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

Applicant/Program: Old Louisville Neighborhood Council / Old Louisville Holiday Home Tour Applicant Requested Amount: \$1000.00 Appropriation Request Amount:
Executive Summary of Request Neighborhood Development Funds will be directed to the Old Louisville Neighborhood Council for costs associated with the Old Louisville Holiday Home Tour. This annual event is a fundraiser for the Old Louisville Neighborhood Council's programing through the year.
Is this program/project a fundraiser? Is this applicant a faith based organization? Does this application include funding for sub-grantee(s)? Yes No Yes No
I have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I have read the organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required.
Strict # Sponsor Signature \$1000 Amount Date
Primary Sponsor Disclosure List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.
Approved by:
Appropriations Committee Chairman Date Final Appropriations Amount:

Applicant/Program:				
Additional Disclosure and Signatures				
Additional Council Office Disclosur	e onship you, your family or your legislative assistant have with	n this		
Council Member Signature and Am	ount			
District 1	\$			
District 2	<u> </u>			
District 3	\$			
District 4	\$			
District 5	<u> </u>			
District 6	\$			
District 7	\$			
District 8				
District 9	\$			
District 10	\$			
District 11	\$\$			
District 12	\$			
District 13	\$			
District 14	<u> </u>			

District 15 ______ \$____

Applicant/Program:		
Add	ditional Disclosure and Signatures	
Additional Council Office Dis		stant have with this
District 16	\$	
District 17	\$	
District 18	\$	
District 19	<u> </u>	
	\$	
	\$	
	\$	
	\$	
	\$\$	
	\$\$	
District 26		

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Legal Name of Applicant Organization Old Louisville Neighborhood Council

Program Name and Request Amount Old Louisville Holiday Home Tour / \$1000

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	Yes
Is the funding proposed by Council Member(s) less than or equal to the request amount?	Yes
Is the proposed public purpose of the program viable and well-documented?	Yes
Will all of the funding go to programs specific to Louisville/Jefferson County?	Yes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	Yes
Has prior Metro Funds committed/granted been disclosed?	Yes
ls the application properly signed and dated by authorized signatory?	Yes
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	N/A
Is the entity in good standing with: • Kentucky Secretary of State? • Louisville Metro Revenue Commission? • Louisville Metro Government? • Internal Revenue Service? • Louisville Metro Human Relations Commission?	Yes
Is the current Fiscal Year Budget included?	Yes
Is the entity's board member list (with term length/term limits) included?	Yes
Is recommended funding less than 33% of total agency operating budget?	Yes
Does the application budget reflect only the revenue and expenses of the project/program?	Yes
s the cost estimate(s) from proposed vendor (if request is for capital expense) included?	N/A
s the most recent annual audit (if required by organization) included?	N/A
s a copy of Signed Lease (if rent costs are requested) included?	N/A
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	N/A
Are the Articles of Incorporation of the Agency included?	Yes
s the IRS Form W-9 included?	Yes
s the IRS Form 990 included?	Yes
Are the evaluation forms (if program participants are given evaluation forms) included?	N/A
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	N/A
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	No
Prepared by: Date: 8/31/2017	

