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

Applicant/Program: Louisville Independent Business Alliance (LIBA)

Executive Summary of Request:

Grant for Buy Local First Fair on Sunday, May 22, from 12 - 6 pm at Louisville Water Tower, 3005 River Road. Funds will be spend on rentals, printing, licenses and permits, bike parking, advertising, etc.

Is this program/project a fundraiser?	☑ Yes	☐ No
Is this applicant a faith based organization?	☐ Yes	☑ No
Does this application include funding for sub-grantee(s)?	☐ Yes	☑ No

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

District #	Council Member Signature	Amount	Date
9	Bill Hollander	$2,000	03/09/16

Primary Sponsor Disclosure

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

n/a

Approved by:

Appropriations Committee Chairman ______________ Date

Clerk's Office Only:

Request Amount: ______________ Committee Amended Appropriation: ______________

Original Appropriation: ______________ Council Amended Appropriation: ______________

Applicant/Program: Louisville Independent Business Alliance (LIBA)

Additional Disclosure and Signatures

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

District #	Council Member Signature	Amount	Date
8	Tom Owen	#1,200 —	3/21/2016
12	[illegible]	#300 —	3/29/2016
3	Mary C. Woolridge	#200 —	03/29/16
16	Kelly Downard	#200 —	03/29/16
4	David Tandy	#1,500 —	3/29/2016
13	Vicki Aubrey Welch	#300 —	3-29-16
15	Marianne Butler	#300 —	03/29/16

Applicant/Program:	Louisville Independent Business Alliance (LIBA)

Additional Disclosure and Signatures

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

District #	Council Member Signature	Amount	Date
10	[signature]	$800 —	03/29/16
6	[signature]	$300 —	3-29-16
17		$300 —	
14	Cindi Fowler	$300 —	3/31/16
25	[signature] BB	$300 —	4/4/16

LOUISVILLE METRO COUNCIL
NEIGHBORHOOD DEVELOPMENT FUND APPLICATION CHECKLIST

Legal Name of Applicant Organization: Louisville Independent Business Alliance

Program Name and Request Amount: Buy Local First Fair

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	Yes
Is the funding proposed by Council Member(s) less than or equal to the request amount?	Yes
Is the proposed public purpose of the program viable and well-documented?	Yes
Will all of the funding go to programs specific to Louisville/Jefferson County?	Yes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	Yes
Has prior Metro Funds committed/granted been disclosed?	Yes
Is the application properly signed and dated by authorized signatory?	Yes
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes
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
Is the entity in good standing with: • Kentucky Secretary of State? • Louisville Metro Revenue Commission? • Louisville Metro Government? • Internal Revenue Service? • Louisville Metro Human Relations Commission?	Yes
Is the current Fiscal Year Budget included?	Yes
Is the entity's board member list (with term length/term limits) included?	Yes
Is recommended funding less than 33% of total agency operating budget?	N/A
Does the application budget reflect only the revenue and expenses of the project/program?	Yes
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	N/A
Is the most recent annual audit (if required by organization) included?	N/A
Is a copy of Signed Lease (if rent costs are requested) included?	N/A
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	N/A
Are the Articles of Incorporation of the Agency included?	Yes
Is the IRS Form W-9 included?	Yes
Is the IRS Form 990 included?	Yes
Are the evaluation forms (if program participants are given evaluation forms) included?	N/A
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	N/A
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	No
Prepared by: Kyle Ethridge	Date: 03/09/16

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization: *(as listed on: http://www.sos.ky.gov/business/records)*	Louisville Independent Business Alliance		
Main Office Street & Mailing Address:	1974-A Douglass Blvd., Ste. 101, Louisville, KY 40205 or PO Box 4759, 40204		
Website:	www.keeplouisvilleweird.com		
Applicant Contact:	Jennifer Rubenstein	**Title:**	Director
Phone:	502-473-4687	**Email:**	jennifer@keeplouisvilleweird.com
Financial Contact:	same	**Title:**	
Phone:		**Email:**	
Organization's Representative who attended NDF Training:	Kristen Byrnes		
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	Louisville Water Tower Park, 3005 River Road		
Council District(s):	9 (although booths from many districts)	**Zip Code(s):**	40207, but booths from all over

SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME:	8th Annual Buy Local Fair		
Total Request: ($)	$10,800	**Total Metro Award (this program) in previous year: ($)**	$6,500

Purpose of Request (check all that apply):

- [ ] Operating Funds (generally cannot exceed 33% of agency's total operating budget)
- [x] Programming/services/events for direct benefit to community or qualified individuals
- [ ] Capital Project of the organization (equipment, furnishing, building, etc)

The Following are Required Attachments:

- [x] IRS Exempt Status Determination Letter
- [x] Current Year Projected Budget
- [x] List of Board of Directors (include term & term limits
- [x] Current financial statement
- [x] Most recent IRS Form 990 or 1120-H
- [x] Articles of Incorporation
- [ ] Cost estimates from proposed vendor if request is for capital expense
- [ ] Signed lease if rent costs are being requested
- [x] IRS Form W9
- [ ] Evaluation forms if used in the proposed program
- [ ] Annual audit (if required by organization)
- [ ] Faith Based Organization Certification Form, if required
- [x] Staff including the 3 highest paid staff

For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.

