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

Applicant/Program: Louisville Nature Center	
Executive Summary of Request:	
The Louisville Nature Center has reques with their annual operating expenses. In between September 2015 and May of 20	sted \$14,460 of NDF funding from Metro Council to help addition to established programs offered at LNC, 016, they had 75 visits by school groups with 3,069 il District served. 85% of these school children received
the discounted rate. According to Kathy increase in participation of many more subut more funding is required to meet the request. In addition to the school activities 2016, LNC hosted 204 activities and 4,4	Morris, Director, LNC has had a very significant chool children. She sees this as a very positive thing, need. She has supplied documentation to support this es mentioned above, between April of 2015 and April of participants. They derive all of their funding from ers per year and they have 300 committed volunteers.
Is this program/project a fundraiser?	☐ Yes ☑ No
Is this applicant a faith based organization? Does this application include funding for sub-	☐ Yes ✓ No grantee(s)? ☐ Yes ✓ No
Does this application include funding for sub-	Brance(2): Tes A 140
within Metro Council guidelines and request a	evelopment Fund Application and have found it complete and approval of funding in the following amount(s). I have read the perfurthered by the funds requested and I agree that the public the disclosure section below, if required. \$1,000 Amount Date
Primary Sponsor Disclosure List below any personal or business relationsh organization, its volunteers, its employees or relationships.	ip you, your family or your legislative assistant have with this nembers of its board of directors.
Annuared by	
Approved by:	
Appropriations Committee Chairman	Date
Clerk's Office Only:	
Request Amount:	Committee Amended Appropriation:
Original Appropriation:	Council Amended Appropriation:

1| Page Effective July 2015 Applicant/Program: Louisville Nature Center/Annual Operating Expenses

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

District #	Council Member Signature	Amount	Date	
District #	Council Member Signature	Amount	Date	
District #	Council Member Signature	Amount	Date	
District #	Council Member Signature	Amount	Date	_
District #	Council Member Signature	Amount	Date	
District #	Council Member Signature	Amount	Date	
District #	Council Member Signature	Amount	Date	

NEIGHBORHOOD DEVELOPMENT FUND APPLICATION CHECKLIST Legal Name of Applicant Organization: Louisville Nature Center Program Name and Request Amount: Annual Operating Expenses \$14,460 Yes/No/NA Yes Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding? Is the funding proposed by Council Member(s) less than or equal to the request amount? Yes Is the proposed public purpose of the program viable and well-documented? Yes Will all of the funding go to programs specific to Louisville/Jefferson County? Yes Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet? Yes Has prior Metro Funds committed/granted been disclosed? Yes Is the application properly signed and dated by authorized signatory? Yes Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included? Yes If Metro funding is for a separate taxing district is the funding appropriated for a program outside No the legal responsibility of that taxing district? Is the entity in good standing with: Kentucky Secretary of State? Louisville Metro Revenue Commission? Yes Louisville Metro Government? Internal Revenue Service? • Louisville Metro Human Relations Commission? Is the current Fiscal Year Budget included? Yes Is the entity's board member list (with term length/term limits) included? Yes Is recommended funding less than 33% of total agency operating budget? Yes Does the application budget reflect only the revenue and expenses of the project/program? Yes Is the cost estimate(s) from proposed vendor (if request is for capital expense) included? N/A Is the most recent annual audit (if required by organization) included? No Is a copy of Signed Lease (if rent costs are requested) included? N/A Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is N/A faith-based) included? Are the Articles of Incorporation of the Agency included? Yes Is the IRS Form W-9 included? Yes Is the IRS Form 990 included? Yes Are the evaluation forms (if program participants are given evaluation forms) included? N/A Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if Yes required to do so)? Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant No met the BBB Charity Review Standards?

Date: 8/30/2016

Prepared by:



SECTION 1 - APPLICANT INFORMATION					
Legal Name of Applicant Organization: (as listed on: http://www.sos.ky.gov/business/records) Louisville Nature Center					
The state of the s					
Main Office Street & Mailing Address: 3745 Illinois Avenue, Louisville, KY 40213					
Website: www.louisvi	llenature	center.o	rg		
Applicant Contact:	Kathy	Morris		Title:	Director
Phone:	502-29	7-5096		Email:	kmorris@louisvillenaturecenter.org
Financial Contact:	Ellie B	lock		Title:	Bookkeeper
Phone:	502-4	58-1328		Email:	eblock@louisvillenaturecenter.org
Organization's Repre	sentative	who att	ended NDF Trai	ning: Kathy Morris	
GEO	RAPHICA	L AREA(S) WHERE PROC	GRAM ACTIVITIES A	RE (WILL BE) PROVIDED
Program Facility Loca	tion(s):	3745 I	Ilinois Avenue,	Louisville, KY 40	213
Council District(s):		10		Zip Code(s):	LNC serves all zip codes in Metro Louisville
SECTION 2 - PROGRAM REQUEST & FINANCIAL INFORMATION					
PROGRAM/PROJECT	NAME: N	ature Ed	ucation		
Total Request: (\$)	14,460		Total Metro	Award (this prograi	n) in previous year: (\$) 3,000
Purpose of Request (check all t	hat appl	y):		
Operating F	unds (ger	erally ca	nnot exceed 339	% of agency's total	operating budget)
	-			•	qualified individuals
Capital Proje	ect of the	organiza	ition (equipmen	t, furnishing, buildi	ng, etc)
The Following are Re	quired At	tachmen	ts:	,	
IRS Exempt Status De		n Letter		Signed lease if	rent costs are being requested
■ Current Year Projected Budget IRS Form W9					
List of Board of Directors (include term & term limits Evaluation forms if used in the proposed program				ns if used in the proposed program	
Current financial statement Annual audit (if required by organization)					
Articles of Incorporat	Most recent IRS Form 990 or 1120-H				. ,
! = '	Cost estimates from proposed vendor if request is for				
capital expense					
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants,					
					eived through Metro Federal Grants, elopment Funds). Attach additional
sheet if necessary.	01 1110110	Council	repropriation (i	reignoomlood Deve	nopment rands). Attach additional
Source	Metro Co	uncil		Amount: (\$)	\$2,000
Source:				Amount (\$)	
Source				Amount. (\$)	
Has the applicant cont	tacted the	BBB Cha	arity Review for	participation?	Yes No
Has the applicant met	the BBB	Charity R	eview Standard	s? 🗌 Yes 🔳 No	

Page 1 Effective April 2014 Applicant's Initials ____



SECTION 3 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

Louisville Nature Center's (LNC)vision is to be the model steward and guardian of 70 acres, including Beargrass Creek State Nature Preserve. The urban forest, along with the Louisville Nature Center education facility, will be the community's primary destination for discovering that nature begins in our own backyard where people and nature coexist.

Louisville Nature Center's values are:

- outdoor education is a means for connecting people to nature
- childhood outdoor education, presented as an extension of formal school programs, raises the status of nature awareness and promotes a lifelong quest for learning, discovery and stewardship of the natural world
- care of our natural resources creates a healthier planet
- every person can benefit mentally, physically, spiritually and emotionally from spending time in nature

Louisville Nature Center's mission is to provide nature education and encourage stewardship in an urban forest.

LNC follows its vision, values and mission in the following ways:

-Offers nature education programs to thousands of students from Jefferson County Public Schools, Archdiocese of Louisville, independent and home schools in the Metro Louisville area. All students from Title I schools attend programs at reduced rates or no charge and a portion of these students' bus fees are paid thanks to generous LNC supporters. A large portion of students come from under served schools and from minority groups. LNC holds summer camps and nature themed birthday parties throughout the year.

LNC volunteers contribute thousands of hours assisting with education programs, gardening, grounds and office work. Volunteers include students from Murray State, Bellarmine University and University of Louisville who receive college credit hours for internships. Senior citizens as well as teens, also learn the value of giving back to the community. Adults with disabilities learn basic garden skills by working in the sensory garden that is designed for individuals with mental and physical disabilities. LNC participates in the annual Mayor's Give a Day program.

LNC manages large volunteer groups who complete forest restoration work in Beargrass Creek State Nature Preserve, the 41 acre urban forest located adjacent to LNC. This includes management of invasive species, trail work and periodic emergency repair work as needed.

The nature center provides Professional Development classes during the summer months for teachers from the Archdiocese of Louisville and holds adult education programs throughout the year designed to promote proper management of natural resources and to explore water runoff solutions.

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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.):

Louisville Nature Center (LNC) is centrally located for the convenience of residents in all areas of the city. Membership and program fees are affordable to ensure that all members of the community have access to LNC's services. The grounds, bird blind and preserve are open FREE to the public. This grant request is for operating funds to support the following programs and services offered at LNC:

- -Free and/or reduced priced rentals for local non profit community groups
- -Outdoor nature education programs for public and private schools
- -Environmental education programs for adults
- -Upkeep of LNC grounds with demonstration gardens raised beds, rain gardens, butterfly garden, native plant gardens and an indoor bird blind
- -Site management for the 41 acre Beargrass Creek State Nature Preserve trail maintenance, invasive species removal, monitoring of activities within the preserve and educate the public on the value of urban forests
- -Opportunities for volunteer service work for all ages from teen to senior citizen
- -Opportunities for interns to earn college credit for hours worked
- -Upkeep of an indoor visitor center with living native species
- -Last year and this year, LNC has been contracted by Olmsted Conservancy to develop and deliver summer camps off site, at Chickasaw Park. The camp is offered free to qualified applicants. Qualification is dependent upon a written note from the youth application explaining why he/she wishes to attend camp and a recommendation letter from an adult other than parents or grandparents.
- B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s): Funding will be used to help pay for staff salaries, insurance premiums, utilities and telephone, program, office, grounds and facility supplies, marketing expenses, advertising and repair fees. \$3,000 of the grant request will be allocated as client assistance to cover school bus fees. A portion of funds will be used for development of new and/or revised programs to address literacy and JCPS next generation science guidelines.

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akm Applicant's Initials



C: If this request is a fundraiser, please detail how the proceeds will be spent: NA
D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:
Effective October 24, 2013, reimbursements should not be made unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):
 Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan
identified in this application.
■ The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:
✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.
The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.
These funds are requested for programs and expenses that will be incurred between July 1, 2016 to June 30, 2017

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Applicant's Initials _____

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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: Adults and youths receive educational benefits by attending LNC nature programs. Students gain access to outdoor, hands-on education that compliments the approved JCPS school core content guidelines. Visitors benefit by visiting LNC's visitor center, grounds and nature preserve and viewing the local flora and fauna and demonstration gardens. The community has the opportunity to purchase earth friendly rain barrels at a discount rate. The community has access to a safe, well maintained 41 acre state nature preserve that offers opportunities for nature observation and exercise while hiking the trails. Individuals from youths to senior citizens have opportunities to exercise and learn through volunteer activities at LNC. Organizations and students earn credit for service hours worked at LNC, and interns earn college credit for time spent working at LNC. Individuals with physical or mental challenges have access to the sensory garden which is wheelchair accessible, and there are volunteer opportunities for these individuals in the raised beds.

LNC uses excel spreadsheets to track all activities. The spreadsheet tracks number of activities by type, number of attendees, number of under served schools attending nature education programs, age of students, number of free and reduced cost rentals for community non profits groups, hours spent on forest restoration activities and dollars donated to schools by LNC for bus and program fees. LNC is unable to track the hundreds of additional individuals who use the preserve each year and walk the grounds when the facility is closed.

