

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

Applicant/Program: Learning for Life

Executive Summary of Request:

Learning for Life works with boys and girls in more than 75 Jefferson County schools. Most of the programming is focused on at-risk students, though there are components that address youth with disabilities as well as preparing older students to earn and keep a job. The total request is \$10,000. \$8,000 would go towards student assistance with the remaining funds going towards the licensing fee regarding these services.

Is this program/project a fundraiser?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is this applicant a faith based organization?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does this application include funding for sub-grantee(s)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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.

17
District #


Council Member Signature

\$3,751.⁰⁰
Amount

7/19/16
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.

CM Stuckel serves on the board of VIPS with Al Cornish.

Approved by:

Appropriations Committee Chairman

Date

Clerk's Office Only:

Request Amount: _____ Committee Amended Appropriation: _____

Original Appropriation: _____ Council Amended Appropriation: _____

Applicant/Program:

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

<u>24</u> District #	<u>Madonna Hood</u> Council Member Signature	<u>500⁰⁰</u> Amount	<u>7/19/16</u> Date
<u>13</u> District #	<u>Vicki Aubrey Welch</u> Council Member Signature	<u>\$500</u> Amount	<u>7-20-16</u> Date
<u>7</u> District #	<u>Angela S. Lee</u> Council Member Signature	<u>\$250</u> Amount	<u>7-20-16</u> Date
<u> </u> District #	<u> </u> Council Member Signature	<u> </u> Amount	<u> </u> Date
<u> </u> District #	<u> </u> Council Member Signature	<u> </u> Amount	<u> </u> Date
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**LOUISVILLE METRO COUNCIL
NEIGHBORHOOD DEVELOPMENT FUND APPLICATION CHECKLIST**

Legal Name of Applicant Organization: *Learning for Life Lincoln Chapter, Inc.*

Program Name and Request Amount:
\$10,000

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	<input type="checkbox"/> Yes
Is the funding proposed by Council Member(s) less than or equal to the request amount?	<input type="checkbox"/> Yes
Is the proposed public purpose of the program viable and well-documented?	<input type="checkbox"/> Yes
Will all of the funding go to programs specific to Louisville/Jefferson County?	<input type="checkbox"/> Yes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	<input type="checkbox"/> Yes
Has prior Metro Funds committed/granted been disclosed?	<input type="checkbox"/> Yes
Is the application properly signed and dated by authorized signatory?	<input type="checkbox"/> Yes
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	<input 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"> • Kentucky Secretary of State? • Louisville Metro Revenue Commission? • Louisville Metro Government? • Internal Revenue Service? • Louisville Metro Human Relations Commission? 	<input type="checkbox"/> Yes
Is the current Fiscal Year Budget included?	<input type="checkbox"/> ...
Is the entity's board member list (with term length/term limits) included?	<input type="checkbox"/> Yes
Is recommended funding less than 33% of total agency operating budget?	<input type="checkbox"/> Yes
Does the application budget reflect only the revenue and expenses of the project/program?	<input 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 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 type="checkbox"/> Yes
Is the IRS Form W-9 included?	<input type="checkbox"/> Yes
Is the IRS Form 990 included?	<input type="checkbox"/> Yes
Are the evaluation forms (if program participants are given evaluation forms) included?	<input type="checkbox"/> N/A
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	<input type="checkbox"/> 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?	<input type="checkbox"/> N/A

Prepared by: *Kip Easton*

Date: *6/23/16*



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization:		Learning for Life, Lincoln Chapter	
<small>(as listed on: http://www.sos.ky.gov/business/records)</small>			
Main Office Street & Mailing Address: 12001 Sycamore Station Place Suite B Louisville, KY 40299			
Website: www.learningforlife.org			
Applicant Contact:	Rick Reeve	Title:	Sr. Development Director
Phone:	502.400.5558	Email:	rick.reeve@scouting.org
Financial Contact:	Wayne Floyd	Title:	Finance Manager
Phone:	502.368.9745	Email:	wayne.floyd@scouting.org
Organization's Representative who attended NDF Training: Rick Reeve			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	Jefferson County Public Elementary and Middle schools		
Council District(s):	All	Zip Code(s):	All
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: Assistance to Individuals			
Total Request: (\$)	10,000	Total Metro Award (this program) in previous year: (\$)	0
Purpose of Request (check all that apply):			
<input checked="" type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input 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)			
The Following are Required Attachments:			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current Year Projected Budget <input checked="" type="checkbox"/> List of Board of Directors (include term & term limits) <input checked="" type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense			
<input type="checkbox"/> Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 <input type="checkbox"/> Evaluation forms if used in the proposed program <input checked="" type="checkbox"/> Annual audit (if required by organization) <input type="checkbox"/> Faith Based Organization Certification Form, if required <input checked="" type="checkbox"/> Staff including the 3 highest paid staff			
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.			
Source:	Dept of Comm Services	Amount: (\$)	1000
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Has the applicant met the BBB Charity Review Standards? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

Applicant's Initials



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

The mission of Learning for Life is to serve others by helping to instill core values in young people, and in other ways prepare them to make ethical choices in their lifetime for achieving their full potential.

The above mission statement, along with life skills and character traits, are used as guidelines in curriculum that is implemented in all school districts. Learning for Life stays abreast of national education issues that involve ethics and values in our schools and gives focus to life skills that will enable participants to:

- Build self-esteem and self-confidence
- Build self-reliance and self-discipline
- Develop a sense of personal and social responsibility
- Show how they can do their best
- Demonstrate the value of helping others
- Encourage the capacity to get along with others
- Demonstrate respect for self and others
- Develop good sportsmanship and team spirit
- Encourage image enhancement through group activities
- Develop pride in both physical and mental growth
- which develop personal responsibility
- Prepare them to become fully participating citizens in
- Encourage a sense of personal achievement by learning their communities new skills

Character education is a lifetime process with its roots firmly planted in childhood. With this precept in mind, Learning for Life pursues, both in classroom curriculum and other related support materials, character traits including compassion, courtesy, tolerance, honesty, self-discipline, diligence, responsibility, self-respect, courage, and integrity.

Learning for Life in our area focuses its attention on youth that are at risk. The program is available to all school districts. Unlike the traditional Boy Scout programs, Learning for Life serves both boys and girls.

Developing desirable character traits is highly compatible with the goals of education including being a positive influence on student behavior. Students who learn basic values will have a greater sense of respect for themselves and others, and their performance in the classroom will be enhanced. Learning for Life will accomplish this mission through volunteers across our 64-county service area.

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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.):

Lincoln Chapter serves as the delivery agent and coordinates the following specific activities on a council-wide level:
•Development of all program materials for classroom use •Develops partnerships and coalitions with businesses
•Develops working relationships with local government •Keeps abreast of national educational trends agencies who are concerned with youth education and reform issues
•Trains professional Scouting personnel on how they can •Develops volunteer recruiting and training materials best recruit and train local volunteers •Coordinates activities to complement national •Identifies resources in the independent sector for educational goals direct funding

Learning for Life essentially serves as a bridge between the Jefferson County Public school system and community resources. It is a bridge driven by partners from business, industry, and government agencies, all working together to supplement education in the classroom.

The Learning for Life program in the Lincoln Chapter has had growth over the last four years, as you can see from the graph above. With your support, we will be able to make our services available to more youth in our 64-county service area. The learning for Life program is divided into four categories each with its own unique flavor and success:

Special Needs Program

Our Special Needs Program, is the largest Scouting program in America, teaches youth with disabilities the life skills they need to achieve self-sufficiency. The Program focuses on and enhances coping skills. Core areas covered are: Self-concept – Youth develop an awareness of personal, social and civic responsibility; Personal/social skills – Youth learn how emotions affect the behaviors of self & others; Life skills – Youth are taught basic skills for independent living. On December 31, 2015, Lincoln Chapter had 3,363 special needs Learning for Life students registered in 162 different schools.

In addition to providing curriculum for life skills for challenged young people, as they leave high school, class room visits, graduation medallions at each school level, our greatest accomplishment is the Adventure Camp at Camp Crooked Creek in Shepherdsville, KY.

Adventure Camp is the outdoor activity component of the Special Needs Program. The camp is offered in the spring and fall of each school year. Students are given the opportunity to experience boating, fishing, hiking, rafting, canoeing, archery, arts and crafts, music and dance therapy, science experiments and nature learning activities. Over the years we have partnered with Metro Department of Health to provide healthy cooking hands on activities, the Kentucky Science Center to provide science experiment stations and the United States Tennis Association to provide adapted tennis lessons with our students. For many of these students, this is the only opportunity to experience camping; the camp and all the equipment used are handicapped accessible.

Elementary Program

Developed for school youth in kindergarten through the sixth grade, each grade level consists of 57 lesson plans designed to reinforce social, ethical and academic skills in areas such as critical and creative thinking, ethical decision making, interpersonal relationships, practical living skills, building self-worth, writing and language arts and citizenship.

Junior High School/Middle School Program

Developed for seventh and eighth grade school youth, this level begins Learning for Life's school-to-career emphasis. The program is designed to provide community role models to motivate and interact with the youth. These role models meet with a specific class and discuss the relationship of that subject to a work situation. This program also consists of a series of 41 interactive workshops that help youth develop and assess the personal skills and values needed to make future career choices.