SECTION 1 – APPLICANT INFORMATION				
Legal Name of Applicant Organization: Old Louisville Neighborhood Council				
(as listed on: http://www.sos.ky.gov/business/records Main Office Street & Mailing Address: 1340 S. 4th Street, Louisville, KY 40208				
		ddress: 1340 S. 4th Stre	et, Louisville, KY	40208
Website: oldlouisvill			T	
Applicant Contact:		Fields Williams	Title:	Executive Director
Phone:	502-338	3-2893	Email:	shawn.williams@oldlouisville.org
Financial Contact:	Leah St	ewart	Title:	Treasurer
Phone:	502-608	3-7197	Email:	email.leahs@gmail.com
Organization's Repre	sentative	who attended NDF Train	ing:Shawn Fields	Williams
GEO	GRAPHICA	L AREA(S) WHERE PROG	RAM ACTIVITIES A	RE (WILL BE) PROVIDED
Program Facility Loca	ation(s):	1340 S. 4th Street, Louis	sville, KY 40208	
Council District(s):		6th District	Zip Code(s):	40203,40208
	SECTI	ON 2 - PROGRAM REQU	EST & FINANCIAL I	INFORMATION
PROGRAM/PROJECT	NAME:Old	d Louisville Holiday Hom	ne Tour	
Total Request: (\$) 1,000 Total Metro Award (this program) in previous year: (\$) 1000				n) in previous year: (\$) 1000
Purpose of Request (check all t	hat apply):		
Operating F	unds (gen	erally cannot exceed 33%	of agency's total	operating budget)
Programmi	ng/service	s/events for direct benef	it to community or	qualified individuals
Capital Proj	ect of the	organization (equipment	, furnishing, buildir	ng, etc)
The Following are Re	quired Att	achments:		
■ IRS Exempt Status De	eterminatio	n Letter	Signed lease if r	rent costs are being requested
■ Current year project	ed budget		■ IRS Form W9	
Current financial star	tement		Evaluation form	ns if used in the proposed program
■ Most recent IRS Form	■ Most recent IRS Form 990 or 1120-H Annual audit (if required by organization)			required by organization)
Articles of Incorpora	tion (currer	nt & signed)	Faith Based Org	ganization Certification Form, if applicable
Cost estimates from proposed vendor if request is for capital expense				
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.				
Source:	NDF Gran	t	Amount: (\$)	4,000
Source:	EAF Gran	t	Amount: (\$)	2,500
Source:			Amount: (\$)	9
Has the applicant con	Has the applicant contacted the BBB Charity Review for participation? Yes No			Yes No
Has the applicant me	t the BBB (Charity Review Standards	? Yes No	

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SECTION 3 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services: Old Louisville Neighborhood Council

Vision Statement

Historic Old Louisville seeks to be a vibrant and diverse community that welcomes all who call this place home or visit us to enjoy our rich architectural and arts heritage.

Mission Statement

To advocate, promote, and protect Old Louisville's historic architecture and streetscapes within a diverse neighborhood of residents and businesses while advancing artistic and cultural events to build community.

Goals

To be the official voice of Old Louisville, serving as a strong advocate for a safe, clean, healthy community where all can flourish.

To preserve and protect one of the nation's oldest historic preservation districts of Victorian mansions, as well as its distinctive 19th and early 20th century homes and landscapes.

To encourage heritage tourism for enrichment and educational purposes.

To promote artistic and educational events within this culturally diverse neighborhood, thereby building community and fostering cooperation.

To promote neighborhood revitalization and business development.

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Howard Rosenberg, Chairman	December 31, 2017
Jim Brooks, Vice Chairman	December 31, 2017
Leah Stewart, Treasurer	December 31, 2017
Chuck Anderson, Secretary	December 31, 2017
Peggy Heimerdinger, Belgravia Court Association	December 31, 2017
Michael Meador, Central Park West Neighborhood Association	December 31, 2017
Kevin Carman, Garvin Gate Neighborhood Association	December 31, 2017
Stephen Peterson, Limerick Association for Neighborhood Advancement	December 31, 2017
Kim Mowder, Old Louisville Multi-Family Association	December 31, 2017
Roz Fishman, Ouerbacker Court Association	December 31, 2017
Janice Theriot, St. James Court Association	December 31, 2017
Ken Herndon, Second Street Neighborhood Association	December 31, 2017
Bruce Cohen, Seventh Street Edge Neighborhood Association	December 31, 2017
Fim Brooks, South Fourth Street Association	December 31, 2017
Michael Richards, South Third Street Association	December 31, 2017
Becky Medley, The 1300 Association	December 31, 2017
Ray Robinson, Toonerville Trolley Neighborhood Association	December 31, 2017

Describe the Board term limit policy:

The Old Louisville Neighborhood Council Board of Directors are Representatives of the 15 neighborhood associations and the elected executive committee. Board members are chosen by their neighborhood associations and then serve a two year term. The executive committee is elected by the Board of Directors and serves a two year term. Currently, the Board of Directors are serving from January 1, 2016-December 31, 2017.