- 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.
- -Jefferson County Master Gardener Association receives free rental for their member activities and community programs in exchange for maintaining a portion of the LNC grounds.
- -Kentucky Herpetelogical Society receives reduced priced rentals in exchange for advising LNC on care of its on site snake.
- -LNC is the site manager for Beargrass Creek State Nature Preserve. In exchange, LNC uses the preserve as its outdoor classroom for nature programs.
- -LNC offer volunteer opportunities to UAW who build rain barrels for LNC and volunteer opportunities for Dreams with Wings, adults with intellectual and developmental disabilities, to plant raised beds in the LNC garden.
- -LNC is a volunteer site every year for the Mayor's Give a Day week. Organizations and individuals from around the city have the opportunity to volunteer their time and talent during this week. LNC has also been a host site for large youth volunteer groups such as FFA and national faith based organizations that visit the city during their youth volunteer weeks.
- -LNC partners with U of L and Bellarmine University to offer internships in exchange for college credits toward degree programs.
- -Metro Council and MSD receive free use of LNC's meeting room for private and community meetings

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SECTION 5 - PROGRAM/PROJECT BUDGET SUMMARY

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

	Column 1	Column 2	Column (1+2)=3
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits	\$8,700	\$12,000	\$20,700
B: Rent/Utilities	\$550	\$550	\$1,100
C: Office Supplies	\$720	\$1,335	\$2,055
D: Telephone	\$290	\$290	\$580
E: In-town Travel	0	0	0
F: Client Assistance (Attach Detailed List)	\$3,000	0	\$3,000
G: Professional Service Contracts	0	0	0
H: Program Materials	\$200	\$800	\$1,000
I: Community Events & Festivals (Attach Detail List)	0	0	0
J: Machinery & Equipment	0	0	0
K: Capital Project	0	0	0
L: Other Expenses (Attach Detail List)	\$1,000	\$2,000	\$3,000
*TOTAL PROGRAM/PROJECT FUNDS	\$14,460	\$16,975	\$31,435
% of Program Budget	46 %	54 %	100%

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

List fulldling sources for total program/project costs in Column 2, Non-Me	
Other State, Federal or Local Government	0
United Way	0
Private Contributions (do not include individual donor names)	\$9,975
Fees Collected from Program Participants	\$7,000
Other (please specify)	
Total Revenue for Columns 2 Expenses	** \$16,975

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

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



Value of Commibution

Method of Valuation

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

Volunteer education assistants	\$1,800	20 programs x 3 volunteers x 3 hours x \$10/hr
Interns - program materials & research	\$1,800	2 interns x 100 hours x \$9/hr
Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution &Other In Kind)	\$3,600	
TED INDIVIDUALLY, BUT GROUPED TOGETHER SON PER WEEK Concrete Start Date: July 1, 201		OTING HOW MANY HOURS PER
es your Agency anticipate a significant increase		
lget projected for next fiscal year? NO	YES	from the current fiscal year to the
lget projected for next fiscal year? NO		from the current fiscal year to the
		from the current fiscal year to t
		from the current fiscal year to t
		from the current fiscal year to the

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SECTION 6 - CERTIFICATIONS & ASSURANCES

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

Standard Assurances

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- Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of
 expenditure is subject to Kentucky's open records law.
- Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using
 their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal
 gain.
- 3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
- 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.
- Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
- Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal
 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

- 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.

I certify under the penalty of law the infe	ormation in this application (in	icluding, without limitation	n, "Certificatio	ons and Assurances") is
accurate to the best of my knowledge. I	am aware my organization wi	ill not be eligible for fundir	g if investigat	tion at any time shows
falsification. If falsification is shown after	r funding has been approved,	any allocations already rec	eived and exp	pended are subject to be
repaid. I further certify that I am legally application.	authorized to sign this applica	tion for the applying organ	nization and h	ave initialed each page of the
Signature of Legal Signatory:	Kathy Morris	may our	Date:	6-6-16

SECTION 7 - CERTIFICATIONS & ASSURANCES

Legal Signatory: (please print): Kathy Morris

Phone: 502-297-5096

Extension: na Email: kmorris@louisvillenaturecenter.org

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AUTOCHAL Kevenue Service

District Director

Date: MAR 26 1992

Louisville Nature Center Inc PO Box 7414 Louisville, KY 40257-0414 Department of the Treasury,

P.O. Box 2508 Gincinnati. OH 45201

Person to Contact: Gordon Schnur Telephone Number: 513-684-3957 Refer Reply to: EP/EO

Employer Identification Number:

Dear Sir or Madam:

This is in response to your request for a copy of your determination.

Our records indicate that by a determination letter issued in March, 1965 your organization was recognized as exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code of 1954. That letter is still in effect.

Based on information subsequently submitted, we classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Code because you are an organization described in section 509(a)(1) and 170(b)(1)(A)(vi).

The classification was based on the assumption that your operations would continue as stated in the application. If your sources of support, or your purposes, character, or method of operations have changed, please let us know so we can consider the effect of the change on your exempt status and foundation status.

As of January 1, 1984, you are liable for taxes under Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more you pay to each of your employees during a calendar year. You are (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any us know.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if the Code.

Louisville Nature Center Inc.

You are required to file Form 990, Return of Organization Exempt from Income Tax, only if your gross receipts each year are normally more than \$25,000. If a return is required, it must be filed by the lith day of the fifth month after the end of your annual accounting period. The law imposes a penalty of \$10 a day, up to a maximum of \$5,000, when a return is filed late, unless there is reasonable cause for the delay.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax you must file an income tax return on Form 990-T. Exempt Organization Business Income Tax Return. In this letter, we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

Because this letter could help resolve any questions about your example status and foundation status, you should keep it in your parmament records.

If you have any questions, you may contact us at the audress or telephone number shown in the heading of this letter.

This is an affirmation letter.

corely yours,

Robert T. Johnson District Director

	Last	First	Business/Professional Associations
President	Christensen	Walt	owner - Backyard Birds
Member	Cotton	Russell	financial advisor - Raymond James Assoc
Member	Dorroh	Helen	member - Jefferson County Master Gardener Assoc
Member	Eason	Perri	professor - University of Louisville - Dept of Biology
Member	Eley	Mark	president - ID&A
Vice Pres	Fitzgerald	Phyllis	retired - active in numerous environmental endeavors
Secretary	Glauber	Pete	attorney - Boehl, Stopher, Graves, LLP
Treasurer	Jolly	Ron	Vice President - Republic Bank
Member	Marconi	Tony	Director - Louisville Metropolitan Sewer District
Member	Machtolff	Ken	retired - Humana Aviation Dept
Member	O'Bryan	Chris	finance - Thornton Oil
Member	Рорр	Kenneth	grounds manager - Calvary Cemetery
Member	Reinhardt	Laura	area manager - Stock Yards Bank

All member perue d minimum, one gran term

Louisville Nature Center Balance Sheet 2014 As of April 30, 2016

9:07 AM 05/11/16 Cash Basis

	Jan 31, 16	Feb 29, 16	Mar 31, 16	Apr 30, 16
ASSETS Current Assets				
Checking/Savings 1000050 · NAPECA checking account	0.00	0.00	20,600.00	17,341.56
100005 · Total SYB Checking 1000052 · SYB Regular Checking 1000051 · SYB Temp. Restricted Checking 100005 · Total SYB Checking - Other	3,511.28 15,343.59 -4,260.68	-2,375.88 15,343.59 -4,260.68	-3,356.58 19,795.99 -4,248.31	6,750.84 19,867.99 -4,388.97
Total 100005 · Total SYB Checking	14,594.19	8,707.03	12,191.10	22,229.86
100002 · SYB -Charitable Gaming Acct 111100 · Petty Cash	60.00	60.00	60.00	60.00
Total Checking/Savings	14,754.19	8,867.03	32,951.10	39,731.42
Other Current Assets 118999 • Invested Cash Accts 180000 • Marketable Securities 119000 • CDs	10,756.04	10,389.66 15,810.23	10,377.94	10,801.26
Total 118999 · Invested Cash Accts	26,566.27	26,199.89	26,188.17	26,611.49
180001 · Unrealized Capital Gain/Loss	169.84	661.28	673.00	249.68
Total Other Current Assets	26,736.11	26,861.17	26,861.17	26,861.17
Total Current Assets	41,490.30	35,728.20	59,812.27	66,592.59
Fixed Assets 190010 · Buildings 15000 · Furniture and Equipment 190030 · Accumulated Depreciation	423,137.67 66,299.58 -201,826.95	423,137.67 66,299.58 -201,826.95	423,137.67 66,299.58 -201,826.95	423,137.67 66,299.58 -201,826.95
Total Fixed Assets	287,610.30	287,610.30	287,610.30	287,610.30
Other Assets 18000* · Marketable Securities 18700 · Security Deposits Asset	0.00	-125.06 395.00	-125.06 395.00	-125.06 395.00
Total Other Assets	395.00	269.94	269.94	269.94
TOTAL ASSETS	329,495.60	323,608.44	347,692.51	354,472.83
LIABILITIES & EQUITY Liabilities Current Liabilities Other Current Liabilities 2110 - Direct Deposit Liabilities	0.00	00.0	-1,764.39	0.00

9:07 AM 05/11/16 Cash Basis

Louisville Nature Center Balance Sheet 2014 As of April 30, 2016

	Jan 31, 16	Feb 29, 16	Mar 31, 16	Apr 30, 16
24000 · Payroll Liabilities	010	25 083	451 14	649.48
24010 · SOC.SecEE	210.36	589.72	451.14	649.48
Z4011 • 000:000:-ER	49.24	137.92	105.53	151.88
24012 Medicale ED	49.24	137.92	105.53	151.88
24013 · Medicale-En	187.00	771.00	293.00	428.00
24000 : Federal trail taxes	20.38	77.46	121.10	46.00
24003 - Fed. Offering: 113.	87.75	352,98	240.41	356.02
24003 - IXI WILL TOX	110.25	413.29	646.14	335.22
24004 KV III Surcharde	7.14	27.10	42.40	21.99
24001 - I of Mary Resident W/H	42.27	203.68	326.65	180.75
24000 - Lou Metro Non-Bee W/H	21.38	52.92	77.37	32.73
24005 - Edumeno Hollings Will	17.78	40.56	24.77	35.91
24005 IIIUIIAIIA WAH TAX 24007 IIN-Clark Co. Tax	7.82	17.84	10.89	15.78
Total 24000 - Pavroll Liabilities	1,021.37	3,412.11	2,896.07	3,055.12
25500 · Sales Tax Pavable	0:00	0.00	-3.96	-10.61
Total Other Current Liabilities	1,021.37	3,412.11	1,127.72	3,044.51
Total Current Liabilities	1,021.37	3,412.11	1,127.72	3,044.51
Total Liabilities	1,021.37	3,412.11	1,127.72	3,044.51
Equity	1 749 36	1.749.36	23.749.36	23,749.36
	25,550.00	25,550.00	25,550.00	25,550.00
	3.345.20	3.345.20	3,345.20	3,345.20
	292.682.67	292,682.67	292,682.67	292,682.67
	5,147.00	-3,130.90	1,237.56	6,101.09
Total Equity	, 328,474.23	320,196.33	346,564.79	351,428.32
TOTAL LIABILITIES & EQUITY	329,495.60	323,608.44	347,692.51	354,472.83

Louisville Nature Center, Inc.

Exempt Organization Income Tax Returns For the year ended December 31, 2015



Department of Treasury Internal Revenue Service Ogden UT 84201

LOUISVILLE NATURE CENTER INC 3745 ILLINOIS AVE LOUISVILLE KY 40213-1071

Notice	CP211A
Tax period	December 31, 2015
Notice date	June 6, 2016
Employer ID number	
To contact us	Phone 1-877-829-5500
	FAX 801-620-5555





220075

Important information about your December 31, 2015 Form 990

We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your December 31, 2015 Form 990.
Your new due date is August 15, 2016.