Senior High School Program

Developed for ninth through twelfth grade school youth, the program continues with the school-to-career emphasis. The first part of this program is a series of interactive workshops that teach the practical skills necessary to acquire a job and stay employed. The second part of the program is a series of career seminars presented by community representatives covering careers that the students have chosen to learn more about.

Exploring Program

Exploring is a work place, school program based on the unique and dynamic relationship that develops between interested young adults and business professionals in our community. This career education program is for youth ages 14 through 20. Local industry and business match their employees and resources to interested youth in the program for career exploration and education and in some cases, eventual employment. The result is a much better understanding of the career or vocation on the part of the youth and a good look at the potential future workforce by the employer. On December 31, 2015, Lincoln Chapter had 4330 Explorer Learning for Life youth registered in 68 Posts chartered or sponsored by 10 unique industries or businesses.

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

Your investment to the Lincoln Chapter will be used to pay the participant fees for Jefferson County Public School students and the national license fee for the Lincoln Chapter to provide these services.

DESCRIPTION OF THE ORGANIZATION

The Learning for Life, Lincoln Chapter serves 7,693 young people in 64 counties across Kentucky, Illinois, Indiana, and Tennessee. Some communities that comprise the Lincoln Chapter are Bardstown, Bowling Green, Clarksville, Corydon, Crestwood, Elizabethtown, Fort Knox, Hopkinsville, Jeffersonville, LaGrange, Madisonville, Murray, New Albany, Paducah, Radcliff, Shelbyville, Shepherdsville and Louisville where the Council's home office is located. More than 52% of the kids served live at or are below poverty guidelines and 35% are minority. More than 368 teachers, guidance counselors, principals and parents volunteer their time to deliver Learning for Life.

DESCRIPTION OF THE REQUEST

"The Lincoln Chapter is the preeminent Learning for Life program in the nation. Known regionally for offering quality life changing experiences for young people, and as the experts in youth and volunteer development."

The mission of Learning for Life is to serve others by helping to instill core values in young people, and in other ways prepare them to make ethical choices in their lifetime for achieving their full potential.

The above mission statement, along with life skills and character traits, are used as guidelines in curriculum that is implemented in all school districts. Learning for Life stays abreast of national education issues that involve ethics and values in our schools and gives focus to life skills that will enable participants to:

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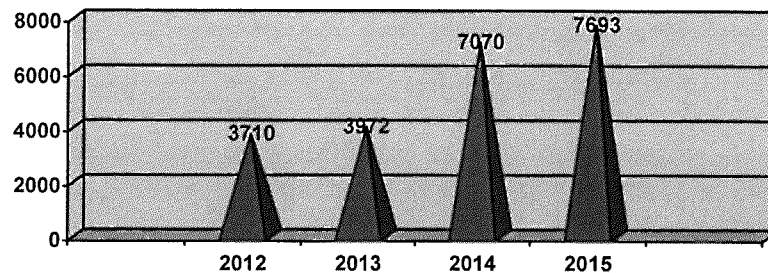
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- Identifies sources in the independent sector for direct funding

- Coordinates objectives to complement national educational goals

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LEARNING FOR LIFE MEMBERSHIP



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LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

N/A

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

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

- ✓ 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.

N/A

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

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

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

N/A



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 benefits expected from the continuance of the Learning for Life program are an assurance that character education will continue in all school districts in our 64-county service area. In a study by Harris & Associates, it is continually shown that involvement in Learning for Life results in strong personal values and character, positive sense of self-worth and usefulness, confidence, nurturing relationships, desire to learn, productive use of time and social adeptness. These are the benefits that we seek and that this program instills. As an addendum to this proposal, please find a brief summary of this research.

The evaluations of the Learning for Life program are frequent and diversified. Enclosed are copies of some of the evaluation forms used by the students and their teachers. These results are compiled, tabulated and shared with our Learning for Life committee, principals, teachers and parents are and used primarily to make any necessary changes in the program and provide support ensuring it is headed in the right direction. Also, we evaluate this program through our outcomes measurement process in conjunction with all of our local United Ways.

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.

Learning for Life partners with 80% of the Jefferson County Public Schools to bring career education to middle and high school students and life skills education to mentally, physically, emotionally, learning and behaviorally challenged students. We work with many of the day treatment centers, and alternative schools in the JCPS system. This past year we partnered with Junior Achievement to bring job readiness skills to middle school youth at Western Middle School. Several aspects of the JA curriculum has also been incorporated with other Explorer programs at other schools.

Adventure Camp, our outdoor class experience for challenged boys and girls, ages 5 to 21 partner with several organizations to bring a variety of activities to the program. In the past year we have partnered with the Kentucky Science Center, the Louisville Ballet and the United States Tennis Association. We also partner with JCPS, UPS and Trover Health Care Solutions to provide volunteers to our camp which averages 400 students each day.

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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		123875	123875
B: Rent/Utilities		8200	8200
C: Office Supplies		2700	2700
D: Telephone		1000	1000
E: In-town Travel		40600	40600
F: Client Assistance (Attach Detailed List)	10000	6000	16000
G: Professional Service Contracts		500	500
H: Program Materials		29250	29250
I: Community Events & Festivals (Attach Detail List)			0
J: Machinery & Equipment		200	200
K: Capital Project			0
L: Other Expenses (Attach Detail List)		1300	13000
*TOTAL PROGRAM/PROJECT FUNDS	10000	232575	242575
<i>% of Program Budget</i>	4 %	96 %	100%

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

Other State, Federal or Local Government	1000
United Way	135000
Private Contributions (do not include individual donor names)	115000
Fees Collected from Program Participants	32800
Other (please specify)	
<i>Total Revenue for Columns 2 Expenses **</i>	282800

**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
Adult Volunteers	\$4000	minimum wage* # of Volunteers * volunteer hours
<i>Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)</i>	\$4000	

* 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, 2016

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

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.

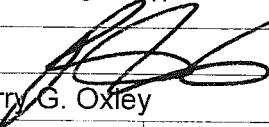
Standard Certifications

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:		Date:	2/29/16
Legal Signatory: (please print):	Barry G. Oxley	Title:	CEO
Phone:	502.400.5560	Extension:	
Email:	Barry.G.Oxley@scouting.org		

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

DEPARTMENT OF THE TREASURY

Date: JUN 11 2015

LEARNING FOR LIFE LINCOLN CHAPTER
INCORPORATED
12001 SYCAMORE STATION PL STE A
LOUISVILLE, KY 40299

Employer Identification Number:

DLN:

17053288357004

Contact Person:

MS. HERRELL

ID# 31505

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:

APRIL 28, 2014

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.

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

Sincerely,



Director, Exempt Organizations

Letter 947

Learning for Life Intake Data Survey



Program Type: (check only one and complete any corresponding information):

- Exploring (Post # _____)
Circle type of post: Healthcare Law Enforcement Aviation Fire/EMS Other: _____
- Middle School/Jr. Exploring (School or Post #: _____)
- NOVA Center (School: _____)
- In-School Learning for Life (School: _____)

During the Year, how many hours do you participate in the above checked program? _____

Your Name (optional): _____

Name of County in which you live: _____

Your Zip Code: _____

Age _____

Gender (circle): Female / Male

Which best describes you? Please mark only one:

- American Indian
- African American/Black
- Multi-Racial
- Asian/Pacific Islander
- Alaska Native
- Hispanic/Latino
- White/Caucasian
- Multiracial
- Other

Which of the following best describes your family?

- I live with 1 parents
- I live with 2 parent
- I live with someone other than my parent.

How many people are in your family? (Include parent/s/guardian/s and brothers/sisters)

- 2
- 3
- 4
- 5
- more than 6
- Don't Know

What level of education did the person you live with complete?

- Some high school
- GED
- High school diploma
- Some college
- Associate degree
- Bachelor's degree
- Post graduate degree
- Other
- I don't know

Do you have reduced or free lunches at school?

- No
- Free
- Reduced
- I don't know

THANK YOU FOR TAKING THIS SURVEY!!!! YOU'RE INPUT IS IMPORTANT!! – Please return to: Learning for Life Lincoln Chapter, PO Box 43368, Louisville, KY 40253; fax: 502-361-7899, or scan and email to: kathryn.shultz@lflmail.org; or send to the LFL Office with your Learning for Life Contact Representative. LFL office phone: 502-400-5363

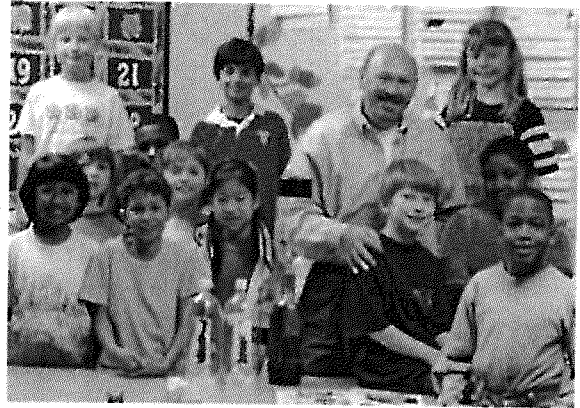
Character Building with Learning for Life

A research study conducted by Syndics Research Corporation and Dr. Kevin Ryan, Boston University, for Learning for Life

Overview

Learning for Life commissioned Syndics Research Corporation and Dr. Kevin Ryan, Boston University, to conduct a research study to test the effectiveness of its program. In particular, the goal of the study was to measure changes in knowledge and behavior of students who were taught eight lessons from the program and students who were not taught the lessons. Results from these two groups of students were then compared.

