

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

**Applicant/Program:** Highland Park Community Development Corporation

**Executive Summary of Request:**

Funding of a summer program providing educational and community outreach services addressing the needs of the youth in district 1 with emphasis on the Cane Run/ Shagbark neighborhood . The program consist of 3 levels , level 1 H.E.L.P ( Highland Park Educational Leadership Program) for youth K-5th grade strengthening their academic abilities especially in math and reading skills , level 2 S.W.A.G ( Students with Awesome Grades ) for youth 6th - 12th grade to help develop skills that lead to a career path ,level 3 B.O.Ys ( Be Only You ) is a mentoring program for males 5-18 years of age that will extend into the coming school year .

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.

D1

District #



Council Member Signature

\$4,900.00

Amount

5/31/2016

Date

**Primary Sponsor Disclosure**

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

**Approved by:**

\_\_\_\_\_  
Appropriations Committee Chairman

\_\_\_\_\_  
Date

**Clerk's Office Only:**


Request Amount: \_\_\_\_\_ Committee Amended Appropriation: \_\_\_\_\_

Original Appropriation: \_\_\_\_\_ Council Amended Appropriation: \_\_\_\_\_

# LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION CHECKLIST

**Legal Name of Applicant Organization:** Highland Park Community Development Corporation

**Program Name and Request Amount:** Highland Park Community Development Corporation \$4,900.00

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	<input checked="" type="checkbox"/> Yes
Is the funding proposed by Council Member(s) less than or equal to the request amount?	<input checked="" type="checkbox"/> Yes
Is the proposed public purpose of the program viable and well-documented?	<input checked="" type="checkbox"/> Yes
Will all of the funding go to programs specific to Louisville/Jefferson County?	<input checked="" type="checkbox"/> Yes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	<input checked="" type="checkbox"/> Yes
Has prior Metro Funds committed/granted been disclosed?	<input checked="" type="checkbox"/> Yes
Is the application properly signed and dated by authorized signatory?	<input checked="" type="checkbox"/> Yes
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	<input checked="" type="checkbox"/> 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?	<input type="checkbox"/> N/A
Is the entity in good standing with: <ul style="list-style-type: none"> <li>• Kentucky Secretary of State?</li> <li>• Louisville Metro Revenue Commission?</li> <li>• Louisville Metro Government?</li> <li>• Internal Revenue Service?</li> <li>• Louisville Metro Human Relations Commission?</li> </ul>	<input checked="" type="checkbox"/> Yes
Is the current Fiscal Year Budget included?	<input checked="" type="checkbox"/> Yes
Is the entity's board member list (with term length/term limits) included?	<input checked="" type="checkbox"/> Yes
Is recommended funding less than 33% of total agency operating budget?	<input checked="" type="checkbox"/> Yes
Does the application budget reflect only the revenue and expenses of the project/program?	<input checked="" type="checkbox"/> Yes
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	<input type="checkbox"/> N/A
Is the most recent annual audit (if required by organization) included?	<input checked="" type="checkbox"/> Yes
Is a copy of Signed Lease (if rent costs are requested) included?	<input type="checkbox"/> N/A
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	<input type="checkbox"/> N/A
Are the Articles of Incorporation of the Agency included?	<input checked="" type="checkbox"/> Yes
Is the IRS Form W-9 included?	<input checked="" type="checkbox"/> Yes
Is the IRS Form 990 included?	<input checked="" type="checkbox"/> Yes
Are the evaluation forms (if program participants are given evaluation forms) included?	<input checked="" type="checkbox"/> Yes
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	<input checked="" type="checkbox"/> Yes
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	<input type="checkbox"/> N/A
Prepared by: 	Date: 5/31/2016



