<u>PDF</u>

#### **Assumed Names**

**Activity History** 

Filing	File Date	Effective Date	Org. Referenced
Annual report	1/5/2015 9:21:27 AM	1/5/2015 9:21:27 AM	
Annual report	1/4/2014 2:36:27 PM	1/4/2014 2:36:27 PM	
Annual report	1/2/2013 11:53:37 AM	1/2/2013 11:53:37 AM	
Annual report	1/11/2012 4:10:02 PM	1/11/2012 4:10:02 PM	
Registered agent address change	7/19/2011 11:23:55 AM	7/19/2011	
Principal office change	7/19/2011 11:23:25 AM	7/19/2011	
Reinstatement	7/19/2011 11:22:52 AM	7/19/2011	
Application For Reinstatement	7/18/2011 4:56:59 PM	7/18/2011	
Admin Dis. A. report not in	11/2/2010	11/2/2010	
Add	9/24/2009 3:34:08 PM	9/24/2009	

#### Microfilmed Images

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

Date: JUL 2 1 2015

AUBURNDALE NEIGHBORHOOD ASSOCIATION INC C/O RAY CRIDER 1120 FRANELM RD LOUISVILLE, KY 40214 tification Number:

DLN:

17053168338025
Contact Person:
NICHOLAS R HINDS
Contact Telephone Number:
(877) 829-5500

ID# 31662

Accounting Period Ending:
December 31
Form 990 Required:
Yes

Effective Date of Exemption: September 24, 2009 Contribution Deductibility:

No 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)(4) of the Internal Revenue Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

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

Sincerely,

Jeffrey I. Cooper

Director, Exempt Organizations

Rulings and Agreements

# IRS DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN UT 84201-0023

002354\_587796\_0008\_001 1 MB 0\_382 532 :[hilispipe]]]is[[]]]]]][]][]]]]]]]]]]]]]]]]]]]] Date of this notice: 07-24-2009

Form: SS-4

Number of this notice: CP 575 E

For assistance you may call us at 1-800-829-4933

--

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

AUBURNDALE NEIGHBORHOOD ASSOCIATION Z RAY CRIDER 1120 FRANELM RD LOUISVILLE KY 40214

002354

# WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN This EIN will identify you, your business accounts, tax returns, permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Assigning an EIN does not grant tax-exempt status to non-profit organizations. Publication 557, Tax Exempt Status for Your Organization, has details on the application process, as well as information on returns you may need to file. To complete either Form 1623, Application for Recognition Under Section 501(c)(3) of the Internal Revenue Code, or Form 1024, Application for Recognition of Exemption Under Section 501(a). Submit the completed form, all applicable attachments, and

Internal Revenue Service PO Box 192 Covington, KY 41012-0192

The Pension Protection Act of 2006 contains numerous changes to the tax law provisions affecting tax-exempt organizations, including an annual electronic notification requirement (Form 990-N) for organizations not required to file an annual information return (Form 990-EZ). Additionally, if you are required to file an annual information return, you may be required to file it electronically. Information on your filing requirements.

#### **AUBURNDALE NEIGHBORHOOD ASSOCIATION BUDGET - 2015**

#### 1/1/2015 THROUGH 12/31/2015

	ACTUAL	BUDGET	DIFFERENCE
INCOME			
GOVERNMENT GRANT	\$0.00	\$1,500.00	\$1,500.00
MEMBER DONATION	\$0.00	\$500.00	\$500.00
TOTAL INCOME	\$0.00	\$2,000.00	\$2,000.00
EXPENSES			
GOVERNMENT	\$15.00	\$50.00	\$35.00
SUMMER PICNIC	\$0.00	\$500.00	\$500.00
LIBILITY INSURANCE	\$0.00	\$300.00	\$300.00
SUPPLIES	\$0.00	\$150.00	\$150.00
HOLIDAY PARTY	\$0.00	\$500.00	\$500.00
MAINTENANCE OF BERMS	\$0.00	\$500.00	\$500.00
OTHER	\$0.00	\$25.00	\$25.00
TOTAL EXPENSES	\$15.00	\$2,025.00	\$2,010.00
OVERALL TOTAL	(\$15.00)	(\$25)	(\$10)