Approximately 2,500 students in 59 schools nationwide — in urban, suburban, and rural communities — were paired into Learning for Life classes, which received the eight lessons, and non-Learning for Life classes, which did not. None of the schools selected for the study had previously participated in the Learning for Life program.



Students in the second-, fourth-, and sixth-grade Learning for Life classes were taught eight lessons by their regular teachers after the teachers had received a two-hour orientation. Students in the non-Learning for Life classes received no special character-education instruction.

Locations of Participating Schools

Fifty-nine schools across the country participated in the assessment project, including schools in the following communities:



- Tacoma WA
- Las Vegas NV
- Pasadena CA
- Long Beach CA
- Denver CO
- Fort Worth TX
- Houston TX
- Minneapolis MN
- Kansas City MO
- Little Rock AR
- New Orleans LA
- Montgomery AL
- Columbus OH
- Munster IN
- Detroit MI
- Rochester NY
- Manchester NH
- Boston MA
- Norwalk CT
- Bethesda MD

Measures

All students in both the Learning for Life and non-Learning for Life classes were given a pre-test questionnaire that contained questions related to the concepts that were to be taught in the eight lessons. Similarly, all students were measured with a post-test questionnaire. The pre-test and post-test were identical to allow for comparative changes in attitude. Survey instruments were grade appropriate in format.

On the day after specific lessons were taught to the Learning for Life classes, students in both the Learning for Life and non-Learning for Life classes completed questionnaires related to the concepts being taught in the specific lesson. The percentage of appropriate responses in the two groups was then compared.

Teachers of both the Learning for Life and non-Learning for Life classes were asked to make a pre-test evaluation of each of their students on a variety of factors related to concepts being taught in the eight lesson plans: works well with others, is honest, has high self-worth, and other important values. Teachers were also asked to rate each student in their classes in a post-test evaluation after the eight lessons had been taught in the Learning for Life classes. Results were then compared.

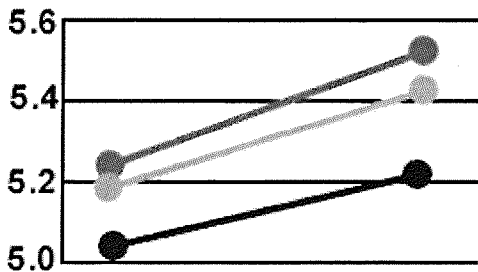
Findings

Students in the Learning for Life classes scored higher on questionnaires related to the concepts taught than students in the non-Learning for Life classes who received no instruction. This same result occurred for each of the eight lessons and at each grade level.

The most dramatic difference between the students taught the Learning for Life lessons and the students not taught the Learning for Life lessons was apparent in a comparison of the pre-test and post-test teacher evaluations of student behavior on a variety of factors related to the lessons. There was no significant change in the observed behavior of students in the non-Learning for Life classes. In contrast, the teachers in the Learning for Life classes reported significant improvements in the observed behavior of their students on the same factors.

Test Classes (Learning for Life) Classroom Behavior

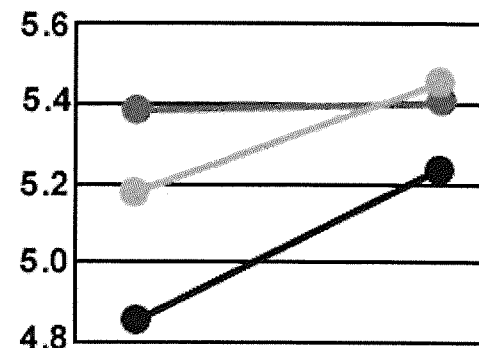
● Urban ● Suburban ● Rural



Means based on a seven-point scale: 7 = Excellent; 1 = Poor.

Test Classes (Learning for Life) Classroom Behavior

● 2nd Grade ● 4th Grade ● 6th Grade



Means based on a seven-point scale: 7 = Excellent; 1 = Poor.

Learning for Life Works in Urban, Suburban, and Rural Areas

Teachers of students in the Learning for Life classes saw a significant improvement in the behavior of students after the students had participated in the eight Learning for Life lessons. This improvement was seen in all three subgroups of the Learning for Life classes: urban, suburban, and rural.

The professional judgment of the Learning for Life teachers showed that the observable behavior of Learning for Life students dramatically improved compared with that of non-Learning for Life students.

Learning for Life Helps Improve Classroom Behavior

Teachers of second- and sixth-grade students reported a statistically significant improvement in the classroom behavior of their students after the students had participated in the Learning for Life lessons.

The overall rating of the fourth-grade students was higher but not statistically significant. The behavior of students in the non-Learning for Life classes did not change significantly.

Summary

Students in the Learning for Life classes made some important gains. Some key findings of this study are:

Post-Test Scores Were Higher

Students in the Learning for Life classes showed a 20 percent gain in appropriate responses from the pre-test to the post-test. This compared with the much lower gain of only 6 percent in students in the non-Learning for Life classes.

Lesson Scores Were Higher

Students in the Learning for Life classes scored higher on questionnaires related to issues taught in the lessons than did students in the non-Learning for Life classes. This was true for all eight lessons and at each grade level.

Second-Graders Gained the Most

On almost all scores, the second-grade students in the Learning for Life classes showed the greatest gain in the number of appropriate responses. This suggests the importance of reaching students at an early age with this kind of instruction.

Classroom Behavior Improved

Teachers reported that students in the Learning for Life classes showed significant improvement in behavior. No such improvement was seen in the students in non-Learning for Life classes.

These findings suggest that exposure to only eight lessons from the Learning for Life program positively affected the behavior and attitudes of second-, fourth-, and sixth-grade students.

Learning for Life Enables Students to ...

- Build self-worth and self-confidence
- Build self-reliance and self-discipline
- Develop a sense of personal and social responsibility
- Show how they can do their best
- Learn the value of helping others
- Develop the capacity to get along with others
- Learn to have respect for themselves and others
- Develop a sense of personal achievement by learning new skills
- Gain an enhanced self-image through group activities that develop personal responsibility
- Develop a sense of fair play and team spirit
- Develop pride in both physical and mental growth
- Become fully participating citizens in their communities

Learning for Life, Lincoln Chapter
June 2016

Learning for Life
Director
Ruthe Holmberg
\$57,579

Exploring
Executive
Dennis Trammell
\$37,000

Eatherly, Kip

From: Richard Reeve <Rick.Reeve@scouting.org>
Sent: Wednesday, June 29, 2016 1:49 PM
To: Eatherly, Kip
Subject: Schools in Jefferson County.

The Jefferson County Schools include: Anchorage School, Auburndale Elementary, Audubon Elementary, Audubon Youth Development Center, Bates Elementary, Blake Elementary, Blue Lick Elementary, Bowen Elementary, Boys Haven, Brandeis Elementary, Brooklawn, Butler High School, Butler Traditional High School, Byck Elementary School, Camp Taylor Elementary, Carrithers Middle School, Carter Elementary, Chenoweth Elementary, Coral Ridge Elementary, Crosby Middle School, Eastern High School, Eisenhower Elementary, Exceptional Teens and Adults Learning Center, Fairdale Elementary, Farmer Elementary, Farnsley Middle School, Fern Creek High School, Gilmore Lane Elementary, Greathouse/Shryock, Gutermuth Elementary, Hazelwood Elementary, Highland Middle School, Hite Elementary, Home of Innocents, Iroquois High School, JF Kennedy Elementary, Jacob Elementary, Jefferson County Traditional Middle School, Jefferson Elementary Scholl, Kammerer Middle School, Kenwood Elementary School, Klondike Lane Elementary, Lassiter Middle School, Laukauf Elementary, Liberty High School, Louisville Day Treatment Center, Luhr Elementary, Mary Ryan Academy, McFerran Preparatory Academy, Meredith Dunn School, Mill Creek Elementary, Minors Lane Elementary, Moore Traditional High School, Moore Traditional Middle School, Neuro Restorative, Newburg Middle School, Norton Elementary, Peace Academy, Phoenix Middle School, Pleasure Ridge Park High School, Portland Elementary, Price Elementary, Sanders Elementary, Shacklette Elementary, St. Matthews Elementary, St. Joseph Alternative School, Stopher Elementary, Stuart Middle School, TT Knight Middle School, Tully Elementary, Waller Williams Elementary, Wellington Elementary, Western Day Treatment, Western High School, Western Middle School, Whitney Young Elementary, Wilder Elementary, Wilt Elementary and Zachary Taylor Elementary.