Three Highest Paid Staff Names	Annual Salary	
Shawn Fields Williams, Executive Director	35,000	
David Williams, Administrative Assistant	12,600	

SECTION 5 - PROGRAM/PROJECT NARRATIVE

A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.):

The Old Louisville Holiday Home Tour is the primary fundraising event for the Old Louisville Neighborhood Council. Now entering its 41st year, this annual event showcases the Historic Old Louisville community and the

Victorian mansions and town homes of Old Louisville. In 2017 the even headquarters for the Holiday Home Tour is the Historic Old Louisville Nark. Ten townhomes, mansions and bed & breakfast inns will be open forganized as an educational and enrichment tour of these historic homes. population and beyond. The Holiday Home Tour uses volunteers from Odrivers, van ambassadors, ticket sellers, and will call assistants. The voluallowing those who cannot afford a ticket, an opportunity to participate i historic homes. Attached rack card and brochure from previous year's tour.	Neighborhood and Visitors Center in Central For tour. This ticketed holiday event is a lt is open to the entire Metro Louisville and Louisville who serve as docents, van unteers receive a ticket for the tour, thus
B: Describe specifically how the funding will be spent including ident The requested funds will be used for printed material (i.e. the ticket broc printing the brochure and marketing materials will exceed the requested	hure) and publicizing the event. The cost of

C: If this request is a fundraiser, please detail how the proceeds will be spent:]
The proceeds from this fundraiser will support the work of the Old Louisville Neighborhood Council. The OLNC serves as the primary advocate for the residents of Old Louisville. The OLNC's Property Improvement Committee oursues tree planting projects, Central Park Improvement efforts, addresses run-down property issues, and graffiti abatement in the community. The OLNC operates arts programming, such as Old Louisville LIVE, bringing free concerts to Central Park. We also offer educational seminars on historic home restoration, gardening, and arts classes. The OLNC has spearheaded the Old Louisville Arts Council and an Old Louisville Business Alliance to work more collaboratively with businesses, arts organizations, universities, museums on issues of common interest and address problems more effectively. A small part of the funds are also used as seed money for the marketing of the Holiday Home Tour for next year.	
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:	Y
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.	
Reimbursements should not be made before application date 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.	
	-

E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served: The Old Louisville Neighborhood Council produces the Old Louisville Holiday Home Tour in part as a way to showcase this historic preservation district. One of the primary benefits of bringing 2500 attendees and many volunteers to the tour is it promotes Old Louisville as a safe, beautiful place to live, work and play. Attendees of the tour are provided historical details about each home they visit. The van ambassadors also share information about the Old Louisville community with guests chosing the van service. Data is collected primarily through speaking to the attendees directly about their experience, the value of the ticket, what improvements could be made. Ticket sales are tracked through the Squareup system. Over the past five years, the Holiday Home Tour sales have steadily increased.
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.
Generally, the Old Louisville Neighborhood Council is always expanding its community partnerships. Within the last
year and a half the OLNC spearheaded an Old Louisville Arts Council with area arts organizations to collaborate and
cross promote events. The OLAC includes: OLNC, Kentucky Shakespeare, Uof L, Ky College of Art and Design, St.
James Court Art Show, Filson Historical Society, Asia Institute Crane House, Conrad Caldwell House Museum,
Filson Historical Society, the Louisville Free Public Library, Garvin Gate Blues Festival, and Vault 1031. In addition,
the OLNC has recently spearheaded an Old Louisville Business Alliance of area businesses in Old Louisville to work
more collaboratively and proactively to solve problems. Those organizations participating to date include: Luckett-
Farley, SO-BRO district businesses, Dan Borsch Restaurants, Bluegrass Uniforms, Bridgehaven, McCulloch
Architects, Craig Machinery and Design, Grover Enterprises, Christian Care Communities, Hyland Insurance, Family
and Children's Place, Barrister Hall- Attorneys, Community Coordinated Child Care, Westerfield-Barre Co., Synergy

In this program specifically, we work collaboratively with the Louisville Bourbon Inn, a local business to host a bourbon tasting offered by Heaven Hill as part of the Holiday Home Tour. We work with Councilman David James in promotion of the HHT and personally volunteers to drive a van. His support through an NDF grant each year helps with the expenses for this important community event. Ten neighbor residents and/or businesses offer their homes and inns for tour each year. The Conrad Caldwell House Museum collaborates with the OLNC in cross promotion of its Victorian Tea held during the Holiday Home Tour. It also opens for a tour during the Friday night VIP Holiday Home Tour event.