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
<b>Legal Name of Applicant Organization:</b> Highland Park Community Development Corporation <small>(as listed on: <a href="http://www.sos.ky.gov/business/records">http://www.sos.ky.gov/business/records</a>)</small>			
<b>Main Office Street &amp; Mailing Address:</b> 3500 Shanks Lane, Louisville, Kentucky 40216			
<b>Website:</b>			
<b>Applicant Contact:</b>	Sandra Miller	<b>Title:</b>	Ex. Director
<b>Phone:</b>	(502) 775-9584	<b>Email:</b>	sandra1m1961@hotmail.com
<b>Financial Contact:</b>	Terry Watkins	<b>Title:</b>	Treasurer
<b>Phone:</b>	(502) 447-7875	<b>Email:</b>	
<b>Organization's Representative who attended NDF Training:</b> Sandra Miller			
<b>GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED</b>			
<b>Program Facility Location(s):</b>	3500 Shanks Lane & 3700 Shanks Lane, Louisville, Kentucky 40216		
<b>Council District(s):</b>	1	<b>Zip Code(s):</b>	40216
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
<b>PROGRAM/PROJECT NAME:</b> Summer Leadership Camp 2016			
<b>Total Request: (\$)</b>	4,900.00	<b>Total Metro Award (this program) in previous year: (\$)</b>	2,000.00
<b>Purpose of Request (check all that apply):</b> <input checked="" type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
<b>The Following are Required Attachments:</b>			
<input type="checkbox"/> IRS Exempt Status Determination Letter <input type="checkbox"/> Current Year Projected Budget <input type="checkbox"/> List of Board of Directors (include term & term limits) <input type="checkbox"/> Current financial statement <input type="checkbox"/> Most recent IRS Form 990 or 1120-H <input type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense		<input type="checkbox"/> Signed lease if rent costs are being requested <input type="checkbox"/> IRS Form W9 <input type="checkbox"/> Evaluation forms if used in the proposed program <input type="checkbox"/> Annual audit (if required by organization) <input type="checkbox"/> Faith Based Organization Certification Form, if required <input type="checkbox"/> Staff including the 3 highest paid staff	
<b>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.</b>			
<b>Source:</b>	EAF	<b>Amount: (\$)</b>	\$2,000.00
<b>Source:</b>		<b>Amount: (\$)</b>	
<b>Source:</b>		<b>Amount: (\$)</b>	
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Has the applicant met the BBB Charity Review Standards? <input type="checkbox"/> Yes <input type="checkbox"/> No			



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 3 – AGENCY DETAILS

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

Our agency mission is to provide education and outreach to address the needs of youth adults including seniors in the metro Louisville community with special emphasis on the Cane Run/Shagbark community. A holistic approach will be used to develop and implement programs to address issues that disproportionately affect high-risk and disadvantaged populations within the community including youth development education, research and service.

This summer program directly aligns with our mission by providing education opportunities to the youth in our local community as well as citywide. This program is crucial during the summer because this is the time when most young people are most likely to forget what they had learned during the school year. Our staff, which will consist of 4 mentors/tutors, program coordinator and an activity coordinator, will work hands on with our Leaders five days a week, four hours a day for six weeks.

In order to continue developing strong, educated leaders after this summer program we will offer the youth, we call them leaders, opportunities to enroll in our other youth programs if they do not already participate in them. We have three youth programs; H. E. L. P. (Highland Park Educational Leadership Program), S. W. A. G. (Students With Awesome Grades) and All About B. O. Y. s (Be Only You).

H. E. L. P. is designed for leaders in grades K - 5. We work with these leaders on strengthening their academic abilities especially their reading and math skills. H. E. L. P. participants meet during the school year, four days a week in our after school program. We also begin to introduce our leaders in H. E. L. P. to various careers.

S. W. A. G. is for leaders in grades 6 - 12. We work with these leaders on strengthening their academic skills and help them to identify and develop a career path that they are interested in pursuing. All About B. O. Y. s is a mentoring program for males ages 5 - 18. We operate an after school where we encourage all of our leaders to participate in. Leaders in S. W. A. G and All About B. O. Y. s are encourage to participant in the after school program also.



## 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.):**

This summer Leadership Camp is designed to serve up to 40 youth in grades K - 9, however, we will not deny enrollment to youth in grades, 10 - 12. This six weeks program will run from June 14 - July 22, 2016. The Leadership Program will focus on developing strong leaders who are capable of reading and comprehending what they have read as well as performing math concepts on grade level. The theme for this year will be "We Fit In, We're Fit, So We Are D. A. B. B." This means they will be leaders who are Determined, Active, can Balance their daily activities and Believes in them self.

This summer session will help participants understand how important good nutrition and physical activities and reading and math are to one becoming a positive strong leader in our community. As incentives and rewards participants will go on field trips that are fun and others that will help strengthen their knowledge about being a positive leader in our community.

We will take these six weeks with our Leaders and set realistic goals that they can reach in this time period with reading, math, and physical activities. The goals that our Leaders set will be done prior to the start of the camp, with input from the youth, their parents and staff in the program.