Source:	Louisville Forward for LIBA West	Amount: ($)	$3000
Source:		Amount: ($)	
Source:		Amount: ($)	

Has the applicant contacted the BBB Charity Review for participation? [ ] Yes [x] No

Has the applicant met the BBB Charity Review Standards? [ ] Yes [x] No

Applicant's Initials JBR

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

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

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

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

Applicant's Initials

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 – PROGRAM/PROJECT NARRATIVE
A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.): The Louisville Independent Business Alliance will host the Eighth Annual Buy Local Fair Sunday, May 22, 2016, from 12n-6pm. Printout of current website is attached. The Fair will host a variety of local businesses, musicians, artist and craftsmen, chefs, community organizers, and farmers. The Fair connects customers of local businesses, music fans, foodies, local agriculture supporters and local arts patrons in celebration of Louisville's vast selection of unique offerings. The Buy Local Fair Mission: To provide a venue that fosters cooperation, cross-pollination and strength in numbers for locally-owned, independent entities. By bringing together customers of various businesses, farms, craftspeople and bands unique to the Louisville-area, we expose a variety of endeavors to new audiences and increase business for all. This event is open and free to the public ($5 parking charge per carload, bicycles park at no charge). The 2015 Buy Local Fair attracted 6,000+ attendees from across the Louisville Metro area. Vendor participation was significant at 150+, and most council districts were represented. LIBA has members in 100% of all council districts, and all are invited to participate and benefit from the exposure at the event.
B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s): NDF funds will be spent on various expenses, budget attached. This includes renting various equipment for a smooth, safe event: walkie talkies, tables, staging & lighting, trash/recycling, portable bathrooms. Tshirts, soft drinks and ice for our volunteers, printing our vendor maps and signage, city licensing and permits, bike parking equipment, advertising, having security and an ambulance/EMTs on standby are also part of a successful event.

Applicant's Initials

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Funds raised from this event will continue LIBA's "keep Louisville weird" and "Buy Local First" education efforts. We currently have a record number of members – over 800 – and have focused the public's attention on the benefits of buying locally through our major events and campaigns, including the release of the Indie Impact Study, showing the positive financial impact (specific to the Louisville area) of buying locally. This study showed that for every $100 spent at a Louisville-area independent business, $55 remains in the local economy, whereas only $14 remains when spent at a chain.

Funds raised will also be used for such efforts as materials for our member businesses, community outreach that educates the public about the benefits of buying locally, support for our member businesses, etc.

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

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

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

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

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

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

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

Permits: Master Temporary, Vending, Tent ($2,500), Portolets and Wash stations ($1,00(

Applicant's Initials JBR

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

The Fair will lead to a shift towards spending at locally-owned businesses, which will benefit our local economy. A 2012 study funded by LIBA focused on the economic impact of Louisville-area retailers and restaurants. The results show that for every $100 spent at a locally-owned, independent business, $55 is reinvested locally, whereas only $14 is reinvested when that same money is spent at a national chain. The additional amount that would stay in the Louisville economy if citizens made just a 10% shift from chains to independents would be $416 million.

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

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

F: Briefly describe any existing collaborative relationships the organization has with other community organizations. Describe what those partners are bringing to the relationship in general and to this program/project specifically.

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

We had over 175 vendors last year and will likely have more in 2016. We make sure participation is attainable for even the smallest of businesses – LIBA members and farmers participate at no charge and non-members are only charged a $50 fee. (Everyone who will be selling items will pay $20 to cover the city's Master Vendor permits.) And of course, we have had wonderful support from Metro Council in the past. We will continue to spotlight the Council Members who support the event with signage recognition, banners and booth space (optional to staff).

Besides those listed above, LIBA also partners with other area organizations throughout the year, including Louisville Forward, the Center for Neighborhoods, many area business organizations, the Family Business Center, Louisville Originals, University of Louisville and others.