What you need to do

File your December 31, 2015 Form 990 by August 15, 2016. We encourage you to use electronic filing—the fastest and easiest way to file.

Visit www.irs.gov/charities to learn about approved e-File providers, what types of returns can be filed electronically, and whether you are required to file electronically.

Additional information

- Visit www.irs.gov/cp211a.
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.

Baldwin CPAs, PLLC 943 S 1st Street Louisville, KY 40203 502-584-9793

May 24, 2016

CONFIDENTIAL

Louisville Nature Center, Inc. 3745 Illinois Avenue Louisville, KY 40213

Dear Louisville Nature Center:

We have prepared the following returns from information provided by you without verification or audit.

Short Form of Organization Exempt From Income Tax (Form 990-EZ)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Baldwin CPAs, PLLC

Filing Instructions

Louisville Nature Center, Inc.

Short Form Exempt Organization Tax Return

Taxable Year Ended December 31, 2015

Date Due:

August 15, 2016

Remittance:

None is required. Your Form 990-EZ for the tax year ended 12/31/15 shows no

balance due.

Signature:

You are using a Personal Identification Number (PIN) for signing your return

electronically. Sign the IRS e-file Authorization and mail it as soon as possible

to:

Baldwin CPAs, PLLC 943 S 1st Street Louisville, KY 40203

Other:

Initial and date the copies of the IRS e-file Signature Authorization and the Form

990-EZ. Retain them for your records. If previously signed and returned no

further action is required for Form 8879-EO.

Your return is being filed electronically with the IRS and is not required to be mailed. Mailing a paper copy of your return to the IRS will delay the processing

of your return.

IRS e-file Signature Authorization for an Exempt Organization

OMB	No.	1545-1878	

For calendar year 2015, or fiscal year beginning _______, 2015, and ending ______, 20

Department of the Treasury	▶ Do not send to the IRS. Ker ▶ Information about Form 8879-EO and its instr	ep for your records.	ov/form8879eg.	2015
Internal Revenue Service Name of exempt organization	F Intornation about 1 orni 0073-E5 and its mate	Bottonio to at viii wiitaige		
I	ouisville Nature Center, Inc.			
	athy Morris			
	irector			
Part 1 Type of F	eturn and Return Information (Whole Dollars C	Only)		
	or which you are using this Form 8879-EO and enter the appl		the return. If you	
	3a, 4a, or 5a, below, and the amount on that line for the retur			
	b, whichever is applicable, blank (do not enter -0-). But, if you			
the applicable line below. Do	not complete more than 1 line in Part I.			
1a Form 990 check here 🕨			1ь	149,104
2a Form 990-EZ check here				
3a Form 1120-POL check h				
4a Form 990-PF check here	 ,			
5a Form 8868 check here	b Balance Due (Form 8868, Part I, line 3c or Part I	I, line 8c)	^{5b} —	
Part II Declarati	on and Signature Authorization of Officer			
	leclare that I am an officer of the above organization and that	I have examined a copy or	f the	
organization's 2015 electron	c return and accompanying schedules and statements and to	the best of my knowledge	and belief, they	
	te. I further declare that the amount in Part I above is the amo			
organization's electronic retu	m. I consent to allow my intermediate service provider, transm	itter, or electronic return o	originator (ERO)	
to send the organization's re	um to the IRS and to receive from the IRS (a) an acknowledg son for any delay in processing the retum or refund, and (c) th	ament of receipt or reason e date of any refund, if an	ntor rejection of olicable !	
authorize the U.S. Treasury	and its designated Financial Agent to initiate an electronic fund	is withdrawal (direct debit)	entry to the	
financial institution account i	dicated in the tax preparation software for payment of the org	anization's federal taxes o	wed on this	
retum, and the financial insti	ution to debit the entry to this account. To revoke a payment,	must contact the U.S. Tre	easury Financial	
	later than 2 business days prior to the payment (settlement) d			
	the electronic payment of taxes to receive confidential informations. I have selected a personal identification number (PI			
	cable, the organization's consent to electronic funds withdrawa			
Officer's PIN: check one	-			
X lauthorize Ba.	dwin CPAs, PLLC	to enter my PIN		my signature
	ERO firm name		Enter five numbers, by do not enter all zeros	ат
	January DD45 also transically filed seture 161 borro indicated wi	thin this coturn that a conv		
on the organization	tax year 2015 electronically filed return. If I have indicated wite agency(ies) regulating charities as part of the IRS Fed/Stat	e program. I also authorize	the aforementioned	
	I on the return's disclosure consent screen.	, p5,		
_				
As an officer of the	rganization, I will enter my PIN as my signature on the organi	zation's tax year 2015 elec	stronically filed return.	
If I have indicated w	thin this return that a copy of the return is being filed with a str ogram, I will enter my PIN on the return's disclosure consent	ite agency(les) regulating screen.	chanties as part of	
and into i curotate p	ogiani, i viii onio my marchine rotani onio i oni on		, 05/24/16	
Officer's signature	ion and Authentication	Date	, 05/24/10	
***************************************	six-digit electronic filing identification			
	our five-digit self-selected PIN.		_	
			C	do not enter all zeros
I certify that the above nume	ric entry is my PIN, which is my signature on the 2015 electro	nically filed return for the o	rganization	
indicated above. I confirm th	at I am submitting this return in accordance with the requirement	ents of Pub. 4163, Modern	nized e-File (MeF)	
Information for Authorized II	S e-file Providers for Business Returns.			
ERO's signature Ba:	bara Lasky	Date >	05/24/16	
	ERO Must Retain This Form-	See Instructions		
	Do Not Submit This Form To the IRS U		Do So	
For Paperwork Reduction	Act Notice, see back of form.			Form 8879-EO (2015)

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

OMB No. 1545-1150 2015

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection Information about Form 990-EZ and its instructions is at www.irs.gov/form990. For the 2015 calendar year, or tax year beginning , and ending Check if applicable: C Name of organization D Employer identification number Address change Name change Louisville Nature Center, Inc. Number and street (or P.O. box, if mail is not delivered to street address) Initial return E Telephone number Final return/terminated 3745 Illinois Avenue 502-458-1328 Amended return City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Application pending Louisville Number > Cash X Accrual Other (specify) ▶ Accounting Method: H Check ► | if the organization is not Website: ▶ www.louisvillenaturecenter.org required to attach Schedule B Tax-exempt status (check only one) — X 501(c)(3) 501(c) () 4 (insert no.) 4947(a)(1) or 527 (Form 990, 990-EZ, or 990-PF). Form of organization: X Corporation Trust Association Other Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 158,502 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received 63,347 Program service revenue including government fees and contracts 55,193 Membership dues and assessments 3 3 4 Investment income 87 Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 28,461 Less: direct expenses from gaming and fundraising events Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 19,063 7a Gross sales of inventory, less returns and allowances Less: cost of goods sold 7b Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) Other revenue (describe in Schedule O) 11,414 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 149,104 Grants and similar amounts paid (list in Schedule O) Benefits paid to or for members 11 11 Salaries, other compensation, and employee benefits 12 77,736 Professional fees and other payments to independent contractors 13 40,517 13 Occupancy, rent, utilities, and maintenance 5,758 Printing, publications, postage, and shipping 4,901 15 Other expenses (describe in Schedule O) 46,132 Total expenses. Add lines 10 through 16 17 175,044 17 Excess or (deficit) for the year (Subtract line 17 from line 9) -25,940Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 309,399 19 Other changes in net assets or fund balances (explain in Schedule O) 20

Net assets or fund balances at end of year. Combine lines 18 through 20 For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2015)

283,459

For	m 990-EZ (2015) Louisville Nature Cer	iter, Inc.				Page 2
	Part II Balance Sheets (see the instructions for P					
******	Check if the organization used Schedule O to		question in this Part	11		X
				ginning of year		(B) End of year
22	Cash, savings, and investments			52,926	22	37,241
23	Land and buildings			262,781	23	247,743
24	Other assets (describe in Schedule O)			395		395
25	Total assets	*****		316,102		285,379
26	Total liabilities (describe in Schedule O)			6,703		1,920
27	Net assets or fund balances (line 27 of column (B) must agree	e with line 21)		309,399		283,459
	Part III Statement of Program Service Accomp				21	203,433
٠۵	Check if the organization used Schedule O to					Expenses
W	at is the organization's primary exempt purpose?	o respond to any	question in this r art		/D,	equired for section
	To provide nature education and encourage steward	ichin in on web	nn forest			· .
	scribe the organization's program service accomplishments for ea					1(c)(3) and 501(c)(4)
	measured by expenses. In a clear and concise manner, describe				_	anizations; optional for
	sons benefited, and other relevant information for each program to		ed, the number of		om	ers.)
28	Con Cohedula C					

	······································					
	(Grants \$) If this amount includes for	araiga ganata abag			20-	30,354
29	Geo Gebedele A				28a	30,334
40	see schedule o	******************		• • • • • • • • • • • • • • • • • • • •		
	/C					20 254
30	(Grants \$) If this amount includes for	oreign grants, chec	k here	<u></u>	29a	30,354
30	See Schedule O					
						00 054
	(Grants \$) If this amount includes for				30a	30,354
31						00 054
	(Grants \$) If this amount includes for				31a	30,354
	Total program service expenses (add lines 28a through 31a) are IV. List of Officers, Directors, Trustees, and Key El		**************************************		32	121,416
1	List of Officers, Directors, Trustees, and Key El Check if the organization used Schedule O to respon	mpioyeesust each nd to any question i	one even it not compens in this Part IV	ated — see the in	ISTIUCTI	ons for Part IV)
		(b) Average	(c) Reportable	(d) Heath bene contributions to er	efits,	4.55
	(a) Name and title	hours per week devoted to position	compensation (Forms W-2/1099-MISC)	benefit plans, :	and	(e) Estimated amount of other compensation
_	Rob Holtzman		(if not paid, enter -0-)	deferred compen	sation	<u> </u>
		1 00			,	
	Board Member	1.00	0			0
	Ron Jolly	1 00			,	
	reasurer	1.00	0			0
	Phyllis Fitzgerald	1 00			-	
	Vice President Kevin Bowling	1.00	0			0
	**************************************	1 00				
	Board Member	1.00	0	<u> </u>		0
	Walt Christensen	0.00			_	
	President	2.00	0			0
	Russell Cotton	4 00			_	
_	Board Member	1.00	0		C	0
	Perri Eason					
	Board Member	1.00	0	<u></u>	0	0
	Mark Eley		_		_	
	Board Member	1.00	0		0	0
	Pete Glauber	1 22			_	
	Secretary	1.00	0	<u> </u>	C	0
	Ken Machtolff		_		_	
_	Board Member	1.00	0		0	0
	Chris O'Bryan		_		_	_
_	Board Member	1.00	0		0	0
	Kenny Popp		_		_	
	Board Member	1.00	0		0	0