Rehabilitation, Aztec Flooring, Old Louisville Brewery, Mary Martin- Semonin Realtor, Louisville Bourbon Inn.

+



SECTION 6 - PROGRAM/PROJECT BUDGET SUMMARY

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

Program/Project Expenses	Column 1 Proposed Metro Funds	Column 2 Non- Metro Funds	Column (1+2)=3 Total Funds
A: Personnel Costs Including Benefits			TRANSPORT TO SERVICE
B: Rent/Utilities			
C: Office Supplies		101	
D: Telephone			
E: In-town Travel			
F: Client Assistance (See Detailed List on Page 8)			
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (See Detailed List on Page 8)	1000.00	9000	10,000
J: Machinery & Equipment			
K: Capital Project			##. 198-201 # 11-0
L: Other Expenses (See Detailed List on Page 8)			
*TOTAL PROGRAM/PROJECT FUNDS			
% of Program Budget	10 %	90 %	100%

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

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	9000.00
Fees Collected from Program Participants	35000.00
Other (please specify)	18700.00
Total Revenue for Columns 2 Expenses **	62700.00

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



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

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7	Column 1	Column 2	Column (1 + 2)=3
(circle one and use multiple sheets if necessary)	Proposed Metro Funds	Non- Metro Funds	Total Funds
ld Louisville Holiday Home Tour	1,000	9,000	10,000
The second secon			
	per stiget of the text of the		
Total	1,000	9,000	10,000

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

	Value of Contribution	Method of Valuation
Volunteers (300 @3hrs each)	15300.00	900*17
Volunteer Committee (2hrs each)	3400.00	10*2*10*17
	18700.00	
Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)		
DONOR INFORMATION REFERS TO WHO MADE STED INDIVIDUALLY, BUT GROUPED TOGETHER ERSON PER WEEK		
gency Fiscal Year Start Date: January 1, 2017 pes your Agency anticipate a significant increas		rom the current fiscal year to th
oes your Agency anticipate a significant increas udget projected for next fiscal year? NO	e or decrease in your budget f	rom the current fiscal year to th
oes your Agency anticipate a significant increas		rom the current fiscal year to th
oes your Agency anticipate a significant increas udget projected for next fiscal year? NO		rom the current fiscal year to th
oes your Agency anticipate a significant increas udget projected for next fiscal year? NO		rom the current fiscal year to th
oes your Agency anticipate a significant increas udget projected for next fiscal year? NO		rom the current fiscal year to th

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SECTION 7 - CERTIFICATIONS & ASSURANCES

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

Standard Assurances

- Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
- Applicant 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 and the funds will not be disbursed to our organization.
- 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 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.

Standard Certifications

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

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

SECTION 8 - CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:

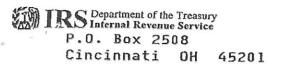
Legal Signatory: (please print):

Shawn Fields Williams

Title:

Executive Director

Phone: 502-338-2893/502-635-5244 Extension: Email: shawn.williams@oldlouisville.org



In reply refer to: 0248153327 Jan. 27, 2015 LTR 4168C 0 31-1106357 000000 00

00021940

BODC: TE

THE OLD LOUISVILLE NEIGHBORHOOD COUNCIL INC 1340 S 4TH ST IN CENTRAL PARK LOUISVILLE KY 40208



030796

Employer Identification Number: 31-1106357
Person to Contact: Ms. Espelage
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Jan. 15, 2015, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in October 1984.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

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 they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