Applicant's Initials

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 – PROGRAM/PROJECT BUDGET SUMMARY

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

Program/Project Expenses	Column 1 Proposed Metro Funds	Column 2 Non-Metro Funds	Column (1+2)=3 Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (Attach Detailed List)			
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (Attach Detail List)	$10,800	$20,920	$31,720
J: Small Equipment			
K: Capital Equipment			
L: Other Expenses (Attach Detail List)			
****TOTAL PROGRAM/PROJECT FUNDS***	$10,800	$20,920	$31,720
% of Program Budget	33 %	67 %	**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)	$7000 (sponsors)
Fees Collected from Program Participants	$5000 (parking)
Other (please specify)	$18,550 (concessions, merch, vendor fees, etc.)
Total Revenue for Columns 2 Expenses **	$30,550

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

***Must equal or exceed total in column 2.*

Applicant's Initials

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Volunteers: 52	$3800	12 committee members plus 40 day of volunteers @ 8 hours each
Advertising (LEO, LPM, Louisville	$6000	Market Rate
Venue Rental	$2400	Market Rate
Competition Food	$100	Market Rate
Total Value of In-Kind (***to match Program Budget Line Item.*** Volunteer Contribution &Other In Kind)	$12,300	

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

Agency Fiscal Year Start Date: January 1

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

If YES, please explain:

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

Applicant's Initials

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – CERTIFICATIONS & ASSURANCES

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

Standard Assurances

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

Standard Certifications

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

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

SECTION 7 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:	[signature]			**Date:**	3/7/16
Legal Signatory: (please print):	Jennifer Rubenstein			**Title:**	Director
Phone: 502-500-4669	**Extension:**			**Email:**	jennifer@keeplouisvilleweird.com

Applicant's Initials [initials]

BUY LOCAL BUDGET		
Sunday, May 22, 2016		
INCOME		
Parking	$ 5,000.00	
Sponsors & Premium Booths	$ 7,000.00	
Beer & Bourbon Tickets	$ 10,000.00	
Merchandise Sales	$ 1,250.00	
Vendor Booth Fees	$ 5,500.00	
Silent Auction	$ 1,800.00	
NDF Council Grant	$ 11,000.00	
Total	**$ 41,550.00**	
EXPENSES	**LIBA**	**Proposed for NDF Funds**
Advertising: LPM radio underwriting		$ 500.00
Advertising: Mailing Posters		$ 400.00
Advertising: Posters		$ 300.00
Advertising: Designer Fee		$ 250.00
Bands	$ 500.00	
Beer	$ 4,300.00	
Bike Valet		$ 250.00
Bourbon	$ 500.00	
Ice		$ 100.00
Insurance	$ 2,500.00	
Liquor License & Bkgrd check	$ 400.00	
Media Library		$ 150.00
Parking/Valet Services		$ 400.00
Permits: Master Temporary, Vending, Tent		$ 2,500.00
Portolets and Wash stations	$ 400.00	$ 1,000.00
Printing		$ 400.00
Rentals		$ 500.00
Security	$ 100.00	
Soft Drinks	$ 100.00	
Souvenir Mugs	$ 2,100.00	
Kids Area Tent & Materials	$ 120.00	
Staff Time (LIBA)	$ 8,500.00	
Stage & Sound		$ 2,200.00
Supplies	$ 600.00	
Trash & Recycle		$ 350.00
Tshirts (for sale)	$ 700.00	
Tshirts (volunteers)		$ 400.00
Venue: Louisville Water Co.		$ -
Walkie Talkies		$ 500.00
Wristbands: Alcohlic Beverages	$ 100.00	
Yellow Ambulance		$ 600.00
Total	**$ 20,920.00**	**$ 10,800.00**
Total Expenses	**$ 31,720.00**	
Total Net Profit	**$ 9,830.00**	

Website Printout

restaurant new

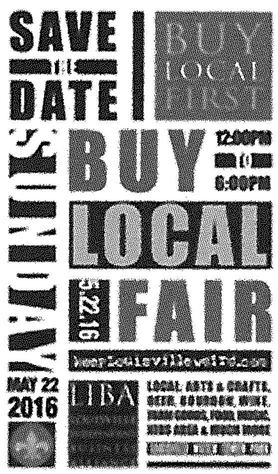
stein... Hourly Weather Forec... Welcome to Facebook... -Help Animals- and -P... My Day | Weig

LOUISVILLE INDEPENDENT BUSINESS ALLIANCE
BUY LOCAL

LOGIN

Welcome · About LIBA · Become a Member · Find a Member · Events · Merchandise

Welcome > Events > Buy Local Fair



2016 Buy Local Fair

Booth Applications Are Open

LIBA Members Only At This Point

Click HERE to sign up! And HERE to become a member.

Interested in sponsoring? Skip signing up for a booth and click here for information, or email jennifer@keeplouisvilleweird.com.