DAA

Form 990-EZ (20

	art V	Other Information (Note the Schedule A and personal benefit contract statem instructions for Part V) Check if the organization used Schedule O to respond to	ent requirements in the	_		
22	Didah		· · · · · · · · · · · · · · · · · · ·	······	Yes	N
33	Did the	organization engage in any significant activity not previously reported to the IRS? If "Yes," provid	ie a		1	T .
34		description of each activity in Schedule O	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	33	<u> </u>	X
34	convert	ry significant changes made to the organizing or governing documents? If "Yes," attach a confor	med			
	change i	the amended documents if they reflect a change to the organization's name. Otherwise, explain	the	1		
35a		on Schedule O (see instructions)		34		X
oou	activities	organization have unrelated business gross income of \$1,000 or more during the year from business gross income of \$1,000 or more during the year from business gross income of \$1,000 or more during the year from business gross income of \$1,000 or more during the year from business gross income of \$1,000 or more during the year from business gross income of \$1,000 or more during the year from business gross income of \$1,000 or more during the year from business gross income of \$1,000 or more during the year from business gross income of \$1,000 or more during the year from business gross income of \$1,000 or more during the year from business gross income of \$1,000 or more during the year from business gross income of \$1,000 or more during the year from business gross income of \$1,000 or more during the year from business gross gros	ness	Ì		Í
ь	If "Vee "	to line 357, has the experientian fled a Ferri 200 T (the control of the con			<u> </u>	X
c	Mae the	to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation	in Schedule O	35b	-	—
Ū	reporting	organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e), and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	notice,			
36		organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	,	. 35c		X
		e year? If "Yes," complete applicable parts of Schedule N	3		ł	\
37a			37a	. 36	3:	X
ь	Did the c	reganization file Form 1120-POL for this year?		375	3 00.0.00	X
38a		organization borrow from, or make any loans to, any officer, director, trustee, or key employee or	······································	. 37b		
		a loans made in a prior year and still outstanding at the end of the tax year covered by this return		38a	(C	X
b	If "Yes,"	complete Schedule L, Part II and enter the total amount involved	38b	. Joa		
39		501(c)(7) organizations. Enter:	F 3.33			
а	Initiation	fees and capital contributions included on line 9	39a	87.7		
b		ceipts, included on line 9, for public use of club facilities	39b			
40a		501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:				
	section 4			52		
b		501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 49	958			
		enefit transaction during the year, or did it engage in an excess benefit transaction in a prior yea				
		not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part	l	40b		X
C		501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed				
		ization managers or disqualified persons during the year under sections 4912,				
.1	4955, an	***************************************	<u> </u>	A.		
a		501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line				
		bursed by the organization	<u> </u>	7838		
G		izations. At any time during the tax year, was the organization a party to a prohibited tax shelter on? If "Yes," complete Form 8886-T		030383		
41		tates with which a copy of this return is filed KY		40e		X
 42a		nization's books are in care of ► Company	Telephone no. ▶ 503	2-45	Q_1	328
		3745 Illinois Avenue	receptione no. P		× .	7
		af ► Louisville K	• • •	213		
þ		ne during the calendar year, did the organization have an interest in or a signature or other autho			Yes	No
		al account in a foreign country (such as a bank account, securities account, or other financial acc	count)?	42b		X
		enter the name of the foreign country:				
		nstructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank Accounts (FBAR).	and		** **[
С		ne during the calendar year, did the organization maintain an office outside the U.S.?		42c	** :*	X
_		enter the name of the foreign country:	***************************************	426		22
43		947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here				▶ □
		the amount of tax-exempt interest received or accrued during the tax year	h 10			
				\Box	Yes	No
44a		rganization maintain any donor advised funds during the year? If "Yes," Form 990 must be				
	-	d instead of Form 990-EZ		44a		X
þ		rganization operate one or more hospital facilities during the year? If "Yes," Form 990 must be		0.33	8 0	
_	complete	d instead of Form 990-EZ		44b		X
C	Did the or	rganization receive any payments for indoor tanning services during the year?		44c	022138800	X
ď	explanation	b line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an on in Schedule O		44d	664. R. 150	
45a		manization have a controlled entity within the meaning of section 512/b\/13\2		45a		Х
b		ganization receive any payment from or engage in any transaction with a controlled entity within	the	-5a		<u></u>
		of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of				
		-EZ (see instructions)		45b	i; X	X

Form 990-EZ (201

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Employer identification number Name of the organization Louisville Nature Center, Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iil). Enter the hospital's name, 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).(Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).(Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (v) Amount of monetary (vi) Amount of (iv) Is the organization (ii) EIN (iii) Type of organization (i) Name of supported (described on lines 1-9 listed in your governing support (see other support (see organization instructions) above (see instructions) document? instructions) Yes No (B) (C) (D)

(E)

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.)

Sec	tion A. Public Support	· · · · · · · · · · · · · · · · · · ·		iloted below, p	sease complete	r artin.	
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						()
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
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.			7.7			
	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
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						100	_
12	Gross receipts from related activities, etc. (s		****************		****************	12	
13	First five years. If the Form 990 is for the o						
	organization, check this box and stop here			********			
	tion C. Computation of Public Sup						
14	Public support percentage for 2015 (line 6,	column (f) divided b	y line 11, column (f))		14	%_
15	Public support percentage from 2014 Sched		4			15	%_
16a	33 1/3% support test—2015. If the organiz		title box off lifte 15	, and into 14 19 99	173 76 OF THOSE, GREC	A UIIS	
	box and stop here. The organization qualifi	es as a publicly sup	oported organizatio	n 			▶ ⊔
b	33 1/3% support test—2014. If the organization of the state of the sta						
170	check this box and stop here. The organiza	ation qualifies as a p	oublicly supported (organization	- 406 - 18 - 4		▶∐
17a	10%-facts-and-circumstances test-201 10% or more, and if the organization meets						
	Part VI how the organization meets the "fac		•				
				•			►∏
b	organization 10%-facts-and-circumstances test—201	A If the organization	n did not check a b	ov on line 12 16s	16b, or 17a, and li		
	15 is 10% or more, and if the organization in	-			, ,	iic	
	Explain in Part VI how the organization mee			•	•	ĺv	
	supported organization			-	•	-	▶ □
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b.	17a, or 17b. check	this box and see		🗀
	instructions						▶ 🖯
	***************************************					***************	

Schedule A (Form 990 or 990-EZ) 2015 Louisville Nature Center, Inc.

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.)

Sect	tion A. Public Support	daily different					
	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	54,742	57,573	95,106	130,300	63,347	401,068
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	28,590	90,488	53,878	70,597	95,068	338,621
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	83,332	148,061	148,984	200,897	158,415	739,689
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
p	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						
8 8	Add lines 7a and 7b Public support. (Subtract line 7c from line 6.)						739,689
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6	83,332	148,061	148,984	200,897	158,415	739,689
10a		2	738	167	665	87	1,659
b							
С	Add lines 10a and 10b	2	738	167	665	87	1,659
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,					150 500	7/1 7/0
	and 12.)	83,334					741,348
14	First five years. If the Form 990 is for the organization, check this box and stop here	e <u></u>		th, or fifth tax year	as a section 501(c)	(3)	<u> </u>
Se	ction C. Computation of Public Su	pport Percenta	age			140	22.70%
15	Public support percentage for 2015 (line 8,	column (f) divided	by line 13, column	(f))		15	99.78% 99.78%
16	Public support percentage from 2014 Sche	edule A, Part III, line	: 15	<u></u>		16	99.7870
Se	ction D. Computation of Investme	nt Income Pero	entage	1 (6)		17	. %
17	Investment income percentage for 2015 (li	ne 10c, column (f)	aividea by line 13, i	column (1))			%
18	Investment income percentage from 2014 33 1/3% support tests—2015. If the organic	Schedule A, Part II	i, line 17	14 and line 15 is n	nore than 33 1/3%		
198	17 is not more than 33 1/3%, check this bo	nx and stop here. T	he organization qu	ialifies as a publicly	/ supported organiz	ation	> X
ŀ	line 18 is not more than 33 1/3%, check th	is box and stop he	re. The organizatio	in qualifies as a pul	blicky supported org	lauisation	▶ □
20	the second secon	d not check a box o	n line 14, 19a, or 1	9b, check this box	and see instruction	s	

Part IV

Supporting Organizations

(Complete only if you checked a box in line 11 on 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

- 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.
- 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.
- 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 supported 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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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 section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 or 990-EZ).
- 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 9a) 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 9a) 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 section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b 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.)

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	Yes	No
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10a		
10b		

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.

Schedule A (Form 990 or 990-EZ) 2015 Louisville Nature Center, In			Page 6
Part V: Type III Non-Functionally Integrated 509(a)(3) Supporting Organ			
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 2			
other Type III non-functionally integrated supporting organizations must complete Sections	A thro	ugh E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		(40000)
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		<u> </u>
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)
Aggregate fair market value of all non-exempt-use assets (see			- 15 th
instructions for short tax year or assets held for part of year):	100		7.00
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		1.00	
factors (explain in detail in Part VI):		an, si di d	
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
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	4	
5 Income tax imposed in prior year	5	2-34- 1 cm ²	
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 T	ype iii	supporting organization (see	e
instructions).			

Schedule A (Form 990 or 990-EZ) 2015

c Excess from 2013

e Excess from 2015

d Excess from 2014

Schedule A (Fo	Supplemental Information 12; Part IV, SB, lines 1 and 2; Part V, iilines 2, 5, and 6. Als	Section A, lines 1, 2 rt IV, Section C, line ine 1; Part V, Section	he explanation 2, 3b, 3c, 4b, 4 e 1; Part IV, S on B, line 1e; I	ns required b 4c, 5a, 6, 9a, section D, line Part V, Section	y Part II, line 10; 9b, 9c, 11a, 11b es 2 and 3; Part I' on D, lines 5, 6, a	, and 11c; Part IV, V, Section E, lines and 8; and Part V,	Section 1c, 2a, 2b,
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Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

	ture Center, Inc.						
Organization type(check on	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						
	overed by the General Rule or a Special Rule. , (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See						
General Rule							
	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 property) from any one contributor. Complete Parts I and II. See instructions for determining a ributions.						
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.						
	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, contributions exclusively for religious, charitable, etc., purposes, but no such						
	nore than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the						
5	to this organization because it received nonexclusively religious, charitable, etc., contributions						
8							
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, st 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 certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

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

Page

Name of organization

Louisville Nature Center, Inc.