The reading, math, and arts activities our Leaders will participate in will include components on how to live a good balance life. They will read literature, articles, and books on the importance of eating good healthy nutrition meals, and how to calculate more physical activities into their daily routine. Leaders will learn about calculating calories and how to read labels on food packaging. This will help them learn which foods are healthier for them to eat. Guest speakers will come and provide information and conduct hands on activities pertaining to healthy eating and activities.

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

The majority of these funds, \$4,050.00 will be used to pay for field trips, tee shirts, school supplies for the summer program. The schools supplies will be given to the leaders in the summer camp and also provide 100 other unprivileged youth in the community with back to school supplies. Eight Hundred and Fifty dollars will be used to pay for the agency annual insurance policy.

Item	Quantity	Cost Per Person	Total
Bowling	50	5	\$ 250.00
Walnut Street	50	5	\$ 250.00
Science Center	50	7	\$ 350.00
Movies	50	5	\$ 250.00
Farm	50	0	\$
School Supplies	140		\$ 2,500.00
Insurance			\$ 850.00
Tee Shirts	50	9	\$ 450.00
Total			\$ 4,900.00



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

These funds will not be used for fundraising purposes.

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

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

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

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

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

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



## LOUISVILLE 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:**

All Leaders will be given a pre and post assessment during the program. The pre-assessment will be used to identify areas in reading and math that our Leaders requires more help in and the post-assessment will gauge the progress Leaders have made on that particular subject and to see if progress was made on the standards they focused on during the program. The goal is for 35% of the students to show a 25% increase on their post assessment at the end of the program. The assessments will also cover information on leadership skills.

We will also like for 50% of our leaders to be at the program 75% of the time. Attendance will be taken and monitored daily. Leaders will sign-in and out each day as part of our attendance process. We will also keep daily attendance in Cascade, JCPS computer software. We would also like at least 50% of the Leaders to have reached 80% of their goals that they and their parents established at the beginning of the program. These are the outcomes we will strive to achieve during our Summer Leadership Camp. By implementing and accomplishing these activities we hope to fill part of our agency mission by educating the youth in our community and providing them with new skills that will help them become positive and successful leaders in our community.

**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.**

Currently our staff and volunteers participate in the monthly Everyone Reads meetings. These meeting provide information on new techniques to use with our Leaders in their academic studies and updated information from Jefferson County Public Schools. We also able to network with other non-profits and after school program providers. We also attend the BLOC (Metro Government, Metro United Way and Jefferson County Public School initiated) trainings. These training are designed to help youth worker strengthen their skills for working with today's youth. We have signed a MOU with the Grandparents program and will start having grandparents participate in our programs this summer. We share tutors with Southwest after school program. We also, participate in the Louisville Public Library summer bookmobile and reading program. By participating in this program we have a steady rotation of books for our Leaders to choice from during the summer.



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 5 – PROGRAM/PROJECT BUDGET SUMMARY

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

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies		500.00	500.00
D: Telephone			
E: In-town Travel		1,050.00	1,050.00
F: Client Assistance (Attach Detailed List)			
G: Professional Service Contracts		5,868.00	5,868.00
H: Program Materials			
I: Community Events & Festivals (Attach Detail List)			
J: Machinery & Equipment			
K: Capital Project			
L: Other Expenses (Attach Detail List)	4,900.00		4900.00
<b>*TOTAL PROGRAM/PROJECT FUNDS</b>	<b>4,900.00</b>	<b>7,418.00</b>	<b>12,318.00</b>
	.39779 %	.60228 %	100%

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

Other State, Federal or Local Government	
United Way	5500.00
Private Contributions (do not include individual donor names)	
Fees Collected from Program Participants	2,250.00
Other (please specify)	

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

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





## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Ex. Director	\$600.00	10 hours a week at the cost of \$100.00 per week.
2 Volunteers	\$435.00	2 volunteers serving lunch daily for one hour, five days per week at \$7.25
2 Volunteers	\$870.00	2 volunteer assist members for 2 hours each day at \$7.25 per hour for 5 days
1 Janitor	\$217.50	1 hour per day, 5 days a week at \$7.25 per hour
<i>Total Value of In-Kind</i> (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)	\$2122.50	

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

Agency Fiscal Year Start Date: January 1st

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:

N/A



## 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:	<i>Sandra Miller</i>	Date:	<i>May 25, 2016</i>
Legal Signatory: (please print):	Sandra Miller	Title:	Ex. Director
Phone:	(502) 449-3677	Extension:	
Email:	sandra1m1961@hotmail.com		

## 2016 Budget

<b>Total Annual Operation Expenses</b>	<b>\$ 68,921.65</b>
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# HIGHLAND PARK COMMUNITY DEVELOPMENT CORPORATION

## CURRENT BOARD MEMBER ROSTER

### **OFFICERS**

**President – Latascha Craig –** [REDACTED]  
[REDACTED]

Louisville, Kentucky 40216  
(1<sup>st</sup> Term)

**Vice President – Don Mack –** [REDACTED]  
[REDACTED]

Louisville, Kentucky 40216  
(1<sup>st</sup> Term)

**Treasurer – Terry Watkins –** [REDACTED]  
[REDACTED]

Louisville, Kentucky 40258  
(2<sup>nd</sup> Term)

### **Board of Directors**

**Pinenell Gradnigo**  
[REDACTED]

Louisville, KY 40229  
(1<sup>st</sup> Term)

**Anita Hines –** [REDACTED]  
[REDACTED]

Louisville, Kentucky 40216  
(1<sup>st</sup> Term)

**Rev. Byron Cox –** [REDACTED]  
[REDACTED]

Louisville, Kentucky 40291  
(2<sup>nd</sup> Term)

### **Executive Director**

**Sandra Miller –** [REDACTED]  
[REDACTED]

Louisville, Kentucky 40214

Per By-Law Article IV-Article - Board or Directors Section 3 – Term of Office

“The Directors shall serve for three-year terms or until their successors shall be elected. Directors may serve an unlimited number of terms. The initial board will serve on staggered terms as deemed by the Board of Directors.”



# Highland Park Community Development Corporation

*"Creating Leaders One By One"*

Latascha Craig  
President  
Don Mack  
Vice President  
Terry Watkins  
Treasurer  
Rev. Byron Cox  
Pinenell Grainings  
Anita Hines

April 28, 2016

The Highland Park Community Development Corporation currently has no permanent staff. We use contract staff and we will not have any more contract staff until our summer camp that starts in June.

Sincerely,

Sandra Miller,  
Ex. Director

# Business Checking

PNC Bank



For the Period 03/01/2016 to 03/31/2016

Primary Account Number: [REDACTED]

Page 1 of 2

Number of enclosures: 0

HIGHLAND PARK COMMUNITY DEVELOP  
3500 SHANKS LN  
LOUISVILLE KY 40216-3314

For 24-hour banking sign on to  
 PNC Bank Online Banking on pnc.com  
FREE Online Bill Pay

For customer service call 1-877-BUS-BNKG  
Monday - Friday: 7 AM - 10 PM ET  
Saturday & Sunday: 8 AM - 5 PM ET

Para servicio en español, 1-877-BUS-BNKG

**Moving?** Please contact your local branch

Write to: Customer Service  
PO Box 609  
Pittsburgh, PA 15230-9738  
 Visit us at PNC.com/mybusiness/  
 TDD terminal: 1-800-531-1648  
For hearing impaired clients only

Highland Park Community Develop

## Business Checking Summary

Account number: [REDACTED]

Overdraft Protection has not been established for this account.  
Please contact us if you would like to set up this service.

## Balance Summary

Beginning balance	Deposits and other additions	Checks and other deductions	Ending balance
4,786.49	.00	188.50	4,597.99
Average ledger balance	Average collected balance		
4,624.82	4,624.82		

## Deposits and Other Additions

Description	Items	Amount
Total	0	.00

## Checks and Other Deductions

Description	Items	Amount
Checks	2	188.50
Total	2	188.50

## Daily Balance

Date	Ledger balance	Date	Ledger balance	Date	Ledger balance
03/01	4,786.49	03/02	4,669.49	03/11	4,597.99

## Activity Detail

### Checks and Other Deductions

#### Checks and Substitute Checks

\* Gap in check sequence

Date posted	Check number	Amount	Reference number	Date posted	Check number	Amount	Reference number
03/02	1268 *	117.00	070390770	03/11	1269	71.50	074589371

Department of the Treasury  
Internal Revenue Service

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ


2015

Open to Public Inspection

A For the 2015 Calendar year, or tax year beginning 2015-01-01 and ending 2015-12-31

## B Check if available

- ☐ Terminated for Business
- ☒ Gross receipts are normally \$50,000 or less

C Name of Organization: HIGHLAND PARK COMMUNITY  
DEVELOPMENT CORP3500 Shanks Lane,  
Louisville, KY, US, 40216D Employee Identification  
Number 

## E Website:

F Name of Principal Officer: Highland Park Community Develo  
3500 Shanks Lane,  
Louisville, KY, US, 40216

**Privacy Act and Paperwork Reduction Act Notice:** We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times is 15 minutes.