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

DEPARTMENT OF THE TREASURY

Date: OCT 07 2009

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

Employer Identification Number:
[redacted]
DLN:
309173012
Contact Person:
SUSAN Y MALONEY ID# 31210
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Form 990 Required:
Yes
Effective Date of Exemption:
March 19, 2008
Contribution Deductibility:
No

Dear Applicant:

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

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

Sincerely,

Robert Choi
Director, Exempt Organizations
Rulings and Agreements

Enclosure: Publication 4221-NC

10:36 AM

11/19/15

Accrual Basis

Louisville Independent Business Alliance
Profit & Loss Budget Overview
January through December 2016

Projected

		Jan - Dec 16
Ordinary Income/Expense		
Income		
Direct Public Grants		
Metro Council Overall NDF Funds	25,000.00	
Total Direct Public Grants		25,000.00
Merchandise Income		2,000.00
Program Income		
Business Membership Dues	65,000.00	
Directory	56,000.00	
Individual Membership Dues	1,000.00	
Profiles	0.00	
Program Service Fees	2,500.00	
South Louisville Efforts	1,000.00	
Supporter Status	1,000.00	
Total Program Income		126,500.00
Special Events Income		
Brewfest	85,000.00	
Buy Local Fair	45,000.00	
Forecastle Beer Tents	3,000.00	
hoLOUdays Contest	1,500.00	
Louisville Local Business Expo	4,000.00	
Total Special Events Income		138,500.00
Total Income		292,000.00
Expense		
Contract Services		
Accounting Fees	400.00	
Graphic Design	3,000.00	
Total Contract Services		3,400.00
Credit Card Fees		
Fees from credit card companies	2,000.00	
PayPal Fees	100.00	
Streamline Pmt Merchant Svc Fee	300.00	
Total Credit Card Fees		2,400.00
Events		
Brewfest Expenses	75,000.00	
Buy Local First Fair	25,000.00	
Independents Week	500.00	
Louisville Local Business Expo	1,000.00	
Shift Your Shopping Expenses	2,000.00	
Total Events		103,500.00

Louisville Independent Business Alliance
Profit & Loss Budget Overview
January through December 2016

	Jan - Dec 16
Facilities and Equipment	
Fixtures and Office Environment	1,000.00
Office Cleaning	625.00
Rent and Electricity	12,000.00
Total Facilities and Equipment	13,625.00
Merchandise Expense	
Sales And Use Tax	500.00
Merchandise Expense - Other	1,000.00
Total Merchandise Expense	1,500.00
Operations	
Bank Fees	
ACH Activity Fee	180.00
Bank Fees - Other	540.00
Total Bank Fees	720.00
Business Registration Fees	15.00
Email Distribution Service	720.00
Internet Service	444.00
Postage, Mailing Service	1,400.00
Printing and Copying	1,500.00
Software	2,200.00
Supplies	1,200.00
Telephone, Telecommunications	700.00
Website Domain Names	300.00
Total Operations	9,199.00
Other Types of Expenses	
Advertising Expenses	
Membership Recruitment	300.00
Profile portraits and interview	0.00
Advertising Expenses - Other	0.00
Total Advertising Expenses	300.00
Insurance - Liability, D and O	2,500.00
Membership Materials	
Member Lou Mag Subscriptions	3,900.00
Membership Materials - Other	5,000.00
Total Membership Materials	8,900.00
Memberships and Dues	800.00
Research and Studies	100.00
Staff/Board Development	5,500.00
Total Other Types of Expenses	18,100.00
Outreach & Sponsorships	2,000.00

10:36 AM
11/19/15
Accrual Basis

Louisville Independent Business Alliance
Profit & Loss Budget Overview
January through December 2016

	Jan - Dec 16	
Payroll Expenses		
Bonuses	1,500.00	
Salary	63,900.00	
Taxes	24,504.00	
Total Payroll Expenses		89,904.00
Program Expenses		
Directory	33,000.00	
Monthly Meetings	2,500.00	
South Louisville Programs	500.00	
West Louisville Efforts	500.00	
Total Program Expenses		36,500.00
Travel and Meetings		
AMIBA Conference	0.00	
Conference, Convention, Meeting	100.00	
Mileage	200.00	
Total Travel and Meetings		300.00
Volunteers Orientation		500.00
Total Expense		280,928.00
Net Ordinary Income		11,072.00
Net Income		**11,072.00**

2016 LIBA Board List

(Term limits are 3 years.)