#### 2013 HOLIDAY PARTY 1/1/2013 through 12/30/2013 (Cash Basis)

Date	Num	Memo	Amount	Page 1
EXPENSES			-270.59	
GFS MARKETPLACE			-8.98	
12/15/2013	DC	NAPKINS, F	-8,98	
SCOT OBRYAN			-100.00	
12/18/2013	142	DJ SERVICES	-100.00	
SISTER BEAN'S COFFEE I	HOUSE		-38.16	
12/17/2013	DC	COFFEE	-38.16	
SPEEDWAY			-1.59	
12/17/2013	DC	CREAMER	-1.59	
Staples			-121.86	
12/12/2013	DC	INK, POSTC	-121.86	
	OVERALL	TOTAL	-270.59	

1/2 Libility Insurance -\$147.89 - half from Picnic \$418.48

Dogo 1

#### 2014 HOLIDAY PARTY - 2014 1/1/2014 through 12/31/2014 (Cash Basis)

Page 1 3/3/2015 Date Num Memo Amount -325.92 **EXPENSES** -29.97 BED, BATH & BEYOND -29.97 DC **GINGERBREAD HOUSE KITS** 12/14/2014 -75.00 **CAPTUNES DJ SERVICES** -75.00 145 SANTA CLAUS APPEARENCE 12/16/2014 -16.96DEALS DESERT BOWLS, CUPS, PLATES -11.66 DC 12/12/2014 -5.30 TABLE COVERS DC 12/12/2014 -31.80 K-MART -31.80 DC **POPCORN** 12/14/2014 -48.94 KRISPY KREME **DONUTS** -48.94 DC 12/16/2014 -80.37 **KROGER** -24.02DC DRINKS 12/13/2014 -56.35 **VEGETABLE TRAYS** DC 12/16/2014 -5.83 PAT'S GLASSWARE -5.83 **PLATES** DC 12/16/2014 -37.05 **PIZZA HUT** -37.05 12/16/2014 DC PIZZA FOR PARTY

1/2 Libility Ins-\$147.89

OVERALL TOTAL

\$473,81

-325.92

Has Not Changed (2015) No Tern Linits

# AUBURNDALE NEIGHBORHOOD ASSOCIATION OFFICERS 2012-2013

Second Year of Two year term Second Year of Two year term Second Year of Two year term First Year of Two year First Year of Two year No Term Limits No Term Limits No Term Limits term term VICE-PRESIDENT | KEN MACFARLAND CAROLYN NOWLIN RAY WHITERNER **KAREN BOSTON** STEVE COTTON **KEN WILLIAMS** Joyce Whalen PATSY BLACK RAY CRIDER SGT-AT-ARMS **TREASURER** SECRETARY **PRESIDENT PRESIDENT** AT-LARGE-MEMBERS **EMERITUS** 







759-09-01-00 55109 0 C 001 30 50 003 AUBURNDALE NEIGHBORHOOD ASSOCIATION 1120 FRANELM RD LOUISVILLE KY 40214-4152

### Your account statement

For 06/30/2015

#### Contact us



BBT.com -



(800) BANK-BBT or (800) 226-5228

Award-winning service has always been our goal. It's nice to know we're on the right track.

We are excited to announce that BB&T received an industry-noteworthy 22 Greenwich Excellence Awards from Greenwich Associates for our financial stability, overall satisfaction and outstanding client service in 2014! Greenwich Associates is a leading financial services research firm.

BB&T, Member FDIC.

The 2014 Greenwich Associates Commercial Banking Study is with companies with sales of \$1MM to \$500MM and is based on over 30,000 interviews © 2015, Branch Banking and Trust Company. All rights reserved.