**Note:** This image is provided for your records only. Do Not mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.

0653287.09

amcray  
AMD

Trey Grayson, Secretary of State

Received and Filed:

11/3/2009 11:15 AM

Fee Receipt: \$8.00

ARTICLES OF AMENDMENT

of

**Highland Park Community Development Corporation**

**A Nonprofit Corporation**

For the purpose of amending nonprofit corporation in Kentucky Pursuant to KRS Chapter KRS 273, the undersigned Incorporators hereby submits the following Articles of Incorporation to the Secretary of State for filing:

**ARTICLE I  
NAME**

The name of this corporation . :: Highland Park Community Development Corporation (HPCDC).

*Articles II, IV, V, & VI are being amended*

**ARTICLE II  
PURPOSE**

This corporation is organized exclusively for charitable purposes within the meaning of Section of 501(c)3 of the Internal Revenue Code of 1986, as now enacted or hereafter amended, including, for such purposes, the making of distributions to organizations that also qualify as Section 501(c)(3) exempt organizations. To this end, the corporation shall provide education and outreach to address the needs of children, youth, adults and seniors in the Metro Louisville community, with an emphasis on the Cane Run and Shagbark community. All funds, whether income or principal, or whether acquired by gift or contribution or otherwise, shall be devoted to said purposes.

**ARTICLE III  
REGISTERED OFFICE**

The street address of the corporation's initial registered office in Kentucky and the registered agent of this corporation is: 3500 Shanks Lane, Louisville, Kentucky 40216. Larry Bonnafon, Sr.

**ARTICLE IV  
LIMITATIONS**

At all times the following shall operate as conditions restricting the operations and activities of the corporation:

1. No part of the net earnings of the corporation shall inure to any member of the corporation not qualifying as exempt under Section 501(c)(3) of the Internal Revenue Code of 1986, as now enacted or hereafter amended, nor to any Director or officer of the corporation, nor to any other private persons, excepting solely such reasonable compensation that the corporation shall pay for



services actually rendered to the corporation, or allowed by the corporation as a reasonable allowance for authorized expenditures incurred on behalf of the corporation;

2. No substantial part of the activities of the corporation shall constitute the carrying on of propaganda or otherwise attempting to influence legislation, or any initiative or referendum before the public, and the corporation shall not participate in, or intervene in (including by publication or distribution of statements), any political campaign on behalf of, or in opposition to, any candidate for public office; and

3. 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)(3) of the Internal Revenue Code of 1986, as now enacted or hereafter amended.

4. The corporation shall not lend any of its assets to any officer or director of this corporation [unless such loan program is regularly conducted as part of the activities of the organization and the qualification of the individual to participate in same is determined by a panel comprised solely of non-Board members], or guarantee to any person the payment of a loan by an officer or director of this corporation.

#### **ARTICLE V DIRECTORS/MEMBERS**

The corporation shall have no voting members. The management and affairs of the corporation shall be at all times under the direction of a Board of Directors, whose operations in governing the corporation shall be defined by statute and by the corporation's by-laws. No Director shall have any right, title, or interest in or to any property of the corporation.

#### **ARTICLE VI DISSOLUTION**

Upon the time of dissolution of the corporation, assets shall be distributed by the Board of Directors, after paying or making provisions for the payment of all debts, obligations, liabilities, costs and expenses of the corporation, for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not 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.

*The above amendment were approved on 11/2/09 by the board of directors.*

**ARTICLE VII  
INCORPORATORS**

The incorporators of this corporation are:

Thomas Brown - 1823 Wilson Ave. Louisville Kentucky 40210

Roger Conwell, Jr. - 3508 Regatta Way Louisville Kentucky 40211

Dr. Wayne Meaux - P. O. Box 18400 Louisville Kentucky 40261

Executed by the Incorporators on: November 2, 2009  
Date

Thomas A. Brown  
Roger Conwell Jr.  
Dr. Wayne Meaux

I, Larry Bonnafon, Sr. consent to serve as the registered agent on behalf of the corporation.