Summer Auerbach
Rainbow Blossom
3738 Lexington Road, Louisville, KY 40207
(502) 498-2351
[redacted]
Summer@rainbowblossom.com
Current term ends: January 2019

Carol Besse
Carmichael's Bookstores
2720 Frankfort Avenue, Louisville, KY 40206
(502) 896-6950
[redacted]
Current term ends: January 2018

Robert W. DeWees III
McClain DeWees, PLLC
6008 Brownsboro Park Boulevard, Suite H
Louisville, KY 40207
(502) 749-2388
[redacted]
rdewees@mcclaindewees.com
Current term ends: January 2019

Ali Hawthorne
M2 Maximum Media
105 Iola Road, Louisville, KY 40207
[redacted]
Ali@m2maxmedia.com
Current term ends: January 2017

Lauren Hendricks
Alexander + Hughes Adv. & Marketing
414 Baxter Ave., Suite 215,
Louisville, KY 40204
(502) 403-8819
cell (502) 744-7679
lauren@ahadvertising.com
Current term ends: January 2019

Emily McCay
The Diaper Fairy Cottage
1811 Bardstown Rd., Louisville, KY 40205
(502) 708-1018
[redacted]
diaperfairyinfo@gmail.com
Current term ends: January 2018

Lance Minnis
Commonwealth Financial Advisors
9403 Mill Brook Rd, Ste 100, Louisville, KY 40223
(502) 423-7420
[redacted]
lance@cfaky.com
Current term ends: January 2018

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

Patrick T. Schmidt
Tilford Dobbins & Schmidt PLLC
401 W. Main Street, Suite 1400
Louisville, KY 40202
(502) 584-1000 office
(502) 584-2318 fax
pschmidt@tilfordlaw.com
Current term ends: January 2019

Tori Thompson
Kertis Creative
786 S. Shelby Street, Louisville, KY 40203
(502) 550-1549
[redacted]
tori@kertiscreative.com
Current term ends: January 2018

Chris Vessels
Total Office Products & Service
3326 Kramers Lane, Louisville, KY 40216
(502) 636-9278
[redacted]
chris@totalops.com
Current term ends: January 2017

LIBA Staff

Jennifer Rubenstein
Cell (502) 500-4669
jennifer@keeplouisvilleweird.com

Kristen Byrnes
Cell (704) 780-9787
kristen@keeplouisvilleweird.com

Leslie Spanyer
Cell (502) 379-2473
leslie@keeplouisvilleweird.com

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03/01/16
Accrual Basis

Louisville Independent Business Alliance
Profit & Loss
March 2015 through February 2016

		Mar '15 - Feb 16
Ordinary Income/Expense		
Income		
Merchandise Income		2,820.64
Other Types of Income		
Miscellaneous Revenue	100.00	
Total Other Types of Income		100.00
Program Income		
Business Membership Dues	77,357.55	
Directory	43,040.92	
Individual Membership Dues	120.00	
Program Fees	1,005.72	
South Louisville Efforts	400.00	
Supporter Status	975.00	
West Louisville Efforts	2,975.00	
Program Income - Other	52.00	
Total Program Income		125,926.19
Special Events Income		
Brewfest	95,079.42	
Buy Local Fair	46,850.11	
Forecastle Beer Tents	6,340.22	
hoLOUdays Contest	1,494.70	
Louisville Local Business Expo	6,890.00	
Weird Birthday Bash	4,813.63	
Total Special Events Income		161,468.08
Total Income		290,314.91
Expense		
Contract Services		
Accounting Fees	400.00	
Outside Contract Services	916.50	
Total Contract Services		1,316.50
Credit Card Fees		
Fees from credit card companies	2,123.54	
Merchant Service Fee	752.15	
PayPal Fees	124.48	
Total Credit Card Fees		3,000.17
Events		
Brewfest Expenses	79,583.41	
Buy Local First Fair	26,734.12	
hoLOUdays Expenses	3,415.88	
Louisville Local Business Expo	2,102.52	
Weird Birthday Bash	-264.02	
Events - Other	112.31	
Total Events		111,684.22
Facilities and Equipment		
Office Cleaning	505.00	
Rent and Electricity	11,529.80	
Facilities and Equipment - Other	742.19	
Total Facilities and Equipment		12,776.99
Merchandise Expense		
Sales And Use Tax	334.56	
Merchandise Expense - Other	2,131.90	
Total Merchandise Expense		2,466.46

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03/01/16

Accrual Basis

Louisville Independent Business Alliance
Profit & Loss
March 2015 through February 2016

			Mar '15 - Feb 16
Operations			
Bank Fees			
ACH Activity Fee	424.00		
Bank Fees - Other	776.80		
Total Bank Fees		1,200.80	
Books, Subscriptions, Reference		187.62	
Business Registration Fees		15.00	
Email Distribution Service		810.00	
Internet Service		405.77	
Postage, Mailing Service		1,615.96	
Printing and Copying		610.26	
Software		2,160.00	
Supplies		1,503.33	
Telephone, Telecommunications		653.80	
Website Domain Names		45.51	
Total Operations			9,208.05
Other Types of Expenses			
Advertising Expenses			
AAF Ad Campaign	8,041.34		
Profile portraits and interview	240.00		
Advertising Expenses - Other	126.28		
Total Advertising Expenses		8,407.62	
Insurance - Liability, D and O		2,424.68	
Membership Materials			
Member Lou Mag Subscriptions	1,827.50		
Membership Materials - Other	1,562.27		
Total Membership Materials		3,389.77	
Memberships and Dues		670.00	
Research and Studies		100.00	
Staff/Board Development		5,710.40	
Total Other Types of Expenses			20,702.47
Outreach & Sponsorships			1,895.09
Payroll Expenses			
Payroll Processing Fees		131.00	
Salary		62,745.25	
Taxes		24,379.33	
Total Payroll Expenses			87,255.58
Program Expenses			
Directory		35,747.29	
Monthly Meetings		2,853.15	
South Louisville Programs		1,466.89	
West Louisville Efforts		4.49	
Total Program Expenses			40,071.82
Travel and Meetings			
Conference, Convention, Meeting		22.25	
Mileage		414.21	
Travel and Meetings - Other		20.00	
Total Travel and Meetings			456.46
Volunteers Orientation			379.46
Total Expense			291,213.27
Net Ordinary Income			-898.36
Net Income			**-898.36**