Rick Reeve, MSM | Senior Development Director

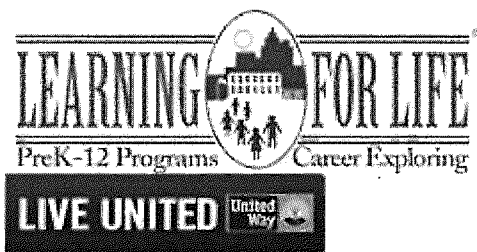
Lincoln Chapter, LEARNING FOR LIFE

12001 Sycamore Station Place

Louisville, Kentucky 40299

P 502.400.5558 | C 325.262.0667 | F 502.361.7899 |

<http://lflincolnchapter.org/>



Period Ending: January 31, 2016

Operating Fund

		Current Year
Account	Project	Budget
Project Name / Account Name		
Support & Revenue		
Direct Support		
4001	Contributions-FLFL	100,000
Total Friends of Scouting		100,000
TOTAL DIRECT SUPPORT		100,000
4603	Contributions-Other Assoc Org	15,000
Total Associated Organizations		15,000
4701	Contributions-United Way-Alloc	68,615
3640	Reclass-United Way Alloc	66,385
Total United Way		135,000
TOTAL INDIRECT SUPPORT		150,000
TOTAL SUPPORT		250,000
6801	Activity-Fees	32,800
Activity Revenue Less Cost of Goods and Discounts		32,800
TOTAL REVENUE		32,800
TOTAL SUPPORT AND REVENUE		282,800
7002	Professional Salaries	96,000
Total Salaries		96,000
7101	BSA Grp Accident Ins-Employer	75
7102	BSA Group Life Ins-Employer	700
7103	BSA Group Medical Ins-Employer	8,000
7104	BSA Retirement Plan-Employer	7,000
7108	BSA LTD Ins-Employer	500
7109	BSA Dental Plan-Employer	1,200
7131	Oth Employee Benefits-Employer	2,400
Total Employee Benefits		19,875
7201	Social Security Taxes-Employer	7,250
7202	Unemployment Taxes-Employer	375
7203	Workers' Comp Ins-Employer	375
Total Payroll Tax Expense		8,000
TOTAL EMPLOYEE COMPENSATION		123,875
8009	Electronic Data Processing Fees	500
8011	LFL License Fee	12,250
Total Professional Fees		12,750
8103	Supplies-Program	29,250
8104	Supplies-Food and Commissary	4,400
8105	Supplies-Janitorial	500

Period Ending: January 31, 2016

Operating Fund

			Current Year
Account	Project	Project Name / Account Name	Budget
8106		Supplies-Office	2,700
Total Program & Other Supplies			36,850
8201		Telephone	1,000
Total Telephone & Communications			1,000
8301		Postage	250
Total Postage & Shipping			250
8402		Site of Facility Rental	8,200
Total Occupancy & Utilities			8,200
8502		Equipment Service Contracts	200
Total Rental & Maintenance of Equipment			200
8601		In-house Printing	550
Total Publication & Media Services			550
8702		Gas and Oil	3,200
8703		Vehicles repairs	300
8705		Vehicles License and Permits	700
8706		Leasing of vehicles	7,000
8707		Mileage and Allowance	(1,000)
8709		Hotel, Meals and Incidentals	400
8711		Transportation Fares	30,000
Total Travel & Living			40,600
8901		Individual Assist-Registration	3,500
Total Assistance to Individuals			3,500
9151		Recognitions--Staff	500
9152		Recognitions--Volunteers	1,250
	011	LEARNING FOR LIFE	250
9154		Recognitions--Fundraising	250
Total Recognition & Awards			2,000
Insurance Coverage			
	011	LEARNING FOR LIFE	1,800
9309		Insurance-Automobile	1,800
	011	LEARNING FOR LIFE	8,000
9315		Insurance-General Liability	8,000
	011	LEARNING FOR LIFE	2,500
9322		Insurance-Participant	2,500
Total Insurance Coverage			12,300
Miscellaneous Expenses			
	011	LEARNING FOR LIFE	500
9404		Bank Service Charges	500

Period Ending: January 31, 2016

Operating Fund

Account Project	Project Name / Account Name	Current Year
		Budget
Total Miscellaneous Expenses		500
TOTAL OTHER EXPENSES		118,700
TOTAL EXPENSES		242,575
SURPLUS (Deficit) UR REVENUE/EXPENSE		40,225



Learning for Life Lincoln Chapter Board

Kevin Etter -- Chairman
Global Strategy Manager
UPS
71 Tall Pine Drive
Elizabethtown, Kentucky 42701
B: 502-961-4399

Dr. Leon Mooneyhan -- Vice-Chairman
CEO
Ohio Valley Educational Cooperative
100 Alpine Drive
Shelbyville, Kentucky 40066
B: 502-502-3533

John Combs --Treasurer
Healthcare Recoveries
Division/Trover Solutions, Inc.
9390 Bunsen Parkway
Louisville, KY 40220
John.combs@hcrec.com
[REDACTED]

Al Cornish
Norton Healthcare
224 East Broadway Suite 115
Louisville, Kentucky 40202
B: 502-629-7349

Dr. Ken Tally
Career & Technical Education
Jefferson County Public Schools
VanHoose Education Center, 4th Floor
3332 Newburg Road
Louisville, KY 40232
B: 502-485-3320

Carol Bartlett
FRYSC Director
VanHoose Education Center
3332 Newburg Road
P.O. Box 34020
Louisville, KY 40232
B: 502-485-3703

Sam Corbett
Community Engagement
University of Louisville
College of Education and Human Development
1905 South 1st Street
Louisville, KY 40292
B: 502-852-4023

Vicki Yates-Brown
UofL Nucleus
vybrown@nucleusky.com
B: 502-569-4593

Mark Schneider
Marketing Chair
LG&E
[REDACTED]

Major Curtis R. Flaherty
Louisville Metro Police Department
Curtis.flaherty@louisvilleky.gov B: 502-231-2811
[REDACTED]

Ken Howard
Humana
Khoward2@humana.com
[REDACTED]

Jay Cardosi
Chief Meteorologist
WLKY Channel 32
1918 Mellwood Ave.
Louisville, KY 40206-1035
jcardosi@hearst.com
[REDACTED]

Barry Oxley* – Secretary
Learning for Life
12001 Sycamore Station Place, Ste A
Louisville, KY 40299
barry.oxley@iflmail.org
[REDACTED]

Terms and Term Limits: The governing body of the organization consists of the Board of Directors which consists of the LFL Chair, Vice-Chairman, Secretary, Treasurer and at least one (1) director at large each of whom shall be elected for a two year term with the annual meeting in December and term beginning in January.

**non-voting member*

Updated: June 2015

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

NAOI
0885819.09
Alison Lundergan Grimes
Secretary of State
Received and Filed
4/28/2014 11:12:11 AM
Fee receipt: \$8.00

Alison Lundergan Grimes
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Articles of Incorporation
Non-profit Corporation

NAI

For the purposes of forming a non-profit corporation in Kentucky pursuant to KRS Chapter 273, the undersigned incorporator hereby submits the following Articles of Incorporation to the Office of the Secretary of State for filing:

Article I: The name of the company is

Learning for Life Lincoln Chapter Incorporated

Article II: The street address of the company's initial registered office in Kentucky is

12001 Sycamore Stations Place, Suite A, Louisville, KY 40299

and the name of the initial registered agent at that address is **Clint Scharff**

Article III: The mailing address of the company's initial principal office is

PO Box 43368, Louisville, KY 43368

Article IV: The name and mailing address of each incorporator is

Barry Oxley 12001 Sycamore Station Pl, Louisville, Kentucky 40299

Article V: The number of directors constituting the initial board of directors is 3. The name and mailing address of each director is

Barry G Oxley 12001 Sycamore Station Pl, Louisville, Kentucky 40299

Kevin Etter 12001 Sycamore Station Pl, Louisville, Kentucky 40299

Pat Hargadon 12001 Sycamore Station Pl, Louisville, Kentucky 40299

Article VI: The purpose of the company is: **Character education and career exposure**

Executed by the Incorporator on Monday, April 28, 2014

Name of Incorporator: **Barry Oxley**

Signature of individual signing on behalf of Incorporator: **Barry Oxley**

I, **Clint Scharff**, consent to serve as the Registered Agent on behalf of the corporation.

Signature of Registered Agent or individual signing on behalf of the company serving as Registered Agent:

Clint Scharff

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) Learning For Life Lincoln Chapter	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____	
	<input type="checkbox"/> Exempt payee	
	Address (number, street, and apt. or suite no.) 12001 Sycamore Station Place Suite A	
City, state, and ZIP code Louisville Kentucky 40299		
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 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												
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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).

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 ▶ 2/26/16
------------------	----------------------------	-----------------------

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:

- 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.

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.