0248153327 Jan. 27, 2015 LTR 4168C 0 31-1106357 000000 00 00021941

THE OLD LOUISVILLE NEIGHBORHOOD COUNCIL INC 1340 S 4TH ST IN CENTRAL PARK LOUISVILLE KY 40208

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Dois P. Kenwright

Doris Kenwright, Operation Mgr. Accounts Management Operations 1

OLNC 2017 Budget

						47111 · Gift Shop
\$0.00	The second secon					47110 · Holiday House Tour
\$0.00						47100 · Event Income
\$54,750.00		\$4,550.00	\$650.00	\$42,750.00	\$6,800.00	i orai 47 ovo . Frogram monte
\$0.00						Total 47000 : Brogram Incomo
\$0.00					-	Total 47500 · Ticket Sales
# C. C.						47500 · Ticket Sales - Other
60.00			The second secon			476001 · Ticket Discount
4.						47500 · Ticket Sales
\$250.00				\$250.00	displaying family being property of the state of the stat	48250,3 - Food Sales
00 000 5\$				\$5,000.00		48250.1 - Alcohol Sales
\$0.00						48250 - Food/Alcohol Sales
\$2,000,00				\$2,000.00		48205 - Beverage Sales
\$0.00						47401 · Merchandise Sales
\$0.00			and the second s			47400 · T-shirt Sales - Other
\$0.00						47400.1 · Sales
\$0.00						47400 · T-shirt Sales
\$0.00				The second secon	The second secon	46420 - Credit Card Rewards
\$400.00				and the same of th	\$400.00	46416 · Membership Dues
						46400 - Other types of Income
\$650.00			\$650.00			46000 - Rental Income
				A CONTRACTOR OF THE PERSON OF		Total 45000 · Investments
						45030 - Interest
						45000 - Investments
\$1,000,000 \$12,000,00	\$500.00			\$6,500.00	\$4,000.00	44100 - NDF/EAF Grants
						44000 - Grant Income
Ì				The second secon		Total 43400 · Direct Public Support
\$2,000.00 \$2,000.00						43460 · Sponsorships
The state of the s					\$0.00	43416 · Walking Tour Booklet Revenue
\$2,400.00					\$2,400.00	43410 · Walking Tour
4.1						43403c - Business
\$4,500,00	\$500.00	\$4,000.00				43403b - Neighborhood Asociations
		\$550.00				43403a - Individual
\$9,000,000 \$38,000,00	To the state of the last of the state of the			\$29,000.00		43403 · Individ, NA, Business Cntrbtns
The second secon						43402 - Gifts in Kind - Goods
				The second secon		43401 - Corporate Contributions
		and the second control of the second second				43400 · Direct Public Support - Other
	-	The second secon			Andrews Andrews and grade process and grade and an artist and artist artist and artist and artist artist and artist artist and artist artist and artist artist artist and artist artis	43400 · Direct Public Support
				of promotion		Income
The series		3				Ordinary Income/Expense
	VToT (Event) HUT (Event)	(Program)	(Program)	(Program)	(Program)	

						\$4,650.00	67000 · Payroll Tax Expense
\$0.00							Total 65200 · Other Types of Expenses
\$1,994.00	The second secon			\$194.00		\$1,800.00	65220 · Insurance - Liability, D and O
\$0.00						Approximate the second	CEOO Culei Types of Expenses
\$3,950.00						\$3,950.00	65200 : Other Times of Empares
\$1,600.00						\$1,000.00	Total 65400 - Marketing - Crist
\$2,350.00			+			\$2,350.00	65100 Marketing Other
\$0.00		4				20000	65100.9 · Weh Related
\$0.00						The same of the sa	65100,7 · Signs
\$0.00							xxxxx - Advertising services
\$200.00				\$200.00			65100 · Marketing
\$1,600,00				\$200.00			65090 · Utilities
9/30.00						\$1,600.00	65060 · Telephone, Telecommunications
\$750.00						\$750.00	65040 · Supplies
\$0.00							65032 · Professional Fees
\$1 000 00						\$1,000.00	65030 · Printing and Copying
\$400.00						\$400.00	65026 · Postage, Mailing Service
\$650.00						\$650.00	65079 · Wembership Dues
\$0.00							65014 · Computer/Tech Supplies
\$660,00					The same of the sa	\$660,00	bb077 · Cleaning & Maintenance
\$0.00							osolo Books, substitutins, reference
\$0.00						-	SECTO Proposition City
\$0.00							65006 · Appreciation Giffs
\$0.00							60507 · Bard Deht Expense
\$0.00						The second secon	60510 · Finance Charge
\$525,00			The statement of the st			40.00	60501 · Amortization Expense
\$0.00	The second secon				The second secon	00 HCB\$	69000 · Property Tax
\$0,00						The state of the second	65000 · Operations
9000							Expense
\$0.00							
	\$57,000.00		\$4 550 00	\$650.00	\$42,750.00	\$6,800.00	Total Income
		805 000 00					Total 47100 · Event Income
60,000.00		40,000.00					Total xxxxx · Victorian Tales of Terror
0,000,00		\$3,500,00					xxxxx · Victorian Tales of Terror - Other
\$0,000,00		\$8,000,00					xxxxx.x · Ticket Sales - Door
\$300.00 \$300.00		\$12,000,00					xxxxx.x · Ticket Sales - Pre-Sale
\$500,00		\$500.00					xxxxx - T-Shirt Sales
50.00	-	The state of the s					ххххх · Gift Shop
\$0.00							xxxxx - Victorian Tales of Terror
\$0.00		4,000					Total 47110 · Holiday House Tour
Ī							47110 · Holiday House Tour - Other
Ī	\$13,000.00						47115.2 · Ticket Sales - Door
00 00 \$29 000 00	\$29,000,00						47115.1 · Ticket Sales - Pre-Sale
000	\$3,000,00						xxxxx - lea Joint Tickets