***** THIS IS NOT A FILEABLE COPY *****

Form **8879-EO**

Department of the Treasury
Internal Revenue Service

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2014, or fiscal year beginning ____________, 2014, and ending ____________, 20__

▶ **Do not send to the IRS. Keep for your records.**

▶ **Information about Form 8879-EO and its instructions is at** *www.irs.gov/form8879eo.*

OMB No. 1545-1878

2014

Name of exempt organization

Louisville Independent Business
Alliance, Inc

Employer identification number

[redacted]

Name and title of officer

Jennifer Rubenstein
Director

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a,** or **5a,** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b,** or **5b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ▶ [X]	**b** **Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	**1b**	249,128.
2a Form 990-EZ check here ▶ [ ]	**b** **Total revenue,** if any (Form 990-EZ, line 9)	**2b**	
3a Form 1120-POL check here ▶ [ ]	**b** **Total tax** (Form 1120-POL, line 22)	**3b**	
4a Form 990-PF check here ▶ [ ]	**b** **Tax based on investment income** (Form 990-PF, Part VI, line 5)	**4b**	
5a Form 8868 check here ▶ [ ]	**b** **Balance Due** (Form 8868, Part I, line 3c or Part II, line 8c)	**5b**	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2014 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

[X] I authorize Meyerowitz & King, PLLC to enter my PIN [redacted]

ERO firm name — **Enter five numbers, but do not enter all zeros**

as my signature on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ ***** THIS IS NOT A FILEABLE COPY *** Date ▶

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. [redacted]

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature ▶ Date ▶

ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So

Extended to August 17, 2015

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning and ending

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending

C Name of organization
Louisville Independent Business Alliance, Inc

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
PO Box 4759

City or town, state or province, country, and ZIP or foreign postal code
Louisville, KY 40204

F Name and address of principal officer: Jennifer Rubenstein
PO Box 4759, Louisville, KY 40207

D Employer identification number
[redacted]

E Telephone number
502-500-4667

G Gross receipts $ 249,128.

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☐ 501(c)(3) ☒ 501(c) (6) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www.keeplouisvilleweird.com

K Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other ▶

L Year of formation:

M State of legal domicile: KY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: Informing citizens of the value provided by locally owned businesses.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	0
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	600
5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	1
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	52,538.	60,657.
	9	Program service revenue (Part VIII, line 2g)	158,287.	188,471.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	210,825.	249,128.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	49,703.	42,223.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	175,887.	209,313.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	225,590.	251,536.
	19	Revenue less expenses. Subtract line 18 from line 12	-14,765.	-2,408.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	8,594.	6,186.
	21	Total liabilities (Part X, line 26)	0.	0.
	22	Net assets or fund balances. Subtract line 21 from line 20	8,594.	6,186.

Part II Signature Block

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

Sign Here

▶ Signature of officer | Date

▶ Jennifer Rubenstein, Director
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Meyerowitz & King, PLLC				[redacted]

Firm's name ▶ Meyerowitz & King, PLLC | Firm's EIN ▶ [redacted]

Firm's address ▶ 9710 Park Plaza Ave., Ste. 208
Louisville, KY 40241 | Phone no. (502) 587-9833

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

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission: None

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ including grants of $) (Revenue $)

Informing citizens of the value provided by locally owned businesses.

4b (Code:) (Expenses $ including grants of $) (Revenue $)

Offering group branding, promotion, and advertising to LIBA members.

4c (Code:) (Expenses $ including grants of $) (Revenue $)

Creating strong relationships with local government and media.