Operating Fund

Account	Project	Project Name / Account Name	Current Period			Year to Date			Current Year
			Budget	Actual	Last Year	Budget	Actual	Last Year	Budget
Support & Revenue									
Direct Support									
Direct Mail Campaign									
4001		Contributions-FOS	6,250	1,607	(9,006)	65,994	117,666	25,379	65,994
3605		Reclass-Friends of Scouting	-	-	-	9,006	9,006	-	9,006
Total Friends of Scouting			6,250	1,607	(9,006)	75,000	126,672	25,379	75,000
TOTAL DIRECT SUPPORT			6,250	1,607	(9,006)	75,000	126,672	25,379	75,000
4603		Contributions-Other Assoc Org	1,250	833	1,250	15,000	9,967	13,750	15,000
Total Associated Organizations			1,250	833	1,250	15,000	9,967	13,750	15,000
4701		Contributions-United Way-Alloc	16,510	11,064	14,167	99,060	66,385	85,000	99,060
3640		Reclass-United Way Alloc	-	-	-	85,000	85,000	-	85,000
Total United Way			16,510	11,064	14,167	184,060	151,385	85,000	184,060
TOTAL INDIRECT SUPPORT			17,760	11,898	15,417	199,060	161,352	98,750	199,060
TOTAL SUPPORT			24,010	13,504	6,411	274,060	288,024	124,129	274,060
6801		Activity-Fees	833	(5,368)	(1,484)	26,000	32,904	23,913	26,000
Activity Revenue Less Cost of Goods and Discounts			833	(5,368)	(1,484)	26,000	32,904	23,913	26,000
TOTAL REVENUE			833	(5,368)	(1,484)	26,000	32,904	23,913	26,000
TOTAL SUPPORT AND REVENUE			24,843	8,136	4,927	300,060	320,928	148,042	300,060
7002		Professional Salaries	7,583	8,501	42,428	91,000	99,874	123,690	91,000
7006		Temporary Clerical Salaries	2,778	-	-	25,000	13,658	-	25,000
Total Salaries			10,361	8,501	42,428	116,000	113,531	123,690	116,000
7101		BSA Grp Accident Ins-Employer	2	2	7	25	21	29	25
7102		BSA Group Life Ins-Employer	50	54	268	600	634	785	600
7103		BSA Group Medical Ins-Employer	625	807	3,685	7,500	9,818	10,538	7,500
7104		BSA Retirement Plan-Employer	542	595	2,954	6,500	6,981	8,641	6,500
7108		BSA LTD Ins-Employer	42	43	216	500	510	631	500
7109		BSA Dental Plan-Employer	83	68	252	1,000	816	1,000	1,000
7131		Oth Employee Benefits-Employer	167	144	997	2,000	1,707	2,441	2,000
Total Employee Benefits			1,511	1,713	8,379	18,125	20,487	24,065	18,125
7201		Social Security Taxes-Employer	847	571	3,147	9,500	7,848	9,021	9,500
7202		Unemployment Taxes-Employer	42	42	48	500	516	576	500
7203		Workers' Comp Ins-Employer	42	42	28	500	500	336	500
Total Payroll Tax Expense			931	655	3,223	10,500	8,864	9,933	10,500
TOTAL EMPLOYEE COMPENSATION			12,803	10,870	54,030	144,625	142,883	157,688	144,625
8008		Accounting Services	-	-	2,000	2,000	2,500	2,000	2,000
8009		Electronic Data Processing Fees	42	-	87	500	461	1,000	500
8011		LFL License Fee	1,271	-	-	15,250	15,488	15,152	15,250
Total Professional Fees			1,313	-	2,087	17,750	18,449	18,152	17,750
8101		Supplies-Health and Safety	-	-	-	-	150	-	-
8103		Supplies-Program	569	153	442	30,000	32,440	17,575	30,000
8104		Supplies-Food and Commissary	276	102	1,020	6,350	5,191	2,367	6,350
8105		Supplies-Janitorial	-	-	-	500	170	-	500
8106		Supplies-Office	111	-	5	1,450	2,311	745	1,450
8131		Other Supplies	-	-	-	-	198	-	-
Total Program & Other Supplies			956	255	1,467	38,300	40,460	20,687	38,300
8201		Telephone	167	80	160	2,000	795	875	2,000
Total Telephone & Communications			167	80	160	2,000	795	875	2,000
8301		Postage	21	-	-	250	17	152	250
Total Postage & Shipping			21	-	-	250	17	152	250
8402		Site of Facility Rental	383	-	387	8,200	4,100	8,200	8,200
Total Occupancy & Utilities			383	-	387	8,200	4,100	8,200	8,200
8502		Equipment Service Contracts	-	413	-	-	537	359	-
Total Rental & Maintenance of Equipment			-	413	-	-	537	359	-
8601		In-house Printing	86	-	60	1,100	715	683	1,100
8609		Outside Printing	22	-	700	3,300	-	700	3,300
Total Publication & Media Services			108	-	760	4,400	715	1,383	4,400
8702		Gas and Oil	333	180	542	4,200	2,425	3,095	4,200
8703		Vehicles repairs	25	-	-	300	140	(502)	300
8705		Vehicles License and Permits	33	33	33	400	797	437	400

Operating Fund			Current Period			Year to Date			Current Year
Account	Project	Project Name / Account Name	Budget	Actual	Last Year	Budget	Actual	Last Year	Budget
8706		Leasing of vehicles	625	553	543	7,500	6,612	6,030	7,500
8707		Mileage and Allowance	(100)	(91)	(444)	(1,200)	(1,087)	(1,822)	(1,200)
8709		Hotel, Meals and Incidentals	33	-	35	400	114	93	400
8711		Transportation Fares	-	-	-	25,000	20,985	-	25,000
Total Travel & Living			949	675	709	36,600	29,986	7,331	36,600
8901		Individual Assist-Registration	292	3,414	2,915	3,500	4,329	29,795	3,500
	011	LEARNING FOR LIFE	417	-	-	5,000	-	-	5,000
	040	ADVENTURE CAMP	-	-	5,424	-	10,595	43,612	-
	279	NOVA CENTER	-	-	121	-	58	1,039	-
8903		Individual Assist-Literature	417	-	5,545	5,000	10,652	44,651	5,000
	040	ADVENTURE CAMP	-	-	-	-	186	-	-
8904		Indiv Assistance Scholarships	-	-	-	-	186	-	-
	279	NOVA CENTER	-	-	153	-	-	862	-
8906		Individual Assistance--Food	-	-	153	-	-	862	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
Total Assistance to Individuals			709	3,414	8,614	8,500	15,168	75,308	8,500
Recognition & Awards									
	011	LEARNING FOR LIFE	42	-	-	500	-	44	500
9151		Recognitions--Staff	42	-	-	500	-	44	500
	011	LEARNING FOR LIFE	-	-	-	-	264	-	-
	040	ADVENTURE CAMP	-	-	-	2,000	1,057	-	2,000
	279	NOVA CENTER	56	-	-	500	87	13	500
9152		Recognitions--Volunteers	56	-	-	2,500	1,408	13	2,500
-	-	-	-	-	-	-	-	-	-
	011	LEARNING FOR LIFE	50	-	-	600	-	384	600
9154		Recognitions--Fundraising	50	-	-	600	-	384	600
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
Total Recognition & Awards			148	-	-	3,600	1,408	441	3,600
Interest on Debt									
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
Total Interest on Debt			-	-	-	-	-	-	-
Insurance Coverage									
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
	011	LEARNING FOR LIFE	153	306	167	1,840	1,993	2,000	1,840
9309		Insurance-Automobile	153	306	167	1,840	1,993	2,000	1,840
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
	011	LEARNING FOR LIFE	667	-	667	8,000	7,333	8,000	8,000
9315		Insurance-General Liability	667	-	667	8,000	7,333	8,000	8,000
-	-	-	-	-	-	-	-	-	-
	011	LEARNING FOR LIFE	208	-	-	2,500	2,500	2,500	2,500
9322		Insurance-Participant	208	-	-	2,500	2,500	2,500	2,500
-	-	-	-	-	-	-	-	-	-
Total Insurance Coverage			1,028	306	834	12,340	11,826	12,500	12,340
Miscellaneous Expenses									
-	-	-	-	-	-	-	-	-	-
	011	LEARNING FOR LIFE	42	-	-	500	36	3	500
9404		Bank Service Charges	42	-	-	500	36	3	500
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-

Operating Fund			Current Period			Year to Date			Current Year
Account	Project	Project Name / Account Name	Budget	Actual	Last Year	Budget	Actual	Last Year	Budget
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
Total Miscellaneous Expenses			42	-	-	500	36	3	500
Loss on Sale of Fixed Assets									
-	-	-	-	-	-	-	-	-	-
Total Loss on Sale of Fixed Assets			-	-	-	-	-	-	-
National Charter & Service Fees									
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
Total National Charter & Service Fees			-	-	-	-	-	-	-
TOTAL OTHER EXPENSES			5,824	5,143	15,018	132,440	123,498	145,391	132,440
TOTAL EXPENSES			18,627	16,012	69,048	277,065	266,380	303,080	277,065
SURPLUS (Deficit) OR REVENUE/EXPENSE			6,216	(7,876)	(64,121)	22,995	54,548	(155,038)	22,995
Adjustments to Net Assets									
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
Total Adjustments to Net Assets			-	-	-	-	-	-	-
Transfers To/From Other Funds									
-	-	-	-	-	-	-	-	-	-
Total Transfers To/From Other Funds			-	-	-	-	-	-	-

-- End of Statement --

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.