| | | 80901.3 - Alcohol Permit \$517.00 | \$1,272.00 | 60901.1 - Permit Fees (Metro event) \$225.00 | 60901 - Permits | 60860 - Performance Fees \$25,150.00 | 60800 · Marketing - Other | 60800.5 - Ad-Online \$50.00 | 60800.4 - Ad-Print \$1,000.00 | 60800.3 - Printing \$700.00 | 60800,2 - Graphic Design \$1,000.00 | 60800.1 · Advertising Services \$400.00 | 60800 · Marketing | 60700 · Licenses | 60300 · Equipment Rental \$200.00 | 60250 · Depreciation | 60200 · Cleaning and Maintenance | 60150 · Bank Fees | 61800 · Tours | 60000 · Program Expenses | 62890 · Rent, Parking, Utilities | 62886 · Park Grounds | xxxxx - Printer lease \$350.00
 | 62840 · Equip Rental and Maintenance | 62886 · Tools, Material, and Equipment \$50.00

 | 62800 · Facilities and Equipment | 62100 · Contract Services - Other | 62160 · Outside Contract/Labor Services | 62160 · Computer Support Fees | 62130 · Commissions \$1,100.00 | 62100 · Contract Services
 | 60950.3 · Square Fees | 60950 · Processing Fees | | 5U92U · Registration/Permit Fees | Business Expenses Registration/Permit Fees
 | Support of Other Organization \$2,500.00 \$5,500.00 Business Expenses Registration/Permit Fees | n \$2,500.00 | n \$2,500.00 | pancies panization \$2,500.00 mit Fees | \$1,030.00
n \$2,500.00 |
|-------|----------|-----------------------------------|---------------------------|--|--|---|---|---|---|---|--|---|---|------------------|--|---|---|--|--|---|---|--
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\$750	9450	\$517	\$1,272	\$225
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Other \$25,150.00 ess (Metro event) \$225,150.00 ess (Metro event) \$225.00 \$1,272.00 \$31,272.00 ess (Si,000 \$517.00 | Ind Maintenance \$350.000 Utilities \$500.000 Maintenance \$500.000 Ital \$200.000 Sesign \$400.000 Besign \$1,000.000 S1,000.000 \$1,000.000 Cother \$50.000 Ses (Metro event) \$225.000 Ses (Metro event) \$225.000 Sinzacoo \$1,272.000 Ses (Metro event) \$2750.000 Sinzacoo \$31,270.000 Sinzacoo \$31,270.000 <td> and Equipment \$50.00 </td> <td>ment \$50.00 I, and Equipment \$550.00 Ind Maintenance \$550.00 Utilities \$550.00 Itial \$200.00 \$5700.00 \$400.00 Ing Services \$400.00 Design \$700.00 \$5700.00 \$400.00 e \$500.00 colliner \$25,150.00 ges \$1,000.00 ges \$50,000 ges \$50,000 ges \$51,700.00 ges \$1,000.00 ges \$50,000 ges \$50,000 ges \$1,000.00 ges \$50,000 ges \$51,700.00 ges \$51,700.00</td> <td>ces - Other \$550.00 4 ment 4</td> <td>tatLabor Services ces - Other ment ment</td> <td>poor Feese Services 400 Control ceas - Other \$50.00 ment \$50.00 In and Equipment \$50.00 In and Equipment \$350.00 In and Equipment \$350.00 In an Internance \$350.00 In an Internance \$400.00 In an Internance <</td> <td> ST,100,00 SatUlabor Services SatUlabor Servic</td> <td> ST.100.00 ST.1000.00 ST.1000.00 ST.1000.00 ST.1000.00 ST.1000.00 ST.1000.00 ST.1000.00 ST.1000.0</td> <td> S1,100.00 S1,1</td> <td>reses \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,100.00 \$1,000.00 \$1</td> <td>Ing Services S1.100.00 S1.1 Dort Fees S1.100.00 