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	David and Betty Jones Louisville KY 40202	\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>.</u>	@ · · · · · · · · · · · · · · · · · · ·	\$	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u> </u>		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	THE TOTAL STATE OF THE STATE OF	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	£	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Department of the Treasu Internal Revenue Service	ury	Information about S	Attach to Fo			n 990-EZ. ts instructions is at www.irs	s.gov/form990.	Open to Public Inspection
Name of the organization					,		Employer identific	
	Louisville							·
	indraising Activities orm 990-EZ filers are				swer	ed "Yes" on Form	990, Part IV, line	1.
1 Indicate whet	her the organization raised	d funds through a	ny of the following	activitie	es. Ch	eck all that apply.		
a 🔛 Mail solic	itations		e Solicitation	of nor	n-gove	ernment grants		
b Internet a	and email solicitations		f Solicitation	of gov	/emm	ent grants		
c Phone so	plicitations		g Special fur	ndraisiı	ng eve	ents		
d In-persor	n solicitations							
2a Did the organ or key employ	nization have a written or o yees listed in Form 990, Pr	ral agreement wit art VII) or entity in	th any individual (in n connection with pr	cluding	offic	ers, directors, trustees undraising services?		Yes
b f "Yes," list th	ne ten highest paid individu I at least \$5,000 by the org	uals or entities (fu					ndraiser is to be	— —
	****				id fund- r have		(v) Amount paid to	(vi) Amount paid to
,	(i) Name and address of individua or entity (fundraiser)	ı	(ii) Activity	custo	ody or rol of outions?	(iv) Gross receipts from activity	(or retained by) fundraiser listed in col. (i)	(or retained by) organization
		-		Yes	No			
1								
2								
3								
4								
5								
6						-		
7								
8								
•								
9								
10								
3 List all states registration or	in which the organization in licensing.	is registered or lic	censed to solicit cor	ntributio	ons or	has been notified it is	exempt from	
£							• • • • • • • • • • • • • • • • • • • •	
			• • • • • • • • • • • • • • • • • • • •					
<u> </u>					· • • • • •			

b If "Yes," explain:

102984 05/24/2016 1:03 PM Louisville Nature Center, Inc. Schedule G (Form 990 or 990-EZ) 2015 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (c) Other events (b) Event #2 (a) Event #1 (d) Total events (add col. (a) through Plant sale None Hoots and Hops col. (c)) (total number) (event type) (event type) Revenue 20,876 9,883 10,993 1 Gross receipts 2 Less: Contributions 3 Gross income (line 1 minus 20,876 9,883 10,993 line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs Direct Expenses 7 Food and beverages 8 Entertainment 6,95 3,289 3,665 9 Other direct expenses 6,95 10 Direct expense summary, Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming col. (a) through col. (c)) (a) Bingo bingo/progressive bingo Revenue 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes _____ % No 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

Sc	Does the organization conduct as a series of the properties of the
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity Yes N
	formed to administer charitable gaming? Indicate the percentage of gaming activity conducted in: Yes N
13	Indicate the percentage of gaming activity conducted in:
a	The organization's facility
b	An outside facility 13a %
14	An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and fecords:
	records:
	Name ▶
	Name
	Address ▶
15a	
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization • \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the If "Yes," enter pame and address of the third party ▶ \$
c	If "Yes," enter name and address of the third party:
	The results and address of the tillio party:
	Name >
	Name •
	Address >
	Address
16	Garning manager information:
	Name ►
	Garning manager compensation ▶ \$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or
200000	spent in the organization's own exempt activities during the tax year
Han	Supplemental Information. Provide the explanations required by Boot Library
	The first of the four for, for, for, and fire, as applicable. Also provide any additional information (a.e.
	instructions).
	······································
·····	
	Schedule G (Form 990 or 990-EZ) 2015

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. Employer identification number

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OMB No. 1!

Open to Inspecti

Name of the organization	_		Employer identification number
Louisville Nature Cent	er, Inc	•	
Form 990-EZ, Part I, Line 8 - Oth	er Reve	nue	
Description		Amount	
Miscellaneous	\$	11,414	
Tot	al \$	11,414	
<u></u>	**************		
Form 990-EZ, Part I, Line 16 - Ot	her Exp	enses	
Description	<u>.</u>	Amount	
Expenses			
Advertising Expenses	\$	794	
Interest Expenses	\$	138	
Supplies	\$	8,201	
		1,703	
Temporary staffing	\$		
Telephone	\$	2,249	
Insurance	\$	5,087	
Miscellaneous	\$	7,535	2
Dues and Subscriptions	\$	730	
Merchant fees	\$	1,529	
Lease	\$	1,500	
Equipment/facilities	\$	1,628	
Non-investment Depreciation	\$	15,038	
То	tal \$	46,132	
Form 990-EZ, Part II, Line 24 -	Other As	sets	
Description		Beg.	of Year End of Ye
Security Deposit		\$	395 \$

Schedule O (Form 990 or 990-EZ) (2015) Page 2 Name of the organization Employer identification number Louisville Nature Center, Inc. Total \$ 395 \$ 395 Form 990-EZ, Part II, Line 26 - Other Liabilities Description Beg. of Year End of Year Accounts Payable and Accrued Expenses \$ 6,703 \$ Form 990-EZ, Part III, Line 28 - First Accomplishment Summer camps for kids ages 4 through 12 to provide nature and conservation programs. 190 participants over 43 days did the following activities: Track Em, Bug Hunters, Harry Potter, My Home, Bugs and Slugs, and Wild About Arts. Form 990-EZ, Part III, Line 29 - Second Accomplishment Educational Programs for Elementary School Students Provides educational programs for elementary school students. The nature education programs are aligned with core content elementary school guidelines and serve as an outdoor supplement to in-school curriculum. 74 programs for students from public and private schools and home school groups. 2,582 students attended. Participants are pre-K through middle school, 50/50 male to female ratio. Form 990-EZ, Part III, Line 30 - Third Accomplishment Internships and Volunteers: Over 300 hundred volunteers received opportunities to earn a total of several thousand community services hours as well as receive educational guidance on the value of urban forest and environmental awareness. Improvements to the Nature Center included forest maintenance, garden maintenance and updates, building and grounds Page 1 of 2

102984 Louisville Nature Center, Inc.

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	Accumulated Depreciation	\$ 267,481	\$ 267,481
	End of Year	515,224	515,224
ωĭ	l	φ	∞.
d and Building	Accumulated Depreciation	252,443	252,443
- Lan	ĞΟ	φ	δ.
Z, Part II, Line 23 - Land and Buildin	Beginning of Year	515,224	515,224
Form 990-E		·ν-	
	Description	Buildings/Fixed Assets	Total

102984 Louisville Nature Center, Inc. FYE: 12/31/2015	Federal Statements	5/24/2016 1:03 PM
	Schedule A, Part III, Line 1(e)	
Membership Dues Other Contributions	Description	\$ 7,584 35,763
Cash Contribution Total		\$ 63,347
	Schedule A, Part III, Line 2(e)	
	Description	Amount
Fee bases educational program Miscellaneous Hoots and Hops Plant sale		\$ 55,193 11,414 10,993 9,883
Other Fundraisers Total		\$ 95,068
	Schedule A, Part III, Line 10a(e)	
	Description	Amount
Interest Income Total		\$\partial \text{\partial \text



May 24, 2016

Louisville Nature Center 3745 Illinois Avenue Louisville, KY 40213

Dear Louisville Nature Center:

This letter confirms the terms of our tax engagement with you for the year ended December 31, 2015, and clarifies the nature and extent of the professional services we will provide. Our work will be performed in accordance with the Statements of Responsibilities in Tax Practice as promulgated by the American Institute of Certified Public Accountants.

Our engagement is designed to perform the following services:

- Prepare Form 990, Return of Organization Exempt From Income Tax, with supporting schedules.
- Prepare any state returns as requested.
- Prepare any bookkeeping entries we find necessary in connection with preparation of these returns.

This engagement letter does not cover the preparation of any financial statements, which if we are to provide, will be covered under a separate engagement letter.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all the documents, canceled checks, and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority.

You are responsible for the safeguarding of assets, the proper recording of transactions in the books of accounts, the substantial accuracy of the financial records, and the full and accurate disclosure of all relevant facts affecting the return(s) to us. You also have final responsibility for the tax return and, therefore, the appropriate officials should review the return carefully before an authorized officer signs an files it.

You are responsible for making all management decisions and performing all management functions; for designating an individual with suitable skill, knowledge, or experience to verse the bookkeeping and tax services we provide; and for evaluating the adequacy and results of the services performed and accepting responsibility for such services.

We may provide you with a questionnaire or other document requesting specific information. Completing those forms will assist us in making sure you are well served for a reasonable fee. You represent that the information you are supplying to us is accurate and complete to the best of your knowledge and that you have disclosed to us all relevant facts affecting the returns. We will not verify the information you give us; however, we may ask for additional clarification of some information.

You should also know that IRS audit procedures will almost always include questions on bartering transactions and on deductions that require strict documentation such as travel and entertainment expenses and expenses for business usage of autos and computers. In preparing your returns, we rely on your representations that we have been informed of all bartering transactions and that you understand and have complied with the documentation requirements for your expenses and deductions. If you have questions about these issues, please contact us.

If, during our work, we discover information that affects prior-year tax returns, we will make you aware of the facts. However, we cannot be responsible for identifying all items that may affect prior-year returns. If you become aware of such information during the year, please contact us to discuss the best resolution of the issue. We will be happy to prepare appropriate amended returns as a separate engagement.

Our work in connection with the preparation of the tax return(s) does not include any procedures designed to discover defalcations or other irregularities, should any exist. The returns will be prepared solely from information provided to us without verification by us.

The firm may from time to time, and depending on the circumstances, use third-party service providers to assist in

preparing your return, but these preparers will not make substantive decisions concerning your return. We may share your tax return information with these service providers, but remain committed to maintaining the confidentiality and security of your information. Accordingly, we maintain internal policies, procedures and safeguards to protect the confidentiality of your personal information. In addition, we will secure confidentiality agreements with all service providers to maintain the confidentiality of your information and we will take reasonable precautions to determine that they have appropriate procedures in place to prevent the unauthorized release of your confidential information to others. In the event that we are unable to secure an appropriate confidentiality agreement, you will be asked to provide your consent prior to the sharing of your confidential information with the third-party service provider. Furthermore, the firm will remain responsible for the work provided by any such third-party service providers.

In accordance with federal law, in no case will we disclose your tax return information to any location outside the United States, to another tax return preparer outside of our firm for purposes of a second opinion, or to any other third party for any purpose other than to prepare your return without first receiving your consent.

The Internal Revenue Code and regulations impose preparation and disclosure standards with non-compliance penalties on both the preparer of a tax return and on the taxpayer. To avoid exposure to these penalties, it may be necessary in some cases to make certain disclosures to you and/or in the tax return concerning positions taken on the return that don't meet these standards. Accordingly, we will discuss tax positions that may increase the risk of exposure to penalties and any recommended disclosures with you before completing the preparation of the return. If we concluded that we are obligated to disclose a position and you refuse to permit the disclosure, we reserve the right to withdraw from the engagement and you agree to compensate us for our services to the date of withdrawal.

The IRS permits you to authorize us to discuss, on a limited basis, aspects of your return for one year after the return's due date. Your consent to such a discussion is evidenced by checking a box on the return. Unless you tell us otherwise, we will check that box authorizing the IRS to discuss your return with us.

We do not keep any of your original records, so we will return those to you upon the completion of the engagement. When records are returned to you, it is your responsibility to retain and protect the records for possible future use, including potential examination by governmental or regulatory agencies.

Certain communications involving tax advice are privileged and not subject to disclosure to the IRS. By disclosing the contents of those communications to anyone, or by turning over information about those communications to the government, you may be waiving this privilege. To protect this right to privileged communication, please consult with us or your attorney prior to disclosing any information about our tax advice. Should you decide that it is appropriate for us to disclose any potentially privileged communication, you agree to provide us with written, advance authority to make that disclosure.

Should we receive any request for the disclosure of privileged information from any third party, including a subpoena or IRS summons, we will notify you. In the event you direct us not to make the disclosure, you agree to hold us harmless from any expenses incurred in defending the privilege, including, by way of illustration only, our attorney's fees, court costs, outside adviser's costs, or penalties or fines imposed as a result of your asserting the privilege or your direction to us to assert the privilege. In the event we are required to respond to a subpoena, court order or other legal process for the production of documents and/or testimony relative to information we obtained and/or prepared during the course of this engagement, you agree to compensate us, as set forth above, for the time we expend in connection with such response and to reimburse us for all of our out of pocket costs incurred in that regard.

The return(s) may be selected for review by the taxing authorities or you may receive a notice requesting a response to certain issues on your tax return. In the event of an audit, you may be requested to produce documents, records, or other evidence to substantiate the items of income and deduction shown on a tax return. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of a tax examination, we will be available, upon request, to represent you. However, such additional services are not included in the fees for the preparation of the tax return(s).