A For the 2014 calendar year, or tax year beginning **APR 28, 2014** and ending **DEC 31, 2014**


B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization LEARNING FOR LIFE LINCOLN CHAPTER		D Employer identification number [REDACTED]	
	Doing business as 12001 SYCAMORE STATION PL		E Telephone number 5024005560	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite A		G Gross receipts \$ 222,455.	
	City or town, state or province, country, and ZIP or foreign postal code LOUISVILLE, KY 40253		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
F Name and address of principal officer: BARRY OXLEY SAME AS C ABOVE			H(c) Group exemption number ▶	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: ▶ WWW.LEARNINGFORLIFE.ORG				
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 2014 M State of legal domicile: KY	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROMOTE THE ABILITY OF YOUNG PEOPLE TO DO THINGS FOR THEMSELVES AND OTHERS, AND TO TEACH THEM			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	13	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	12	
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	0	
	6	Total number of volunteers (estimate if necessary)	250	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.	
7b	Net unrelated business taxable income from Form 990-T, line 34	0.		
Revenue	8 Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)			205,884.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)			16,571.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11a)			0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			222,455.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)			0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)			0.
	16b Total fundraising expenses (Part IX, column (D), line 25) ▶ 20,835.			
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			170,540.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			170,540.
19 Revenue less expenses. Subtract line 18 from line 12			51,915.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)		Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)			176,031.
	22 Net assets or fund balances. Subtract line 21 from line 20			124,116.

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 6/30/15	
	Type or print name and title BARRY OXLEY, SECRETARY			
Paid Preparer Use Only	Print/Type preparer's name W. ALLEN PRIEST		Date 06/30/15	
	Firm's name COMPTON, KOTTKE & ASSOCIATES		Firm's EIN ▶ [REDACTED]	
Firm's address 220 WEST MAIN STREET; SUITE 2200 LOUISVILLE, KY 40202			Phone no. 502-587-8851	

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 [X]

1 Briefly describe the organization's mission: TO PROMOTE THE ABILITY OF YOUNG PEOPLE TO DO THINGS FOR THEMSELVES AND OTHERS, AND TO TEACH THEM RESPECT, RESPONSIBILITY, COURAGE, SELF-RELIANCE AND KINDRED CHARACTER TRAITS BY PROVIDING PROGRAMS THAT ARE DESIGNED TO SUPPORT SCHOOLS AND OTHER YOUTH-SERVING ORGANIZATIONS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [X] 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 [X] 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 \$ 73,083. including grants of \$) (Revenue \$ 3,421.) PROVIDED CURRICULUM AND TRAINING SUPPORT FOR SPECIAL EDUCATION TEACHERS IN PUBLIC AND PRIVATE SCHOOLS IN 11 DIFFERENT COUNTIES INCLUDING PROVIDED OUTDOOR DAY CAMP ACTIVITIES TO STUDENTS IN THOSE SCHOOLS

4b (Code:) (Expenses \$ 22,878. including grants of \$) (Revenue \$) PROVIDED AFTER SCHOOL TUTORING AND LIFE SKILL DEVELOPMENT PROGRAMS IN TWO COMMUNITY CENTERS

4c (Code:) (Expenses \$ 15,900. including grants of \$) (Revenue \$ 13,150.) PROVIDED CURRICULUM, TRAINING AND SUPPORT FOR CAREER EXPLORING PROGRAMS SPONSORED BY A VARIETY OF GOVERNMENTAL, PUBLIC SAFETY, AND HEALTH CARE ORGANIZATIONS ACROSS A 64 COUNTY AREA

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 111,861.

Part IV Checklist of Required Schedules

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

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

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

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

Table with columns for line numbers (1a-14b), descriptions of questions, and Yes/No columns. Includes questions about Form 1096, Form W-2G, backup withholding, Form W-3, unrelated business gross income, foreign accounts, prohibited tax shelter transactions, annual gross receipts, deductible contributions, and charitable trusts.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

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	13		
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	12		
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?		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?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		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	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13 Did the organization have a written whistleblower policy?		X
14 Did the organization have a written document retention and destruction policy?		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	X	
b Other officers or key employees of the organization		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?		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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **► KY**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **►**
BARRY OXLEY - 5024005560
12001 SYCAMORE STATION PLACE SUITE A, LOUISVILLE, KY 40299

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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BARRY OXLEY SECRETARY	4.00	X		X				0.	0.	0.
(2) KEVIN ETTER CHAIRMAN	5.00	X		X				0.	0.	0.
(3) LEON MOONEYHAN DIRECTOR	5.00	X						0.	0.	0.
(4) JOHN COMBS TREASURER	5.00	X		X				0.	0.	0.
(5) AL CORNISH DIRECTOR	5.00	X						0.	0.	0.
(6) KEN TALLY DIRECTOR	5.00	X						0.	0.	0.
(7) CAROL BARTLETT DIRECTOR	5.00	X						0.	0.	0.
(8) SAM CORBETT DIRECTOR	5.00	X						0.	0.	0.
(9) VICKI YATES BROWN DIRECTOR	5.00	X						0.	0.	0.
(10) MARK SCHNEIDER DIRECTOR	5.00	X						0.	0.	0.
(11) CURTIS FLAHERTY DIRECTOR	5.00	X						0.	0.	0.
(12) KEN HOWARD DIRECTOR	5.00	X						0.	0.	0.
(13) JAY CARDOSI DIRECTOR	5.00	X						0.	0.	0.

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a 177,500.				
	b Membership dues	1b				
	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 28,384.				
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		205,884.			
Program Service Revenue	2 a <u>ACTIVITY FEES - KY LAW</u>	Business Code 611710	13,150.	13,150.		
	b <u>ACTIVITY FEES - CHAMPI</u>	624100	3,421.	3,421.		
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		16,571.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)					
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b			
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11 a						
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d					
12 Total revenue. See instructions.		222,455.	16,571.	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

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				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	2,000.		2,000.	
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.)	502.		502.	
12 Advertising and promotion	1,063.	395.	668.	
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	4,102.	4,102.		
17 Travel	4,428.	4,428.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	4,996.	998.	3,998.	
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 REIMBURSEMENT OF PERSON	102,254.	51,127.	30,676.	20,451.
b PROGRAM COSTS PAID FOR	30,763.	30,763.		
c SUPPLIES	16,748.	16,748.		
d FOOD AND COMMISSARY	1,938.	1,938.		
e All other expenses	1,746.	1,362.		384.
25 Total functional expenses. Add lines 1 through 24e	170,540.	111,861.	37,844.	20,835.
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	80,026.
	2 Savings and temporary cash investments	2	
	3 Pledges and grants receivable, net	3	96,005.
	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)	0. 16	176,031.	
Liabilities	17 Accounts payable and accrued expenses	17	124,116.
	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	124,116.
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.	
27 Unrestricted net assets		27	-33,085.
28 Temporarily restricted net assets		28	85,000.
29 Permanently restricted net assets		29	
Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
30 Capital stock or trust principal, or current funds		30	
31 Paid-in or capital surplus, or land, building, or equipment fund		31	
32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances		0. 33	51,915.
34 Total liabilities and net assets/fund balances	0. 34	176,031.	

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	222,455.
2	Total expenses (must equal Part IX, column (A), line 25)	2	170,540.
3	Revenue less expenses. Subtract line 2 from line 1	3	51,915.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	0.
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	51,915.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
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?		X
3b	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		

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

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

Section A. Public Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f); 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities, whether or not the business is regularly carried on; 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)); 15 Public support percentage from 2013 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2014; 16b 33 1/3% support test - 2013; 17a 10% -facts-and-circumstances test - 2014; 17b 10% -facts-and-circumstances test - 2013; 18 Private foundation.

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					205,884.	205,884.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					16,571.	16,571.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5					222,455.	222,455.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b						0.
8 Public support (Subtract line 7c from line 6.)						222,455.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6					222,455.	222,455.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)					222,455.	222,455.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	100.00	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16		%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	.00	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18		%

19a 33 1/3% support tests - 2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.
Also complete this part for any additional information. (See instructions).

PART III SECTION A

**THERE IS ONLY ONE YEAR OF RECEIPT INFORMATION PRESENTED BECAUSE THIS IS
THE FIRST YEAR OF OPERATIONS FOR THE ENTITY.**

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Name of the organization

LEARNING FOR LIFE LINCOLN CHAPTER

Employer identification number



Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

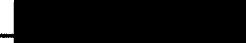
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

LEARNING FOR LIFE LINCOLN CHAPTER



Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	METRO UNITED WAY 334 EAST BROADWAY LOUISVILLE, KY 40204	\$ 170,000.	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	WHAS CRUSADE FOR CHILDREN 520 W. CHESTNUT ST LOUISVILLE, KY 40202	\$ 16,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	UNITED WAY OF CENTRAL KENTUCKY 604 CS-1320 ELIZABETHTOWN, KY 42701	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

LEARNING FOR LIFE LINCOLN CHAPTER



Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization **LEARNING FOR LIFE LINCOLN CHAPTER** Employer identification number [REDACTED]

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2014
Open to Public Inspection

Name of the organization

LEARNING FOR LIFE LINCOLN CHAPTER

Employer identification number

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X



Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
- b Permanent endowment %
- c Temporarily restricted endowment %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

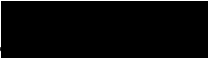
4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 0.



Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	222,455.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	222,455.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	222,455.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	170,540.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	170,540.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	170,540.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

EXEMPTION FROM INCOME TAXES: THE ORGANIZATION IS A NOT-FOR-PROFIT ORGANIZATION EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. IT IS NOT CLASSIFIED AS A PRIVATE FOUNDATION. THE ORGANIZATION IS SUBJECT TO A TAX ON INCOME FROM ANY UNRELATED BUSINESS.

THE ORGANIZATION HAS ANALYZED TAX POSITIONS TAKEN FOR FILING WITH THE INTERNAL REVENUE SERVICE AND ALL STATE JURISDICTIONS WHERE IT OPERATES. THE ORGANIZATION BELIEVES THAT INCOME TAX FILING POSITIONS WILL BE SUSTAINED UPON EXAMINATION AND DOES NOT ANTICIPATE ANY ADJUSTMENTS THAT WOULD RESULT IN A MATERIAL ADVERSE EFFECT ON THE ORGANIZATION'S FINANCIAL CONDITION, RESULTS OF OPERATIONS OR CASH FLOWS. ACCORDINGLY, THE

Part XIII Supplemental Information (continued)

ORGANIZATION HAS NOT RECORDED ANY RESERVES, OR RELATED ACCRUALS FOR INTEREST AND PENALTIES FOR UNCERTAIN INCOME TAX POSITIONS AT DECEMBER 31, 2014. THE ORGANIZATION IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS.

THE ORGANIZATION'S POLICY IS TO CLASSIFY INCOME TAX RELATED INTEREST AND PENALTIES IN INTEREST EXPENSE AND OTHER EXPENSES, RESPECTIVELY.

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

LEARNING FOR LIFE LINCOLN CHAPTER

Employer identification number

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RESPECT, RESPONSIBILITY, COURAGE, SELF-RELIANCE AND KINDRED CHARACTER
TRAITS. BY PROVIDING PROGRAMS THAT ARE DESIGNED TO SUPPORT SCHOOLS AND
OTHER YOUTH-SERVING ORGANIZATIONS IN THEIR EFFORTS FOR PREPARING YOUTH
TO SUCCESSFULLY HANDLE THE COMPLEXITIES OF TODAY'S SOCIETY, ENHANCING
THEIR SELF-CONFIDENCE, MOTIVATION AND SELF-WORTH, HELPING THEM DEVELOP
SOCIAL AND LIFE SKILLS, ASSISTING THEM IN CHARACTER DEVELOPMENT, AND
CAREER EDUCATION.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

IN THEIR EFFORTS FOR PREPARING YOUTH TO SUCCESSFULLY HANDLE THE
COMPLEXITIES OF TODAY'S SOCIETY, ENHANCING THEIR SELF-CONFIDENCE,
MOTIVATION AND SELF-WORTH, HELPING THEM DEVELOP SOCIAL AND LIFE SKILLS,
ASSISTING THEM IN CHARACTER DEVELOPMENT, AND CAREER EDUCATION

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

SINCE THIS IS A FIRST YEAR FILING ALL OF THE PROGRAM SERVICES ARE NEW.
THE CORPORATION PROVIDED AFTER SCHOOL TUTORING AND LIFE SKILL
DEVELOPMENT PROGRAMS IN TWO COMMUNITY CENTERS, PROVIDED CURRICULUM AND
TRAINING SUPPORT FOR SPECIAL EDUCATION TEACHERS IN PUBLIC AND PRIVATE
SCHOOLS IN 11 DIFFERENT COUNTIES, PROVIDED OUTDOOR DAY CAMP ACTIVITIES
TO STUDENTS IN THOSE SCHOOLS, AND PROVIDED CURRICULUM, TRAINING AND
SUPPORT FOR CAREER EXPLORING PROGRAMS SPONSORED BY A VARIETY OF
GOVERNMENTAL, PUBLIC SAFETY, AND HEALTH CARE ORGANIZATIONS ACROSS A 64
COUNTY AREA.

Name of the organization

LEARNING FOR LIFE LINCOLN CHAPTER

En

umber

FORM 990, PART VI, SECTION B, LINE 11:

THE EXECUTIVE COMMITTEE OF THE BOARD REVIEWS THE FORM 990 BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

THE WRITTEN CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO ALL NEW BOARD MEMBERS AND ALL SERVICE PROVIDERS. THE EXECUTIVE COMMITTEE REVIEWS CONTRACTS AND OTHER ARRANGEMENTS TO MAKE SURE THE POLICY IS FOLLOWED.

FORM 990, PART VI, SECTION B, LINE 15A:

OFFICERS OF THE ENTITY ARE NOT COMPENSATED.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE FOR INSPECTION AT THE ENTITY'S OFFICE.

FORM 990 PART IX LINE 24A

STAFF ARE PAID THROUGH A COMMON PAYMASTER ARRANGEMENT AND THE COSTS ALLOCATED TO THE ORGANIZATION.

FORM 990 PART XII LINE 2C

SINCE THIS IS THE FIRST YEAR FOR THIS ENTITY THE PROCESS FOR OVERSIGHT OF THE AUDIT HAS NOT CHANGED. THE BOARD SELECTS THE AUDITOR AND REVIEWS THE AUDITOR'S REPORTS AND LETTERS.

LEARNING FOR LIFE, LINCOLN CHAPTER INC.

FINANCIAL STATEMENTS

EIGHT MONTHS ENDED DECEMBER 31, 2014

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COMPTON, KOTTKE & ASSOCIATES, P.S.C.

CERTIFIED PUBLIC ACCOUNTANTS

SINCE 1919

INDEPENDENT AUDITORS' REPORT

Board of Directors
Learning for Life, Lincoln Chapter Inc.

We have audited the accompanying financial statements of Learning for Life, Lincoln Chapter Inc., which comprise the statement of financial position as of December 31, 2014, and the related statements of activities and cash flows for the eight months then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

C. DOUGLAS KOTTKE, CPA
W. ALLEN PRIEST, CPA
R. LAMARR MOORE, CPA

EMMETT W. KOTTKE, CPA
(1918-2007)

E.ON US Center
220 West Main Street; Suite 2200
Louisville, KY 40202
www.comptonkottke.com

TELEPHONE 502-587-8851 FACSIMILE 502-587-8855

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AMERICAN INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS
KY. SOCIETY OF CERTIFIED PUBLIC
ACCOUNTANTS

INPACT AMERICAS INC
WITH AFFILIATES WORLDWIDE

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Learning for Life, Lincoln Chapter Inc. as of December 31, 2014, and the changes in its net assets and its cash flows for the eight months then ended in accordance with accounting principles generally accepted in the United States of America.

Compton, Kottke & Associates, P.C.

Louisville, KY
July 8, 2015

**LEARNING FOR LIFE, LINCOLN CHAPTER INC.
STATEMENT OF ASSETS, LIABILITIES AND NET ASSETS
DECEMBER 31, 2014**

ASSETS

CURRENT ASSETS	
Cash and cash equivalents	\$ 80,026
Accounts receivable:	
Pledges	<u>96,006</u>
TOTAL ASSETS	<u>\$ 176,032</u>

LIABILITIES AND NET ASSETS

CURRENT LIABILITIES	
Accounts payable	<u>124,116</u>
NET ASSETS	
Unrestricted	(42,090)
Temporarily restricted	<u>94,006</u>
TOTAL NET ASSETS	<u>51,916</u>
TOTAL LIABILITIES AND NET ASSETS	<u>\$ 176,032</u>

The accompanying notes are an integral part of these financial statements.

LEARNING FOR LIFE, LINCOLN CHAPTER INC.
STATEMENT OF ACTIVITIES
FOR THE EIGHT MONTHS ENDED DECEMBER 31, 2014

	<u>Unrestricted</u>	<u>Temporarily restricted</u>	<u>Total</u>
REVENUES, GAINS AND OTHER SUPPORT			
Support from the public:			
Pledges and contributions	111,878	94,006	\$ 205,884
Total public support	<u>111,878</u>	<u>94,006</u>	<u>205,884</u>
Other revenue:			
In-kind contributions	-	-	-
Activity fees	16,571	-	16,571
Total other revenue	<u>16,571</u>	<u>-</u>	<u>16,571</u>
Total revenue, gains and other support	128,449	94,006	222,455
NET ASSET RESTRICTION TRANSFERS			
Revenue released from restriction	<u>-</u>	<u>-</u>	<u>-</u>
Total revenue	<u>\$ 128,449</u>	<u>\$ 94,006</u>	<u>\$ 222,455</u>

The accompanying notes are an integral part of these financial statements.