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

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

4e Total program service expenses ▶

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		X
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did 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*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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 domestic 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 or for domestic individuals 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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	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
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *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		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		X
b	If "Yes," enter the name of the foreign country: ▶					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI Governance, Management, and Disclosure *For each "Yes" response to lines 2 through 7b* [redacted] *response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI ..... [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	0		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	600		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ KY

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[ ] Own website [ ] Another's website [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, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

Jennifer Rubenstein - 502-500-4669
PO Box 4759, Louisville, KY 40204

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Summer Auerbach President	10.00			X				0.	0.	0.
(2) Ashley Parker Vice President	10.00			X				0.	0.	0.
(3) Carol Besse Secretary	10.00			X				0.	0.	0.
(4) Toph Bryant Treasurer	10.00			X				0.	0.	0.

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

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

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

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

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

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

Section	Line	Description			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b	60,657.				
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a-1f: $						
	h	**Total.** Add lines 1a-1f ▶			60,657.			
Program Service Revenue				Business Code				
	2 a	Program Service Revenu			150,481.	150,481.		
	b	Directory			37,990.	37,990.		
	c							
	d							
	e							
	f	All other program service revenue						
	g	**Total.** Add lines 2a-2f ▶			188,471.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶						
	4	Income from investment of tax-exempt bond proceeds ▶						
	5	Royalties ▶						
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss) ▶						
			(i) Securities	(ii) Other				
	7 a	Gross amount from sales of assets other than inventory						
	b	Less: cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss) ▶						
	8 a	Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18	a					
	b	Less: direct expenses	b					
	c	Net income or (loss) from fundraising events ▶						
	9 a	Gross income from gaming activities. See Part IV, line 19	a					
	b	Less: direct expenses	b					
	c	Net income or (loss) from gaming activities ▶						
	10 a	Gross sales of inventory, less returns and allowances	a					
	b	Less: cost of goods sold	b					
	c	Net income or (loss) from sales of inventory ▶						
		Miscellaneous Revenue		Business Code				
	11 a							
	b							
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a-11d ▶						
	12	**Total revenue.** See instructions. ▶			249,128.	188,471.	0.	0.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	29,556.	29,556.		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	12,667.	12,667.		
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	1,561.	1,561.		
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	163,773.	163,773.		
12 Advertising and promotion	8,999.	8,999.		
13 Office expenses	7,576.	7,576.		
14 Information technology				
15 Royalties				
16 Occupancy	10,962.	10,962.		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,846.	1,846.		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Miscellaneous	11,363.	11,363.		
b Bank Fees	3,233.	3,233.		
c				
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	251,536.	251,536.	0.	0.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ [ ] if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	8,594.	2	6,186.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a			
	b	Less: accumulated depreciation — 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	8,594.	16	6,186.
Liabilities	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	0.	26	0.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds	0.	30	0.
	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
	32	Retained earnings, endowment, accumulated income, or other funds	8,594.	32	6,186.
	33	Total net assets or fund balances	8,594.	33	6,186.
	34	Total liabilities and net assets/fund balances	8,594.	34	6,186.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	249,128.
2	Total expenses (must equal Part IX, column (A), line 25)	2	251,536.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,408.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,594.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,186.

Part XII Financial Statements and Reporting

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

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047
2014
Open to Public Inspection

Name of the organization	Employer identification number
Louisville Independent Business Alliance, Inc	[redacted]

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

Information is provided at annual meetings.

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

Information provided at annual meetings.

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

Contract Services:

Program service expenses	31,680.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	31,680.

Program Expenses:

Program service expenses	132,093.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	132,093.
Total Other Fees on Form 990, Part IX, line 11g, Col A	163,773.

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Trey Grayson
Secretary of State
Received and Filed
03/19/2008 3:07:04 PM
Fee Receipt: $8.00

ARTICLES OF INCORPORATION OF LOUISVILLE INDEPENDENT BUSINESS ALLIANCE, INC.

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

ARTICLE I
NAME

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

ARTICLE II
PURPOSES AND POWERS

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

ARTICLE III
MEMBERS

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

ARTICLE IV
DIRECTORS

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

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

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

ARTICLE X
LIMITATION OF DIRECTOR LIABILITY

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

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

ARTICLE XI
LIMITATION ON DISTRIBUTIONS

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

ARTICLE XII
DISSOLUTION

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

ARTICLE XIII
DURATION

The Corporation shall have a perpetual existence.