#### **■ COMMUNITY CHECKING**

#### **Account summary**

Your previous balance as of 05/29/2015	\$550.09
Checks	- 0.00
Other withdrawals, debits and service charges	- 191.86
Deposits, credits and interest	+ 50.00
Your new balance as of 06/30/2015	= \$408.23

#### Other withdrawals, debits and service charges

DATE	DESCRIPTION	AMOUNT(\$)
06/19	BB&T CHECK CARD PURCHASE-PIN 06-18-15 KROGER 2838 5533 NEW CUT LOUISVILLE KY	29.21
06/22	BB&T CHECK CARD PURCHASE-PIN 06-20-15 LOUISVILLE KY 2838 GFS STORE #0543 7483 DI	73.14
06/22	BB&T CHECK CARD PURCHASE-PIN 06-20-15 KROGER 2838 5533 NEW CUT LOUISVILLE KY	17.28
06/23	BB&T CHECK CARD PURCHASE-PIN 06-23-15 KROGER 2838 5533 NEW CUT LOUISVILLE KY	46.48
06/24	BB&T CHECK CARD PURCHASE-PIN 06-23-15 DOLLAR-GENERAL 2838 5524 NEW CUT LOUISVILLE	25.75
	KY	
Total of	ther withdrawals, debits and service charges	= \$191.86
Deposit	ts, credits and interest	
DATE	DESCRIPTION	AMOUNT(\$)
06/24	DEPOSIT	50,00
Total de	eposits, credits and interest	= \$50.00
,		Y 2 (





Home Support Links Log Out

Check Filing Status

AUBURNDALE NEIGHBORHOOD ASSOCIATION

Links

View e-Postcard Image

2014 IRS Form 990-N (e-Postcard) 1/1/2014 - 12/31/2014 Control Panel

View Form 990-N (e-

**Current Status:** 

Accepted

Congratulations, the IRS accepted your Form 990-N (e-Postcard).

**Next Step:** 

Your next e-Postcard will be due after 12/31/2015.

Delivery Status

No. Filing

**Delivery Status** 

**Postmark** 

1 Form 990-N

E-file

Accepted on 1/8/2015

1/8/2015 5:45:13 PM

Questions or problems regarding this web site should be directed to Tech Support

Concerned about your privacy? Please view our privacy policy.

This website is best viewed with Microsoft Internet Explorer 6.0+ or Mozilla Firefox with a screen resolution of 1024 X 768.

Last modified: February 14, 2015.

# Articles of Incorporation of Auburndale Neighborhood Association, Inc.

0744470.09

dcornish ADD

Trey Grayson, Secretary of State

Received and Filed: 9/24/2009 3:34 PM Fee Receipt: \$8.00

WE, THE UNDERSIGNED, having associated for the purposes of forming a non-profit, non-stock corporation, under and pursuant to the laws of the Commonwealth of Kentucky, and more particularly Chapter 273, Kentucky Revised Statutes (KRS), hereby certify as follows:

#### **Article I**

The name of the corporation shall be:

#### Auburndale Neighborhood Association, Inc.

#### **Article II**

The duration of the corporation shall be perpetual.

#### **Article III**

The address of the registered and principal office of the corporation is:

7536 Merlyn Circle Louisville, KY 40214

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

Kathy Recktenwald 7536 Merlyn Circle Louisville, KY 40214

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

#### **Article IV**

The corporation is organized and shall be operated exclusively for the promotion of social welfare as described within Section 501(c)(4) of the Internal Revenue Code (or corresponding provisions of any later federal tax laws), including for such purposes the making of distributions to organizations and individuals for the purpose of engaging in activity falling within the purposes of the corporation and permitted for an organization exempt under said Section 501(c)(4).