Larry M. Bonnafon Sr.  
Signature of Registered Agent

LARRY M. BONNAFON SR. Director  
Print Name of Agent and Title

INTERNAL REVENUE SERVICE  
P. O. BOX 2506  
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date:

DEC 09 2009

Employer Identification Number:

[REDACTED]

DLN:

17053154056049

HIGHLAND PARK COMMUNITY DEVELOPMENT  
CORPORATION  
3500 SHANKS LN  
LOUISVILLE, KY 40216

Contact Person:

KEITH JOYNES

ID# 52443

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Public Charity Status:

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

Form 990 Required:

Yes

Effective Date of Exemption:

December 19, 2006

Contribution Deductibility:

Yes

Addendum Applies:

No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

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

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

Letter 947 (DO/CG)

**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.**1** Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.**Highland Park Community Development Corporation****2** Business name/disregarded entity name, if different from above**Same As Above****3** Check appropriate box for federal tax classification; check only **one** of the following seven boxes:

- ☐ Individual/sole proprietor or single-member LLC
- ☒ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate
- ☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶
- Note.** For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.
- ☐ Other (see instructions) ▶

**4** Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_

Exemption from FATCA reporting code (if any) \_\_\_\_\_

(Applies to accounts maintained outside the U.S.)

**5** Address (number, street, and apt. or suite no.)**3500 Shanks Lane****6** City, state, and ZIP code**Louisville, Kentucky 40216****7** List account number(s) here (optional)

Requester's name and address (optional)

**Part I Taxpayer Identification Number (TIN)**

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

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number

				-							
--	--	--	--	---	--	--	--	--	--	--	--

or

Employer identification number

--	--	--	--	--	--	--	--	--	--	--	--

**Part II Certification**

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**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 3.

**Sign  
Here**Signature of  
U.S. person ▶*Sandra Miller*

Date ▶

*April 28, 2016***General Instructions**

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

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

**HIGHLAND PARK COMMUNITY DEVELOPMENT CORPORATION  
AFTERSCHOOL PROGRAM  
LEADER SURVEY  
2016**

**At HPCDC Afterschool Program I really like:**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**At HPCDC Afterschool Program I wish:**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**I got the most HPCDC Afterschool Program with**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**At HPCDC Afterschool Program learning leadership skills has helped me to**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Grade**

\_\_\_\_\_  
**Date**

**HIGHLAND Park Community Development Corporation**  
**After School PROGRAM**  
**STAFF EVALUATION**  
**2016**

At the after school program I really like:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

At the after school program I wish:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

At the after school program the "Leaders"

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Program Overall Evaluation

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Date)

\*\*Name Optional

**HIGHLAND PARK COMMUNITY DEVELOPMENT CORPORATION**  
**SUMMER LEADERSHIP CAMP**  
**PARENT SURVEY**  
**2016**

- HPCDC Summer Leadership Camp really stimulated my child to read more this summer

Yes \_\_\_\_\_

No \_\_\_\_\_

Not for sure \_\_\_\_\_

Comment: \_\_\_\_\_

- HPCDC Summer Leadership Camp really improved my child math skills this summer year

Yes \_\_\_\_\_

No \_\_\_\_\_

Not for sure \_\_\_\_\_

Comment: \_\_\_\_\_

- My child behavior has improved since participating in the HPCDC Summer Leadership Camp program

Yes \_\_\_\_\_

No \_\_\_\_\_

Not for sure \_\_\_\_\_

Comment: \_\_\_\_\_

- I have seen my child show leadership by

- \_\_\_\_\_
- \_\_\_\_\_

- I would like to see the HPCDC Youth Programs

- \_\_\_\_\_
- \_\_\_\_\_

- Next Fall/Spring I would like the HPCDC Youth program hours to be

- \_\_\_\_\_
- \_\_\_\_\_

- I will enroll my child in the afterschool session of Highland Park Community Development Tutoring Program

Yes \_\_\_\_\_

No \_\_\_\_\_

Comment: \_\_\_\_\_

\_\_\_\_\_

Optional:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\*\*

Highland Park Educational Leadership Program – Grades K – 6  
Students With Awesome Grades – Grades 7<sup>th</sup> – 12<sup>th</sup>