S1.1 Dort Fees S1.100.00 S1.1 Dort Fees S1.100.00 S1.1 Dort Fees S1.100.00 S1.1 S</td> <td> Samult Fees S1,100.00 S1</td> <td> Semit Fees S2,500,000 S5,500,000 S8,100,000 S8,</td> <td> Pagnantialism \$2,500.00 \$5,500.00 </td> <td> Taylancias </td> <td> SEST Colter SESTODO.00 SESTODO.00 </td> <td> SEST-Other SEST-OTHER </td> | and Equipment \$50.00 | ment \$50.00 I, and Equipment \$550.00 Ind Maintenance \$550.00 Utilities \$550.00 Itial \$200.00 \$5700.00 \$400.00 Ing Services \$400.00 Design \$700.00 \$5700.00 \$400.00 e \$500.00 colliner \$25,150.00 ges \$1,000.00 ges \$50,000 ges \$50,000 ges \$51,700.00 ges \$1,000.00 ges \$50,000 ges \$50,000 ges \$1,000.00 ges \$50,000 ges \$51,700.00 ges \$51,700.00 | ces - 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Net Income	Net Ord	To			xxxxx - Transpor											And the second s							and the second s		And the same of th															
	Net Ordinary Income	Total Expense	Total xxxxx · Event Expenses	xxxxx · Event Expenses - Other	xxxxx - Transportation (Vans, Insurance, Fuel)	xxxxx - Tools, Materials, and Equipment	xxxxx - Contract Services	xxxxx · Supplies	xxxxx · Refreshments	xxxxx · Professional Fees	xxxxx · Postage and Mail Processing	xxxxx.x · Marketing - Other	xxxxx.7 - Signage	xxxxx.5 Ad-online	xxxxx.4 Ad-print	xxxxx.x · Ads	xxxxx.6 - Printing, Other	xxxxx.3- Printing	xxxxx.2 - Graphic Design	xxxxx.1 - Advertising Services	xxxxx · Marketing	xxxxx · Licenses	xxxxx · Equipment Rental	xxxxx · Depreciation	xxxxx· Cleaning and Maintenance	xxxxx· Bank Fees	xxxxx· Tours	xxxxx · Event Expenses	Total 60000 · Program Expenses	xxxxx - Equipment Storage	xxxxx - Equipment Rental	xxxxx - Tools, Materials, Equipment	xxxxx - Outside Contract/Labor Service	62170 - Security	60000 · Program Expenses - Other	61700 · Supplies	61400 · Refreshments	61200 · Professional Fees	61100 · Postage and Mail Processing	xxxxx - Printing and Copying
-\$68,645.00	\$6,800.00	\$75,445.00										The state of the s					www.uduciahrin				no management		The state of the s			manufacturations and			\$75,445.00		And the second s							\$5,380.00		
\$4,936.00	\$42,750.00	\$37,814.00																											\$37,814.00					\$800.00		\$250.00				
\$256.00	\$650.00	\$394.00																											\$394.00											
-\$500.00	\$4,550.00	\$5,050.00																											\$5,050.00	\$500.00	\$400.00	\$500.00	\$1,000.00			\$500,00	\$900.00		\$200.00	\$150.00
\$18.200.00	\$25,000.00	\$6,800.00	\$6,800.00			\$700.00	\$2,000.00	\$800.00	\$400,00						\$300.00	\$1,250.00	\$200.00	\$500,00	\$650.00						\$725.00															
\$46,410.00	\$57,000.00	\$10,590.00	\$10,590.00		\$650.00		\$2,000.00	\$200.00	\$400.00	and the second s	\$600.00	\$300.00	\$350.00	\$450.00		\$1,500.00	\$750.00	\$1,500.00	\$1,350.00		And the second s	\$140.00	\$400.00																	
	- 1	\$13	\$17,3	\$0.00		\$700.00		69	\$8							€9			\$2,0	\$0.00			49	\$0.00	\$725.00	\$0.00	\$0.00	\$0.00	\$118,703.00	\$500.00	\$400,00	\$500.00	\$1,000.00	\$800.00	\$0.00	\$750.00	\$900.00	\$5,380,00	\$200.00	\$150.00