The purposes of the corporation shall be more specifically stated as follows:

- 1) Enhance the health, safety and welfare of the community;
- 2) Provide a forum wherein neighborhood issues and concerns may be publicly expressed and discussed;
- 3) Improve the economic life of the Auburndale area;
- 4) Encourage a spirit of friendliness and cooperation with other groups in the Auburndale neighborhood and throughout the Louisville/Jefferson County Metro area;
- 5) Foster cooperation and unity between property owners, business people, tenants, and others;
- 6) Meet the educational and cultural needs of the community;
- 7) Encourage improvements in municipal services through public involvement and cooperation with local government;
- 8) Encourage, plan, and coordinate the beautification, preservation, rehabilitation, and revitalization of all residential and public properties, structures and physical environment

- 9) Seek the assistance and cooperation from government agencies and other neighborhood associations to resolve common neighborhood problems, achieve common neighborhood objectives and goals, and to maintain and improve the quality of life for residents of all neighborhoods;
- 10) Support other charitable, educational and cultural activities which advance the general well being of the community and its people.

Article V

The corporation shall be irrevocably dedicated to and operated exclusively for non-profit purposes. No part of the net earnings of the corporation shall inure to the benefit of or be distributable to its members, directors, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article IV hereof.

#### Article VI

In carrying out the corporate purposes described in Article IV, the corporation shall have all the powers granted by the laws of the State of Kentucky, including in particular those listed in KRS 273.171 (or corresponding provision of any later State statute), except as follows and as otherwise stated in these Articles:

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

#### Article VII

The name and address of the Incorporator is:

#### **Incorporator**

#### **Address**

Kathy Recktenwald

7536 Merlyn Circle Louisville, Kentucky 40214

#### Article VIII

The initial board of directors shall consist of four directors. The names and addresses of the members of the initial Board of Directors are:

Director Address

Ray Whitener 5403 Sunnybrook Drive

Louisville, Kentucky 40214

Ken McFarland 7520 Merlyn Circle
Louisville, Kentucky 40214

Ray Crider 1120 Franelm Road Louisville, Kentucky 40214

Stephen Cotton 5454 Bruce Avenue Louisville, Kentucky 40214

#### Article IX

The original bylaws shall be adopted by the initial Board of Directors. Thereafter, the Corporation shall be governed by the Bylaws.

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

#### **Article X**

a) The directors, officers and at-large members, employees and members of this Corporation shall not be held personally liable for any debt or obligation of the corporation solely because of their position in the Corporation.

- b) Any person serving on the Board of Directors of this Corporation shall not be held personally liable for monetary damages resulting from the breach of his/her duties as a director unless such act, omission or breach:
  - 1) concerned or concerns a transaction in which the director's personal financial interest was or is in conflict with the financial interests of the Corporation;
    - 2) was not in good faith or involved or involves intentional misconduct on the part of the director;
    - 3) was known by the director to be a violation of law; or
    - 4) resulted in an improper personal benefit to the director.

#### Article XI

The Corporation may indemnify any director, officer and at-large member, or former director, officer and at-large member, of the Corporation against any expenses actually and reasonably incurred by him/her in connection with the defense of any action, suit or proceeding, civil or criminal, in which he/she is made a party by reason of being or having been such director, officer and atlarge member, except in relation to matters as to which he/she shall be adjudged in such action, suit or proceeding, to be liable for negligence or misconduct in the performance of duty to the Corporation. The Corporation may make any other indemnification permitted by law and authorized by its articles of incorporation, By-laws or resolution adopted after notice to members entitled to

#### **Article XII**

In the event of dissolution of the Corporation, the board of directors shall, after paying or making provision for the payment of all liabilities of the Corporation, dispose of all assets of the Corporation exclusively for the purposes of the Corporation, in such manner, or to such organizations organized and operated exclusively for the promotion of social welfare as shall at the time qualify as an exempt organization under Section 501(c)(4) or 501 (c) 3 of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), or to a state or local government for a public purpose as the Board of Directors shall determine.

The remaining assets, if any, shall be disposed of by the Circuit Court of the county in which the principal office for the Corporation is then located, exclusively for such purposes or to such organizations as said court shall determine are organized and operated exclusively for such purposes.