Fees for our tax return preparation service will be billed upon completion of your returns at the appropriate rate for the level and value of services rendered, plus out-of-pocket expenses including technology charges. All invoices are due and payable upon presentation. Amounts not paid within 30 days from the invoice date will be subject to a late payment charge of 1.5% per month (18% per year). If for any reason the account is turned over to an attorney for collection, an additional charge of 33r33% will be added to cover collection costs.

This letter shall serve as your authorization for the use of e-mail and other electronic methods to transmit and receive information, including confidential information, between our organizations. You acknowledge that e-mail travels over the public internet, which is not a secure means of communication and, thus, confidentially of the transmitted information could be compromised through no fault of Baldwin CPAs, PLLC. Baldwin CPAs, PLLC will employ commercially reasonable efforts and take appropriate precautions to protect the privacy and confidentiality of

transmitted information. As e-mails can be intercepted and read, disclosed, or otherwise used or communicated by an unintended third party, or may not be delivered to each of the parties to whom they are directed and only to such parties, we cannot guarantee or warrant that e-mails from us will be properly delivered and read only by the addressee. Therefore, we specifically disclaim and waive any liability or responsibility whatsoever for interception or unintentional disclosure or communication of e-mail transmissions, or for the unauthorized use or failed delivery of e-mails transmitted by us in connection with the performance of this engagement. In that regard, you agree that we shall have no liability for any loss or damage to any person or entity resulting from the use of e-mail transmissions, including any consequential, incidental, direct, indirect, or special damages, such as loss of sales or anticipated profits, or disclosure or communication of confidential or proprietary information.

As part of this tax return engagement, Baldwin CPAs, PLLC will provide you with secure online access to your returns through our firm website www.baldwincpas.com. This service provides clients and authorized employees of clients with access to information displayed online for inquiries and deliveries of documents and communications for their account only. The information, documents and communications are provided as a convenient resource to clients and may be used for informational purposes only. Using the online access and its related services requires the use of a password and a user name. The confidentiality of your password and account is your responsibility. Any activities that occur under your account are your responsibility. You agree to notify us immediately of any changes in authorized users, unauthorized use of your account or any other breach of security. It is prohibited to use anyone else's account without the express permission of that account holder.

In the event of a dispute related in any way to our services, our firm and you agree to discuss the dispute and, if necessary, to promptly mediate in a good faith effort to resolve. We will agree on a mediator, but if we cannot, either of us may apply to a court having personal jurisdiction over the parties for appointment of a mediator. We will share the mediator's fees and expenses equally, but otherwise will bear our own attorneys' fees and mediation cost. Participation in such mediation shall be a condition to either of us initiating litigation. In order to allow time for the mediation, any applicable statute of limitations shall be tolled for a period not to exceed 120 days from the date either of us first requests in writing to mediate the dispute. The mediation shall be confidential in all respects, as allowed or required by law, except our final settlement positions at mediation shall be admissible in litigation solely to determine the prevailing party's identity for purposes of the award of attorneys' fees.

We have the right to withdraw from this engagement, at our discretion, if you don't provide us with any information we request in a timely manner, refuse to cooperate with our reasonable requests or misrepresent any facts. Our withdrawal will release us from any obligation to complete your return and will constitute completion of our engagement. You agree to compensate us for our time and out-of-pocket expenses through the date of our withdrawal.

If the foregoing correctly sets forth your understanding of our tax engagement, please sign this letter in the space below and return it to our office. If you disagree with any of these terms, please notify us immediately.

We want to express our appreciation for this opportunity to work with you.

Very truly yours,

Agreed and a	· ·			
.		Date:	May 24, 2016	
	Signature			
	Kathy Morris	Title:		
	Name			
On Behalf of:	Louisville Nature Center			
	Name of Organization			
Primary e-ma	il address (for secure online access):	LNC@bellsouth.net		

Form G B = G
(Rev. October 2007)
Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

	Name (as shown on your income tax return)								
N i quicuita Matura Cantas Ina									
Business name, if different from above Louisville Mature Center									
					Check appropriate box: Individual/Sole proprietor Corporation Partnership Limited flability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) Address (number, street, and apt. or suite no.) 3745 Illinois Ave City, state, and ZIP code Cutisville KY 40213-1017				
rint Inst	Address (number, street, and apt. or suite no.)	Requester's name and a	drivess (notional)						
2 3745 Illinois Ave									
aci.	City, state, and ZIP code								
ē	Louisville KY 40213-1017								
500	List account number(s) here (optional)								
(2)									
aPaa	Taxpayer Identification Number (TIN)								
	The state of the s								
Ente	er your TIN in the appropriate box. The TIN provided must match the name given on Line 1	to avoid Social secur	ity number						
Daci	wp withholding, hor individuals, this is your social security number (SSM). However, for a re-	eidant (
auer	l, Sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other outil								
your	employer identification number (EIN). If you do not have a number, see How to get a TIN o	n page 3.	or						
DUM	If the account is in more than one name, see the chart on page 4 for guidelines on whose ber to enter.	e e	•						
Panill Certification									
	er penalties of perjury, I certify that:								
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and									
2. I am not subject to backup withholding because (a) I am exempt from backup withholding and (b) I have an (c)									
TWO COUNTED IN TOTAL IN THE SUCRECULAR OF CHARACTERS OF COUNTRY OF A SUCRECULAR OF COUNTRY OF THE SUCRECULAR OF THE SUCREC									
The trial is an individual to packup withholding, and									
3. I am a U.S. citizen or other U.S. person (defined below).									
Cert	ification instructions. You must cross out item 2 above if you have been notified by the IR	S that you are currently	subject to backup						
amar	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								
provi	provide your correct TIN. See the instructions on page 4.								

Here | U.S. person ▶ ____/
General Instructions

Signature of

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

Purpose of Form

Sign

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

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

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

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- · An estate (other than a foreign estate), or

Date >

 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.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

The U.S. owner of a disregarded entity and not the entity.

AMENDED AND RESTATED ARTICLES OF INCORPORATION OF LOUISVILLE NATURE CENTER, INC.

ARTICLE I

Name

The name of the corporation is Louisville Nature Center, Inc. (the "Corporation").

ARTICLE II

Capital Stock

Any provision of these Articles of Incorporation to the contrary notwithstanding, the Corporation shall not have capital stock or shareholders and shall not have any purpose or object, nor have or exercise any power, nor engage in any activity, which in any way contravenes, or is in conflict with, the other provisions of Article III of these Articles of Incorporation.

ARTICLE III

Purposes and Powers

The objects and purposes of the Corporation, and the powers it shall have and may exercise are as follows:

- (a) As general and controlling purposes, to conduct and carry on its work, not for profit, but exclusively for charitable, scientific, literary, or educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, or corresponding provisions of any subsequent Federal tax laws (the "Code"), in such manner (i) that no part of its income or property shall inure to the private benefit of any donor, director or individual having a personal or private interest in the activities of the Corporation, except as reasonable compensation for services actually rendered, (ii) that it shall not cirectly or indirectly participate in or intervene in any political campaign on behalf of any candidate for public office, and (iii) that no substantial part of its activities shall be carrying on propaganda or otherwise attempting to influence legislation.
- (b) As particular purposes in furtherance of, consistent with, and subject to, the general purposes set forth in Section (1)(a) of this Article III:

BOOK 433 PAGE 942

- (1) to establish and maintain a nature preserve and nature center for environmental education and to engage in activities incidental thereto with the objective of stimulating interest and knowledge concerning the preservation of our environment and natural areas; and
- (ii) to organize, promote, foster, assist (whether financially or otherwise), and conduct charitable, scientific, literary and educational enterprises, activities and institutions.
- (c) In furtherance of, and at all times subject to, the aforesaid purposes, enterprises, activities, and projects the Corporation shall have the authority and power to engage in any lawful act or activity for which corporations may be organized under the Kentucky Non-Profit Corporation Act, and to exercise any and all powers that corporations may now or hereafter exercise under the Kentucky Non-Profit Corporation Act.

ARTICLE IV

Yoluntary Dissolution

- If, at any time, the Corporation voluntarily dissolves, the assets of the Corporation shall be applied and distributed as follows:
- (a) All liabilities and obligations of the Corporation shall be paid and discharged, or adequate provisions shall be made therefor;
- (b) Assets held by the Corporation upon condition requiring return, transfer, or conveyance, which condition occurs by reason of the dissolution, shall be returned, transferred, or conveyed in accordance with such requirements;
- (c) Assets that have been received and are held by the Corporation subject to limitations permitting their use only for charitable, scientific, literary, educational, and/or similar purposes, and that are not held upon a condition requiring return, transfer, or conveyance by reason of dissolution, shall be transferred or conveyed to one or more corporations, societies, or organizations, organized under the laws of any state, that are exempt under section 501(c)-(3) of the Code, or to the Federal government, or to a state or local government, for a public purpose, pursuant to a plan of distribution adopted as provided by law;

- (d) Other assets, if any, shall be transferred or conveyed to one or more corporations, societies, or organizations, organized under the laws of any State, that are exempt under section 501(c)(3) of the Code, or to the Federal government, or to a State or local government, for a public purpose, pursuant to a plan of distribution adopted as provided by law; and
- (e) Any assets not disposed of pursuant to the provisions of this Article IV shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the Corporation is then located to such organizations as the court shall determine, which are organized and operated exclusively for charitable purposes and are exempt under section 501(c)(3) of the Code.

ARTICLE V

Members

The Corporation shall have such members and classes of membership as shall be provided in the By-Laws. The members shall have no right to vote on any matter concerning the Corporation, the Trustees possessing the sole voting power. Members, as such, shall have no claim on the assets, income or property of the Corporation, currently or upon dissolution.

ARTICLE VI

935

Board of Trustees

- (1) (a) The affairs of the Corporation shall be conducted by a Board of Trustees and by such committees and officers as shall be provided in the By-Laws.
- (b) The Board of Trustees shall consist of not less than three persons, the precise number of whom shall be designated by the By-Laws. The nomination and election of Trustees shall be as provided in the By-Laws and shall take place at the annual meeting of the Board of Trustees, or as otherwise provided in the By-Laws.
- (c) The term of office of each trustee shall be as provided by the Corporation's By-Laws. Each Trustee so elected shall hold office for said term and until his or her respective successor shall have been duly elected and shall have accepted office.
- (d) Trustees may be removed from office during their term of office as provided in the By-Laws.

BOOK 433 PAGE 944

- (2) The annual meetings of the Corporation's Board of Trustees shall be held at such time and place as may be fixed by the Corporation's By-Laws.
- (3) The duties and powers of the Board of Trustees, committees and officers of the Corporation shall, except as otherwise specifically provided herein or in the By-Laws, be such as are usually incident to similar Boards of Directors or Trustees, similar committees and similar officers, and in addition, shall be such as may be conferred upon said Board of Trustees, upon such committees, or upon such officers by law, or by amendment to the Articles of Incorporation or By-Laws, or by appropriate corporate resolution.

ARTICLE VII

Registered Office: Registered Agent

Until otherwise changed, the registered office of the Corporation shall be at 4834 Brownsboro Center, Louisville, Kentucky 40207, and the name and address of its registered agent at such address shall be Bruce Hutcherson.

ARTICLE VIII

Principal Office

The address of the principal office of the Corporation is Louisville Nature Center, Inc., P.O. Box 7414, Louisville, Kentucky 40257-0414.

ARTICLE IX

Amendment of Articles and By-Laws

- (1) The Corporation's Articles of Incorporation may be amended in the manner provided by law.
- (2) The Frard of Trustees shall adopt By-Laws for the Corporation and may change or revise such By-Laws at any time and from time to time.