# HIGHLAND PARK COMMUNITY DEVELOPMENT CORPORATION

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## General Information

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Organization Number	0653287
Name	HIGHLAND PARK COMMUNITY DEVELOPMENT CORPORATION
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	12/19/2006 3:11:41 PM
Organization Date	12/19/2006
Last Annual Report	5/19/2016
Principal Office	3500 SHANKS LANE LOUISVILLE, KY 40216
Registered Agent	LARRY BONNAFON, SR. 3500 SHANKS LANE LOUISVILLE, KY 40216

## Current Officers

---

President	<u>LA TOSCHA CRAIG</u>
Vice President	<u>DON MACK</u>
Treasurer	<u>Terry Wakins</u>
Director	<u>Terry Watkins</u>
Director	<u>Rev. Byron Cox</u>
Director	<u>PINENELL GRADIGO</u>
Director	<u>ANITA HINES</u>

## Individuals / Entities listed at time of formation

---

Director	<u>THOMAS BROWN</u>
Director	<u>ROGER CONWELL JR</u>
Director	<u>DR WAYNE MEAUX</u>
Incorporator	<u>THOMAS BROWN</u>
Incorporator	<u>ROGER CONWELL JR</u>
Incorporator	<u>DR WAYNE MEAUX</u>

## Images available online

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

<u>Annual Report</u>	5/19/2016	1 page	<u>PDF</u>	
<u>Annual Report Return</u>	4/6/2016	2 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	6/15/2015	1 page	<u>PDF</u>	
<u>Annual Report</u>	4/10/2014	1 page	<u>tiff</u>	<u>PDF</u>



**Commonwealth of Kentucky**  
**Alison Lundergan Grimes, Secretary of State**

NARP

0653287

Alison Lundergan Grimes

KY Secretary of State

Received and Filed

5/19/2016 3:01:33 PM

Fee receipt: \$15.00

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

**Annual Report  
Online Filing**

**ARP**

**Company:** HIGHLAND PARK COMMUNITY DEVELOPMENT CORPORATION  
**Company ID:** 0653287  
**State of origin:** Kentucky  
**Formation date:** 12/19/2006 12:00:00 AM  
**Date filed:** 5/19/2016 3:01:33 PM  
**Fee:** \$15.00

**Principal Office**

3500 SHANKS LANE  
LOUISVILLE, KY 40216

**Registered Agent Name/Address**

LARRY BONNAFON, SR.  
3500 SHANKS LANE  
LOUISVILLE, KY 40216

**Current Officers**

President	LA TOSCHA CRAIG	3500 Shanks Lane
Treasurer	Terry Wakins	3500 Shanks Lane
Vice President	DON MACK	3500 Shanks Lane

**Directors**

Director	Terry Watkins	3500 Shanks Lane
Director	Rev. Byron Cox	3500 Shanks Lane
Director	PINENELL GRADIGO	3500 Shanks Lane
Director	ANITA HINES	3500 Shanks Lane

**Signatures**

<b>Signature</b>	Sandra Miller
<b>Title</b>	Ex. Director

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

## **0653287 - HIGHLAND PARK COMMUNITY DEVELOPMENT CORPORATION**

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

**[Click here](#)** to view the filing created for this annual report.

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

Company ID:	0653287.09.99999
Annual Report Date:	5/19/2016
Principal Office:	3500 SHANKS LANE LOUISVILLE, KY 40216
Registered Agent:	LARRY BONNAFON, SR. 3500 SHANKS LANE LOUISVILLE, KY 40216
EPay Transaction ID:	15671890
SOS Accounting ID:	4149995.5583104
Filing Fee:	\$15.00
Signature:	Sandra Miller
Title:	Ex. Director

### **Current Officers**

<b>Office</b>	<b>Name and Address</b>
President	LA TOSCHA CRAIG, 3500 Shanks Lane
Treasurer	Terry Wakins, 3500 Shanks Lane
Vice President	DON MACK, 3500 Shanks Lane

### **Directors**

<b>Name and Address</b>
Terry Watkins, 3500 Shanks Lane
Rev. Byron Cox, 3500 Shanks Lane
PINENELL GRADIGO, 3500 Shanks Lane
ANITA HINES, 3500 Shanks Lane

[View entity](#)