#### **Article XIII**

Amendments to these articles shall be made pursuant to the provisions of KRS 273.263 (or corresponding provision of any later State statute).

IN TESTIMONY WHEREOF, witness the signature of the Incorporator of this Corporation, this 2<sup>nd</sup> day of September 2009.

STATE OF KENTUCKY ) ) SS **COUNTY OF JEFFERSON )** 

Before me, the undersigned authority, personally appeared and being duly sworn, acknowledged that she is the incorporator and agent of process of the aforementioned Corporation, and that she signed the aforementioned articles of incorporation as her free act and deed.

Witness my signature and seal of office this 2nd day of September, 2009.

My Commission Expires: Notary Public, State at Large, KY My con mission expires Nov. 20, 2012

This Document Prepared By:

State At Large, Kentucky

Amanda S. Clephas, Community Outreach Liaison Department of Neighborhoods

Form **W-9** (Rev. December 2014)

(Rev. December 2014) Department of the Treasury Internal Revenue Service

returns include, but are not limited to, the following:

• Form 1099-S (proceeds from real estate transactions)

Form 1099-DIV (dividends, including those from stocks or mutual funds)
 Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 Form 1099-B (stock or mutual fund sales and certain other transactions by

• Form 1099-K (merchant card and third party network transactions)

• Form 1099-INT (Interest earned or paid)

# Request for Taxpayer Identification Number and Certification

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

	1 Name (as shown on your income tax return). Name is required on this line; d	o not leave this line blank.			
5 AUBURNDALE NEIGHBORHOOD ASSOCIATION					
લં	2 Business paradifferenceided antity game if different from about				
	0				
Print or type Specific Instructions on page	3 Check appropriate box for federal tax classification; check only one of the following seven boxes:  ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate single-member LLC ☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ►  Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.		o) ►	Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any)  Exemption from FATCA reporting code (if any)	
<u>r</u> 2	✓ Other (see instructions) ►			(Applies to accounts maintained outside the U.S.)	
:≝	5 Address (number, street, and apt. or suite no.)	R	equester's name (	and address (optional)	
e de	1120 FRANELM ROAD				
See S	6 City, state, and ZIP code				
ഗ്	LOUISVILLE, KY 40214				
	7 List account number(s) here (optional)	<del></del>			
Par	Taxpayer Identification Number (TIN)				
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a					
<b>Note.</b> guidel	Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.				
Pari	II Certification				
Under	penalties of perjury, I certify that:	<del>~</del>			
1. The	number shown on this form is my correct taxpayer identification num	ber (or I am waiting for a r	number to be is	sued to me); and	
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and					
3. I ar	n a U.S. citizen or other U.S. person (defined below); and				
4. The	FATCA code(s) entered on this form (if any) indicating that I am exemp	ot from FATCA reporting is	correct.		
interes genera instruc	cation instructions. You must cross out item 2 above if you have bee se you have failed to report all interest and dividends on your tax return t paid, acquisition or abandonment of secured property, cancellation of ally, payments other than interest and dividends, you are not required to tions on page 3.	n. For real estate transact of debt, contributions to a	ons, item 2 doe	es not apply. For mortgage	
Sign Here	Signature of U.S. person ► Kay (ndv)	Date I	· 3/1	7/15	
	eral Instructions	Form 1098 (home mortga (tuition)	ge interest), 1098	-E (student loan interest), 1098-T	
Section references are to the Internal Revenue Code unless otherwise noted.  • Form 1099-C (conceled debt)					
Etitura dovologramente information about dovologramente affectiva E M O fecula		Form 1099-A (acquisition or abandonment of secured property)			
Purpose of Form  Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.				n (including a resident alien), to	
		If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.			
	nay be your social security number (SSN), individual taxpayer identification (ITTN), adoption taxpayer identification number (ATIN), or employer	By signing the filled-out form, you:			
identific	ation number (EIN), to report on an information return the amount paid to other amount reportable on an information return. Examples of information	<ol> <li>Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),</li> </ol>			

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, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.