ARTICLE X

Private Property

The private property of the members, offices and Trustees shall not be subject to any of the Corporation's debts and liabilities.

ARTICLE XI

Indemnification and Insurance

To the fullest extent permitted by, and in accordance with the provisions of the Kentucky Revised Statutes Chapter 273, the Corporation shall indemnify each Trustee or officer of the Corporation against reasonable expenses (including reasonable attorneys' fees), judgments, taxes, penalties, fines (including an excise tax assessed with respect to an employee benefit plan) and amounts paid in settlement (collectively "Liability"), incurred by such person in connection with defending any threatened, pending or completed action, suit or proceeding (whether civil, criminal, administrative or investigative, and whether formal or informal) to which such person is, or is threatened to be made, a party because such person is or was a Trustee or officer of the Corporation, or is or was serving at the request of the Corporation as a Trustee, officer, partner, employee or agent of another domestic or foreign corporation, partnership, joint venture, trust or other enterprise, including service with respect to employee benefit plans. A Trustee or officer shall be considered to be serving an employee benefit plan at the Corporation's request if such person's duties to the Corporation also impose duties on or otherwise involve services by such person to the plan or to participants in or beneficiaries of the plan. To the fullest extent authorized or permitted by, and in accordance with the provisions of, the Act, the Corporation shall pay or reimburse reasonable expenses (including reasonable attorneys' fees) incurred by a Trustee or officer who is a party to a proceeding in advance of final disposition of such proceeding.

The indemnification against Liability and advancement of expenses provided by, or granted pursuant to, this Article XI shall not be deemed exclusive of any other rights to which those seeking indemnification or advancement may be entitled under any bylaw, agreement, action of disinterested Trustees, or otherwise, both as to action in their official capacity and as to action in another capacity while holding such office of the Corporation, shall continue as to a person who has ceased to be a Trustee or officer of the Corporation, and shall inure to the benefit of the heirs, executors and administrators of such a person.

The Corporation may purchase and maintain insurance on behalf of any person who is or was a Trustee or officer of the Corporation, or is or was serving at the request of the Corporation as a Trustee, officer, member, partner, employee or agent of another domestic or foreign corporation, partnership, joint venture, trust or other enterprise, against any liability asserted against such person and incurred by such person in such capacity or arising out of such person's status as such, whether or not the Corporation would have the power or be obligated to indemnify such person against such liability under the provisions of this Article XI or of the Kentucky Revised Statutes Chapter 273 (or corresponding provisions of any subsequent state laws).

Any repeal or modification of this Article XI by the Board of Trustees shall not adversely affect any right or protection of a Trustee or officer of the Corporation under this Article Xi with respect to any act or omission occurring prior to the time of such repeal or modification.

ARTICLE XII

Limitation of Trustee Liability

Except as otherwise provided by applicable law, no trustee of the Corporation shall be personally liable to the corporation for monetary damages for breach of his duties as a trustee, provided that this provision shall not eliminate or limit the liability of a trustee for the following: (i) for any transaction in which the trustee's personal financial interest is in conflict with the financial interests of the Corporation; (ii) for acts or omissions not in good faith or which involve intentional misconduct or are known to the trustee to be a violation of law; or (iii) for any transaction from which the trustee derived an improper personal benefit. This Article XIII shall continue to be applicable with respect to any such breach of duty by a trustee, as a trustee, notwithstanding that such trustee thereafter ceases to be trustee, and shall inure to the personal benefit of his heirs, executors and administrators.

Dated: March 3, 1992

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BOOK 433 PAGE 946

END OF DUCUMENT

V.

AMENDED AND RESTATED BY-LAWS OF LOUISVILLE NATURE CENTER. INC.

ARTICLE 1

MENDERS

- of the Louisville Nature Center, Inc. (the "Association") with the designations set forth below, which may be changed by the Board of Trustees (as hereinafter defined) from time to time. Members shall have no voting rights or privileges as such, but may be entitled to such other rights, benefits or privileges as the Board or the Association may from time to time provide. Members shall be those persons who are current in their membership dues or contributions or who are life members, as evidenced by a list kept by the Association. Trustees, officers and employees shall be members of the Association during their period of service without regard to dues.
- 1.2 <u>Designations</u>. There shall be such designations and categories of membership, including, but not limited to yearly and life memberships, as the Trustees shall by resolution establish. The Trustees may, in their discretion, delegate by resolution to any officer the authority to establish membership designations.

ARTICLE 2

PRINCIPAL OFFICE

2.1 The principal office of the Association shall be Louisville Nature Center, Inc., P.O. Box 7414, Louisville, Kentucky, 40257-0414, but the location of such office may be, from time to time, otherwise designated and changed by the Board of Trustees.

ARTICLE 3

NO CAPITAL STOCK

3.1 The Association shall have no capital stock or stockholders, and its business and affairs shall not be conducted for private pecuniary gain or profit, nor shall any of its gain, profit or property inure to any officer, a member or trustee thereof.

ARTICLE 4

BOARD OF TRUSTEES

4.1 <u>Powers</u>. The property and affairs of the Association shall be managed by a Board of Trustees (the "Board"). The members of the Board shall be selected as set forth in Section 4.3, and shall be referred to herein and in all documents and business of the Association as the "Trustees."

4.2 Generally

- Trustees shall be not less than 12 nor more than 21 and shall be fixed in Section 4.2.b, subject to change by amendment of these By-Laws.
 - b. <u>Number of Trustees</u> There shall be 15 Trustees.
 - 4.3 <u>Designation and Selection of Trustees</u>. The Trustees shall be selected as follows:
 - Board shall be divided into 3 classes as nearly equal in number as possible, designating such classes as the first class, the second class and the third class. Trustees of these classes shall be elected as prescribed in Section 4.4.
 - In addition to the designation of Trustees as described above, and their election as prescribed in Section 4.3.a, the Board shall elect one person as Trustee who shall be nominated in writing by the Advisory Committee (as hereinafter defined). The Board may, in its sole discretion, waive the requirement of a designation in writing. Further, should the Board in its discretion and in good faith be unable to determine to its satisfaction the nominee properly designated by the Advisory Committee, the Board may either fill the vacancy with its own nominee or leave the seat wacant until such time as it can satisfactorily determine the nominee of the Advisory Committee.

The Trustees of each class and the Trustee representing the Advisory Committee shall all have the same powers, rights and obligations as Trustees of the Association, and shall differ only in their manner of appointment or election, and in their respective terms of office as provided in Sections 4.2.b and 4.3.

the second law as a

6.6 Advisory Committee.

- a. <u>Generally</u>. The Board may organize or recognize an Advisory Committee whose members will assist the Association in developing programs, exhibits, and research. The Advisory Committee may hold special events on behalf of the Association to promote public relations, further environmental education or aid in fund-raising. The Advisory Committee will assist the Association in publishing a newsletter, recruiting, volunteering and pricing the benefits and programs it may provide to the public.
- b. Composition and Procedure. The Advisory Committee shall elect its own members and appoint its own officers. Nominations for membership on the Advisory Committee may be suggested by the Board, the President or the Director of the Association. The Advisory Committee shall adopt its own By-Laws and keep its own records, but the failure to do such shall not affect the validity of any action taken by the Advisory Committee on behalf or in relation to the Association, except as otherwise provided in these By-Laws.
- c. Representative to the Board. The Advisory Committee shall be accountable to the Board of Trustees through the Trustee elected as its representative to the Board pursuant to Section 4.3.b. The Advisory Committee will report regularly to the Association through this representative or through the Director of the Association.
- shall remit revenues from its programs to the Association Treasurer without legal restrictions. However the Advisory Committee reasonably expects that the Association will make such funds available for such purposes as it might reasonably request with approval of the Board. The Association may keep such funds in a separate account and delegate to the Advisory Committee discretion in their disbursement, so long as dual controls are maintained, and such disbursements are consistent with the Association's purpose, including the maintenance of its federal tax exempt status.

ARTICLE 7

OFFICERS

7.1 Officers: Oualifications. The officers of the Association shall be elected by the Board, and shall be a President, a Vice President, a Treasurer, a Secretary, a Director and such additional officers as the Board may from time to time elect. Any two or more offices may be held by one person.

- 7.2 Terms. Each officer shall hold office for one year and until his successor shall have been elected and shall have assumed office, or until his death, resignation or removal, whichever is sooner.
- 7.3 Resignations. Any officer may resign at any time by delivering written notice to the Association. The resignation shall take effect at the time specified in the notice. Unless required by the terms of the notice, acceptance shall not be necessary to make the resignation effective.
- 7.4 Removals. Any officer may be removed with or without cause at any time by the Board.
- 7.5 <u>Vacancies</u>. Any vacancy in any office, however arising, shall be filled by the Board for the unexpired term.
- 7.6 President. The President shall be principal officer of the Association and shall, in general, perform all duties incident to the office of President, as well as such other duties as may be prescribed by the Board from time to time. The President shall serve as chairman of the Board and shall preside at all meetings of the Board. The President may appoint board committee chairmen and members and create committees in accordance with Section 6.1. The President shall have authority to co-sign all checks, notes, contracts and other instruments.
- 7.7. <u>Vice President</u>. The Vice President shall assume such duties as may be assigned by the President or the Board. The Vice President shall serve as vice-chairman of the Board and in the absence of the President, preside at all Board meetings. The Vice President shall have the authority to co-sign all checks, note, contracts and other instruments.
- Treasurer. The Treasurer shall receive and disburse all funds of the Association under the direction of the Board and shall deposit all funds in the name of the Association and all securities in such depository or depositories as the Board may from time to time designate or approve. The Treasurer shall maintain custody of and preserve all records and documents relating to the property of the Association and keep proper books of accounts which shall be open at all times to inspection by the Board. At any meeting, the Treasurer shall render to the Board upon request a financial report, and at intervals specified by the Board, he or she shall submit to the Board a statement of the financial condition of the Association, certified by independent accountants, consisting of a balance sheet and related statements of income and expenses and of changes in all funds for the fiscal year then ended. The Board may

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require the Treasurer to obtain such insurance and in such amount as it shall determine. The Treasurer shall have authority to co-sign all checks, notes, contracts and other instruments. The Treasurer may delegate such of his duties as may be appropriate to any officer, including, but not limited to, the Director. The Treasurer need not be a Trustee.

- 7.9 Secretary. The Secretary shall cause notices to be issued of all meetings of the Trustees and a record to be made of the proceedings of the same. The Secretary shall also attend to all official correspondence, shall have custody of and preserve the coefforate seal and the archives, and shall affix the seal under the direction of the President or the Board. The Secretary shall have authority to co-sign all checks, notes, contracts and other instruments. The Secretary need not be a Trustee.
- 7.10. <u>Director</u>. The Director shall manage the day-to-day business affairs and operations of the Association, unless otherwise determined by the Board, and shall have such other duties as may be assigned by the President or the Board. The Director shall have the authority to enter into contracts and to sign checks in accordance with written procedures as set forth by the Association's accountants.
- 7.11 Additional Officers. Additional officers shall have such responsibilities, powers, and duties as the Board may from time to time prescribe.

ARTICLE 8

FINANCE

- Any two of the President, the Vice President, the Treasurer, or any two individuals designated by the Board shall have authority to execute any contract or debt in the name of the Association or execute any form of transfer and assignment customary or necessary to constitute a transfer of stocks, bonds, or other securities standing in the name of or belonging to the Association. Any individual transferring any stocks, bonds, or other securities pursuant to a form of transfer or assignment so executed shall be fully protected and shall be under no duty to inquire whether the Board has taken action in respect thereof.
- 8.2 <u>Signing of Checks</u>. Pursuant to the provisions of these By-Laws or other written policies and procedures adopted by the Board, the President, the Vice President, and certain officers of the Association may sign, make, and evidence in the name of the Association checks, vouciers,

drafts, warrants, orders for the payment of money or receipts.