ARTICLE XIV
AMENDMENT

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

ARTICLE XV
INCORPORATOR

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

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

John D. Timmons, Incorporator

THE FOREGOING ARTICLES OF
INCORPORATION PREPARED BY:

LAKIN LAW OFFICE

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

EXHIBIT A

NAMES AND MAILING ADDRESS OF INITIAL DIRECTORS

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

Form **W-9**
(Rev. December 2011)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
Louisville Independent Business Alliance

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:
☐ Individual/sole proprietor ☑ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Exempt payee

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶

☐ Other (see instructions) ▶

Address (number, street, and apt. or suite no.)
1974-A Douglass Boulevard, Suite 101

Requester's name and address (optional)

City, state, and ZIP code
Louisville, KY 40205

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

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

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

Social security number
☐☐☐ - ☐☐ - ☐☐☐☐

Employer identification number
[redacted]

Part II Certification

Under penalties of perjury, I certify that:

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

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

Sign Here Signature of U.S. person ▶ Date ▶ 2-28-16

General Instructions

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

Purpose of Form

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

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

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

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

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

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

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

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

LIBA Staff 2016:

Jennifer Rubenstein
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jennifer@keeplouisvilleweird.com
Pay: $22.31/hour, 30 hours/week

Kristen Byrnes
Cell (704) 780-9787
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Leslie Spanyer
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Pay: $13/hour, 25 hours/week

LOUISVILLE INDEPENDENT BUSINESS ALLIANCE, INC.

General Information

Organization Number	0688397
Name	LOUISVILLE INDEPENDENT BUSINESS ALLIANCE, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	3/19/2008
Organization Date	3/19/2008
Last Annual Report	4/23/2015
Principal Office	1974-A DOUGLASS BOULEVARD, SUITE 1 LOUISVILLE, KY 40205
Registered Agent	SUMMER AUERBACH 3738 LEXINGTON RD. LOUISVILLE, KY 40207

Current Officers

President	Summer Auerbach
Vice President	Ashley Parker
Secretary	John Timmons
Treasurer	Toph Bryant
Director	Carol Besse
Director	Ali Hawthorne
Director	Jennifer Beaird Rubenstein
Director	Chris Vessels
Director	Lance Minnis
Director	Mo McKnight Howe
Director	Emily McCay
Director	Tori Thompson

Individuals / Entities listed at time of formation

Director	JOHN D TIMMONS
Director	MIKE MAYS
Director	CAROL BESSE
Director	REBECCA CORNWELL
Director	DON BURCH
Director	SUMMER AUERBACH
Director	SCOTT ROUSSELL
Incorporator	JOHN D TIMMONS

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	4/23/2015	1 page	PDF	
Annual Report	2/6/2014	1 page	PDF	
Principal Office Address Change	4/30/2013 2:30:45 PM	1 page	PDF	
Annual Report Amendment	4/30/2013	1 page	PDF	
Annual Report	1/14/2013	1 page	PDF	
Registered Agent name/address change	2/17/2012 5:54:54 PM	1 page	PDF	
Principal Office Address Change	2/17/2012 5:49:18 PM	1 page	PDF	
Annual Report	2/17/2012	1 page	PDF	
Annual Report	2/21/2011	1 page	PDF	
Principal Office Address Change	8/10/2010 12:52:44 PM	1 page	PDF	
Registered Agent name/address change	8/10/2010 12:44:35 PM	1 page	PDF	
Annual Report	5/13/2010	1 page	PDF	
Annual Report	9/29/2009	1 page	PDF	
Articles of Incorporation	3/19/2008	6 pages	tiff	PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	4/23/2015 3:14:20 PM	4/23/2015 3:14:20 PM	
Annual report	2/6/2014 4:59:46 PM	2/6/2014 4:59:46 PM	
Amendment to annual report	4/30/2013 2:47:34 PM	4/30/2013 2:47:34 PM	
Principal office change	4/30/2013 2:30:45 PM	4/30/2013 2:30:45 PM	
Annual report	1/14/2013 2:54:02 PM	1/14/2013 2:54:02 PM	
Annual report	2/17/2012 5:58:16 PM	2/17/2012 5:58:16 PM	
Registered agent address change	2/17/2012 5:54:54 PM	2/17/2012 5:54:54 PM	
Principal office change	2/17/2012 5:49:18 PM	2/17/2012 5:49:18 PM	
Annual report	2/21/2011 2:52:54 PM	2/21/2011 2:52:54 PM	
Principal office change	8/10/2010 12:52:44 PM	8/10/2010 12:52:44 PM	
Registered agent address change	8/10/2010 12:44:35 PM	8/10/2010 12:44:35 PM	
Annual report	5/13/2010	5/13/2010	

	3:06:43 PM	3:06:43 PM
Annual report	9/29/2009 4:13:22 PM	9/29/2009 4:13:22 PM
Add	3/19/2008 3:07:04 PM	3/19/2008

Microfilmed Images

Louisville Metro Council

David W. Tandy
District 4 Councilman

Keidra D.C. King
Legislative Aide

April 4, 2016

Metro Council Clerk:

I have given my aide Keidra King permission to sign for me regarding the following Neighborhood Development Funds: Heusering Institute and the Independent Business Alliance.

Please contact my office if you have further question.

With warmest regards, I am…

Very truly yours,

David W. Tandy
Fourth District Councilman

www.louisvilleky.gov

(502) 574-1104 • 601 WEST JEFFERSON STREET LOUISVILLE, KENTUCKY 40202