**LEARNING FOR LIFE, LINCOLN CHAPTER INC.
STATEMENT OF ACTIVITIES (CONTINUED)
FOR THE EIGHT MONTHS ENDED DECEMBER 31, 2014**

	<u>Unrestricted</u>	<u>Temporarily restricted</u>	<u>Total</u>
Expenses			
Program services:			
Character Education and Champions Initiative	\$ 73,083	\$ -	\$ 73,083
NOVA Initiative	22,848	-	22,848
Exploring Initiative	15,930	-	15,930
Total program services	<u>111,860</u>	<u>-</u>	<u>111,860</u>
Supporting services:			
Management and general	37,844	-	37,844
Fundraising	20,835	-	20,835
Total supporting services	<u>58,679</u>	<u>-</u>	<u>58,679</u>
Total program and supporting services expenses	<u>170,539</u>	<u>-</u>	<u>170,539</u>
CHANGE IN NET ASSETS	(42,090)	94,006	51,916
NET ASSETS, beginning of period	<u>-</u>	<u>-</u>	<u>-</u>
NET ASSETS, end of period	<u>\$ (42,090)</u>	<u>\$ 94,006</u>	<u>\$ 51,916</u>

The accompanying notes are an integral part of these financial statements.

**LEARNING FOR LIFE, LINCOLN CHAPTER INC.
STATEMENT OF CASH FLOWS
FOR THE EIGHT MONTHS ENDED DECEMBER 31, 2014**

CASH FLOWS FROM OPERATING ACTIVITIES

Change in net assets	\$ 51,916
Adjustments to reconcile change in net assets to net cash provided by operating activities:	
(Increase) in assets:	
Pledges receivable	(96,006)
Increase in liabilities:	
Accounts payable	<u>124,116</u>
 CASH PROVIDED BY OPERATING ACTIVITIES	 <u>80,026</u>
 NET INCREASE IN CASH	 80,026
 CASH AT BEGINNING OF PERIOD	 <u>-</u>
 CASH AT END OF PERIOD	 <u><u>\$ 80,026</u></u>

The accompanying notes are an integral part of these financial statements.

**LEARNING FOR LIFE, LINCOLN CHAPTER INC.
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE EIGHT MONTHS ENDED DECEMBER 31, 2014**

	Program Services				Supporting Services			Total
	Character Education & Champions Initiative	NOVA Initiative	Exploring Initiative	Program Services	Management and General	Fundraising	Supporting Services	
Salaries	\$ 32,119	\$ 8,030	\$ -	\$ 40,149	\$ 24,089	\$ 16,060	\$ 40,149	\$ 80,298
Payroll taxes	2,537	634	-	3,171	1,903	1,268	3,171	6,342
Employee benefits	6,246	1,561	-	7,807	4,684	3,123	7,807	15,614
Occupancy	4,102	-	-	4,102	-	-	-	4,102
Insurance	998	-	-	998	3,998	-	3,998	4,996
Office expense	-	-	-	-	668	-	668	668
Supplies	2,786	-	15,930	18,716	-	-	-	18,716
Equipment maintenance	359	-	-	359	-	-	-	359
Printing	1,349	-	-	1,349	-	-	-	1,349
Postage and shipping	5	-	-	5	-	-	-	5
Travel	4,428	-	-	4,428	-	-	-	4,428
Professional fees	-	-	-	-	2,502	-	2,502	2,502
Fee assistance	18,154	12,609	-	30,763	-	-	-	30,763
Miscellaneous expenses	-	13	-	13	-	384	384	397
	<u>\$ 73,083</u>	<u>\$ 22,848</u>	<u>\$ 15,930</u>	<u>\$111,860</u>	<u>\$ 37,844</u>	<u>\$ 20,835</u>	<u>\$ 58,679</u>	<u>\$170,539</u>

The accompanying notes are an integral part of these financial statements.

**LEARNING FOR LIFE LINCOLN CHAPTER INC.
NOTES TO FINANCIAL STATEMENTS
FOR THE EIGHT MONTHS ENDED DECEMBER 31, 2014**

NOTE 1 – NATURE OF OPERATION

Learning for Life, Lincoln Chapter Inc. (the Organization) began operations on April 28, 2014. The Organization promotes the ability of young people to do things for themselves and others by teaching them respect, responsibility, courage, self-reliance and kindred character traits. It accomplishes this mission this by providing programs that are designed to support schools and other youth-serving organizations in their efforts for preparing youth to successfully handle the complexities of today's society, enhancing their self-confidence, motivation and self-worth, helping them develop social and life skills, assisting them in character development and career education.

The main programs of the Organization are grouped into several initiatives. The Character Education Curriculum and Champions Initiative provides curriculum and programming support to schools for in school character and life skills training. This initiative also provides additional support for special needs students. It also supports afterschool programs with the same focus. The NOVA Initiative provides afterschool tutoring and training in life and character skills for students in at-risk neighborhoods through partnerships with local community centers and schools. The Exploring Initiative provides support for organizations and schools to present programs on career awareness as well as life and character skills.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of accounting: The accompanying financial statements include the Organization's net assets and results of operations. These financial statements have been prepared on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America.

Contributions: Contributions are recognized when the donor makes an unconditional promise to give to the Organization. All contributions are considered to be available for unrestricted use unless specifically restricted by the donor. Amounts received that are designated for future periods or restricted by the donor for specific purposes are reported as temporarily restricted or permanently restricted support that increases these net asset classes. However, if a restriction is fulfilled in the same time period in which the contribution is received, the Organization reports the support as unrestricted. The Organization uses the allowance method to determine uncollectible promises receivable. The allowance is based on management's analysis of specific promise made.

See Independent Auditor's Report

**LEARNING FOR LIFE, LINCOLN CHAPTER INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
FOR THE EIGHT MONTHS ENDED DECEMBER 31, 2014**

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Cash and cash equivalents: For purposes of the statement of cash flows, the Organization considers undesignated cash and investments with original maturities of three months or less to be cash equivalents.

Compensated absences: The Organization has not accrued compensated absences because the amount cannot be reasonably estimated.

Management and general expenses: Management and general expenses are defined as those costs of the direction of overall affairs of the Organization through executive, financial and administrative services.

Fundraising expenses: Fundraising expenses are defined as those costs of programs to secure charitable support for programs and supporting services.

Advertising costs: Advertising costs are charged to operations when the advertising takes place. There were no advertising expenses for the period presented.

Estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates. Management believes that these estimates and assumptions provide a reasonable basis for the fair presentation of the financial statements.

Functional allocation of expenses: The costs of providing the various programs and other activities have been summarized on a functional basis. Functional expenses were computed using the time allocation method provided by management.

See Independent Auditor's Report

**LEARNING FOR LIFE, LINCOLN CHAPTER INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
FOR THE EIGHT MONTHS ENDED DECEMBER 31, 2014**

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Exemption from income taxes: The Organization is a not-for-profit organization that is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code and classified by the Internal Revenue Service as other than a private foundation. The Organization is subject to a tax on income from any unrelated business.

The Organization has analyzed tax positions taken for filing with the Internal Revenue Service and all state jurisdictions where it operates. The Organization believes that income tax filing positions will be sustained upon examination and does not anticipate any adjustments that would result in a material adverse effect on the Organization's financial condition, results of operations or cash flows. Accordingly, the Organization has not recorded any reserves, or related accruals for interest and penalties for uncertain income tax positions at December 31, 2014. The Organization is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 3 – PLEDGES RECEIVABLE

Management estimates that all pledges receivable are collectible, therefore no provision has been made for uncollectible pledges.

NOTE 4 – SUBSEQUENT EVENTS

Management has evaluated subsequent events for recognition or disclosure through July 8, 2015, which is the date the financial statements were available to be issued.

See Independent Auditor's Report

Learning for Life Lincoln Chapter Incorporated

General Information

Organization Number	0885819
Name	Learning for Life Lincoln Chapter Incorporated
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	4/28/2014 11:12:11 AM
Organization Date	4/28/2014 11:12:11 AM
Last Annual Report	2/4/2016
Principal Office	PO BOX 43368 LOUISVILLE, KY 40253-0368
Registered Agent	Clint Scharff 12001 Sycamore Stations Place Suite A Louisville, KY 40299

Current Officers

Chairman	Kevin Etter
CEO	Barry Oxley
Treasurer	John Combs
Director	Kevin Etter
Director	Barry Oxley
Director	John Combs

Individuals / Entities listed at time of formation

Director	BARRY G OXLEY
Director	KEVIN ETTER
Director	PAT HARGADON
Incorporator	BARRY OXLEY

Images available online

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

Annual Report	2/4/2016	1 page	PDF	
Annual Report	4/21/2015	1 page	PDF	
Amendment	4/3/2015	2 pages	tiff	PDF
Principal Office Address Change	8/6/2014 8:58:56 AM	1 page	PDF	
Articles of Incorporation	4/28/2014 11:12:12 AM	1 page	PDF	

Assumed Names**Activity History**

Filing	File Date	Effective Date	Org. Referenced
Annual report	2/4/2016 9:02:09 AM	2/4/2016 9:02:09 AM	
Annual report	4/21/2015 11:30:39 AM	4/21/2015 11:30:39 AM	
Amendment - Miscellaneous amendments	4/3/2015 10:36:50 AM	4/3/2015	
Principal office change	8/6/2014 8:58:56 AM	8/6/2014 8:58:56 AM	
Add	4/28/2014 11:12:11 AM	4/28/2014 11:12:11 AM	

Microfilmed Images