8.3 Fiscal Year. The Board of Directors shall have the power to fix, and from time to time change, the fiscal year of the Association by resolution. Unless and until otherwise so provided by the Board, the fiscal year of the Association shall be on a calendar year basis beginning on January 1.

ARTICLE 9

GENERAL PROVISIONS

- 9.1 <u>Seal</u>. The Board of Trustees may adopt by resolution a corporate seal which shall be circular in form and shall have inscribed thereon the designation "SEAL" and such other information as the Board of Directors may deem advisable.
- No Trustee or officer of the Association, other than the Director, shall receive compensation for his services in that capacity. A transaction shall not be voidable by the Association solely because Trustee or an officer is interested, directly or indirectly, in a contract or transaction affecting the Association or he or a member of his family is proposed to be compensated for services actually rendered to the Association if (a) the material facts as to the Trustee's or officer's interest are disclosed in good faith to the Board, and the contract or the transaction is approved or ratified by a majority vote of the Board, the interested Trustee not being counted for the purpose of establishing a quorum and not voting; or (b) the contract or transaction is fair to the Association.
- 9.3 <u>Construction</u>. Unless the context specifically requires otherwise, any reference in these By-Laws to any gender shall include all other genders, any reference to the singular shall include the plural, and any reference to the plural shall include the singular.
- 9.4 <u>Severability of Provisions</u>. If any provision of these By-Laws or its application to any person or circumstance is held invalid by a court of competent jurisdiction, the invalidity does not affect other provisions or applications of these By-Laws that can be given effect without the invalid provision or application, and to this end the provisions of these By-Laws are severable.

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ARTICLE 10

YKENDKENAS

10.1 These By-Laws may be amended or repealed, in whole or in part, by a majority vote of the Trustees at any meeting of the Board, provided, that notice of the proposed amendment or repeal, together with the text of the principal substantive changes, shall have been given with the notice of the meeting.

The above Amended and Restated By-Laws of the Association were adopted by the Board of Trustees as of March ____, 1992.

Law Tronger me grate

Title:

Louisville Nature Center Staff

Jun-16

Position	Last	First
Director	Morris	Kathy
Education Coordinator	Gardner	Judy
Bookkeeper	Block	Ellie
Office Resources Coordinator	Slone	Tracy
PT Educators	Bauman	Rosemary
	Neeley	Cathy
	Jones	Kerry
	Shanahan	Joan

Louisville Nature Center Activity Report for April 1, 2015 through April 30, 2016

Program Type	# Activities	# Participants
Adult Education	31	173
Archdiocese School Education	15	535
Birthday Parties	11	90
Camps	55	785
Family/General Programs	11	206
Home School Education	8	48
Independent School Education	8	178
Jefferson County Public Schools		
Education	54	2348
Professional Development	3	64
Scout Programs	8	64
GRAND TOTAL	204	4491

Other Activities

179 Rentals - 50% utilization by nonprofit groups at free or discounted rates

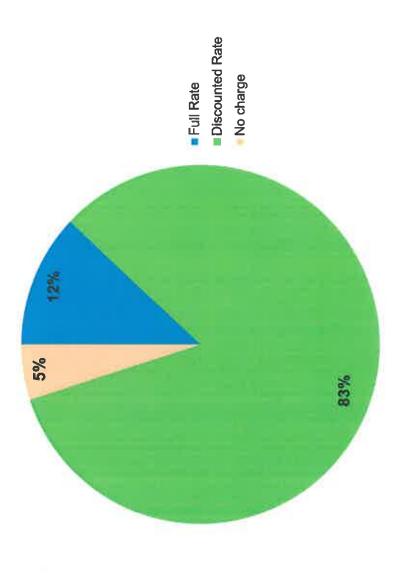
Service groups - Approximately 300 individual volunteers - Mayor's Give a Day, FFA, monthly forest restoration, Jefferson County Master Gardener Association garden activities, St Francis High School and local businesses

Held three fundraisers including Holly & Ivy, Hoops & Hops and Gardenaganza

Hundreds of individuals visit the Nature Center daily for hiking and viewing the visitor center, bird blind, gardens and animal exhibits. LNC participates in the summer Cultural Pass program this year with an opportunity for students to complete three scavenger hunts and receive a prize for each.

Louisville Nature Center

Percent of Youths Attending Free or Reduced Programs Sept 1, 2015 – May 31, 2016



88% of schools kids attended free or at reduced rates

District	School	# Visits # Participants	
4	Brown Elementary	1	48
	Coleridge-Taylor	2	96
	Price Elementary	2	70
	Shelby Traditional	. 7	236
Total		12	450
5	Academy at Shawnee	1	58
Total		1 .	58
6	Engelhard Elementary	2	62
	Frayser Elementary	1	40
	Fraysere Elementary	1_	40
(Gutermuth Elementary	2	83
Total		6	225
7	Audubon Elementary	2	95
- · ·	Wilder Elementary	2	92
Total	Ot District	4	187
8	St. Raphael	1	23
T	Hawthorne Elem	1	13
Total	OL	2	36
9	Chenoweth Elementary	2	96
	Dunn Elementary	2	92
	Maupin Elementary	1	53 99
	Our Lady of Lourdes	2 1	
	St. Leonard Pre K	1	34
	Holy Spirit	1	54 25
Total	Maupin Elementary	10	453
10	Camp Taylor Elem	2	82
10	St. Agnes School	1	42
Total	St. Agries School	3	124
12	Greenwood Elementary	2	98
12	St. Lawrence Child Enrichment Ctr	1	21
Total	St. Lawrence Office Child Childrin ent Ot	3	119
13	Auburndale Elementary	2	95
10	Fairdale Elementary	4	188
	St Nicholas	1	26
Total		7	309
14	Eisenhower Elementary	2	97
	St Andrew Academy	1	38
Total		3	135
15	Jacob Elementary	2	100
Total		2	100
16	Kentucky Country Day School	1	64
	Lowe Elementary	1	48
	Chance School	1	36
	Virginia Chance School	1	37
Total		4	185
17	Anchorage Elementary	2	76
Total		2	76
18	Lowe Elementary	<u> </u>	48
Total		1	48
22	Downs Syndrome of Louisville	1	10
	Rock Creek Community Academy	. 1	42
—	St Gabriel school	2	69
Total		4	121
23	Luhr Elementary	2	76
T-4-1	St Bernard	2	80
Total		4	156
24	Blue Lick Elementary	4	158
	St. Rita	11	53
Total		5	211
25	St Nicholas	1	39
Total		1	39
26	Meredith Dunn School	1	37
Total	· · · · · · · · · · · · · · · · · · ·	1	37
Grand Total		75	3,069

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LOUISVILLE NATURE CENTER, INC.

General Information

Organization Number 0119233

Name LOUISVILLE NATURE CENTER, INC.

Profit or Non-Profit N - Non-profit

Company Type KCO - Kentucky Corporation

StatusA - ActiveStandingG - Good

State KY

 File Date
 8/11/1961

 Organization Date
 8/11/1961

 Last Annual Report
 3/9/2016

Principal Office 3745 ILLINOIS AVE.

LOUISVILLE, KY 40213

Registered Agent WALT CHRISTIANSEN, PRES.

3745 ILLINOIS AVENUE LOUISVILLE, KY 40213

Current Officers

PresidentWALT CHRISTIANSONVice PresidentROB HOLTZMANNSecretaryPHYLLIS FITZGERALD

Treasurer

Director

Director

Director

ENDIFY

RON JOLLY

Ken Machtolff

Phyllis Fitzgerald

KEVIN BOWLING

Director MARK ELY
Director Kathy Morris

Individuals / Entities listed at time of formation

Director S SPAFFORD ACKERLY MD

DirectorW G DUNCANDirectorRUTH G BROWNE

Incorporator S SPAFFORD ACKERLY MD

IncorporatorW G DUNCANIncorporatorRUTH G BROWNE

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.

Registered Agent name/address change

3/9/2016 11:52:13 AM 1 page

PDF

	welcome to Fasttrack Org	janization Search		
Annual Report	3/9/2016	1 page	<u>PDF</u>	
Annual Report	2/25/2015	1 page	<u>PDF</u>	
Annual Report	3/20/2014	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	6/13/2013	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	4/27/2012	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	3/23/2011	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	4/7/2010	1 page	<u>tiff</u>	<u>PDF</u>
Registered Agent name/address change	10/13/2009	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	6/25/2009	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	4/4/2008	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/3/2007	1 page	<u>PDF</u>	
Statement of Change	6/14/2006	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	6/13/2006	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	3/28/2005	1 page	<u>tiff</u>	<u>PDF</u>
Statement of Change	11/16/2004	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	9/23/2003	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	8/23/2002	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	6/29/2001	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	4/17/2000	1 page	<u>tiff</u>	<u>PDF</u>
<u>Reinstatement</u>	11/24/1999	2 pages	<u>tiff</u>	<u>PDF</u>
Administrative Dissolution	11/7/1996	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1996	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1995	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1994	3 pages	<u>tiff</u> =	<u>PDF</u>
Annual Report	7/1/1993	3 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1992	3 pages	<u>tiff</u>	<u>PDF</u>
<u>Amendment</u>	3/6/1992	12 pages	<u>tiff</u>	<u>PDF</u>
Statement of Change	3/6/1992	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1991	1 page	<u>tiff</u>	<u>PDF</u>
Sixty Day Notice	9/1/1989	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1989	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1987	1 page	<u>tiff</u>	<u>PDF</u>

Assumed Names

Activity History

-	tetrity ribbet,			
	Filing	File Date	Effective Date	Org. Referenced
	Annual report	3/9/2016 11:54:45 AM	3/9/2016 11:54:45 AM	
	Registered agent address change	3/9/2016 11:52:13 AM	3/9/2016 11:52:13 AM	
	Annual report	2/25/2015 8:01:49 AM	2/25/2015 8:01:49 AM	
	Annual report	3/20/2014 8:16:08 AM	3/20/2014	
	Annual report	6/13/2013 5:05:02 PM	6/13/2013	
	Annual report	4/27/2012	4/27/2012	

Annual report	3 / 23 / 2 ∂1 P M 3:45:33 PM	3/23/2011	
Annual report	4/7/2010 12:08:55 PM	4/7/2010	
Registered agent address change	10/13/2009 1:54:56 PM	10/13/2009	
Annual report	6/25/2009 10:45:30 AM	6/25/2009	
Annual report	4/4/2008 10:56:56 AM	4/4/2008	
Annual report	7/3/2007 10:47:51 AM	7/3/2007 10:47:51 AM	
Registered agent address change	6/14/2006 11:13:41 AM	6/14/2006	
Annual report	6/13/2006 10:28:51 AM	6/13/2006	
Registered agent address change	11/16/2004 3:26:56 PM	11/16/2004	
Principal office change	5/18/2001 11:15:55 AM	5/18/2001	
Reinstatement	11/24/1999	11/24/1999	
Principal office change	11/24/1999	11/24/1999	
Admin Dis. A. report not in	11/7/1996	11/7/1996	
		3/6/1992	NATURE AND CONSERVATION CENTER, INC.

Microfilmed Images

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Amendment	3/6/1992	10 pages
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Amendment	7/10/1979	4 pages
Amendment	11/12/1964	3 pages
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Articles of Incorporation	8/11/1961	3 pages