Old Louisville Neighborhood Council INC

Profit & Loss by Class

January through July 2017

Accrual Basis

SOURCE OF THE SOURCE STATE	Tales of Terror	Old Louisville Live	Central Park Improvement	Community Garden	ннт	OLNC	TOTAL
Ordinary Income/Expense Income							·
43400 - Direct Public Support 43401 - Corporate Contributions 43403 - Individ, NA, Business Cntrbtns	0,00 0,00	4,000,00 21,277.50	0.00 2,800.00	0.00 200.00	0.00 500.00	0.00 12,447.72	4,000,00 37,225,22
Total 43400 - Direct Public Support	0.00		2,800.00	200,00		12,447.72	
44600 · Indirect Public Support	0.00	0.00	0.00	0.00	0.00	5.00	5.00
45000 · Investments 45030 · Interest	0.00	0.00	0.00	0.00	0.00	1.05	1.05
Total 45000 - Investments	0.00	0.00	0.00	0.00	0.00	1.05	1.05
46000 · Rental Income 46400 · Other Types of Income	0.00		0.00	0.00		350.00	350.00
46415 · Membership Dues Total 46400 · Other Types of Income	0.00	0.00	0.00	0.00	0.00	345.00	345.00
47000 - Program Income 47250 - Food/Alcohol Sales	0.00	908,27	0.00				
47600 - Program Service Fees	0.00	0.00	0.00	0.00 625.00	0.00	0.00	908.27 625.00
Total 47000 - Program Income	0.00		0.00	625.00		0.00	1,533.27
47100 · Event Income 47115.3 · HHT&Tea Joint Tickets 47118 · T-Shirt Sales	0.00 50.60	0.00 0.00	0.00 0.00	0.00	542,10 0.00	0.00 0.00	542,10 50,60
47115.2 · Ticket Sales - Door Total 47100 · Event Income	50.60	214.86	0.00	0.00	0.00	0.00	214.86
Total Income	50.60		2,800,00	825,00		13,148,77	807.56 44,267.10
Cost of Goods Sold					1,042,10	13,148,77	44,207,10
50002 · Beverages COGS 55000 · Performance Fees	0.00	696,95 9,750.00	0.00	0.00	0,00 0,00	0,00 300,00	696.95 10,050.00
Total COGS	0.00	10,446.95	0,00	0.00		300.00	10,746,95
Gross Profit	50.60	15,953.68	2,800.00	825.00	1,042.10	12,848.77	33,520.15
Expense 66001 · Payroll Expenses 67000 · Payroll Tax Expense 66010 · Admin Payroll Expenses 66001 · Payroll Expenses - Other	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	1,005.18 23,928.84 85.85	1,005.18 23,928.84 85.85
Total 66001 - Payroll Expenses	0.00		0.00	0.00	0.00	25,019.87	25,019.87
60930 · Bank Fees 60090 · Program & Event Expenses 61900 · Marketing	0.00	0.00 985.00	0.00	0.00	0.00 170.00	94.65 90.00	94.65 1,245.00
61800 - Tools, Materials, & Equipment 61101 - Printing&Copying	0.00	0.00 1,173,14	614.57 36.53	96,34	0,00	34.99	745.90
60700 - Licenses 61100 - Postage and Mail Processing	0.00	392.48 3.08	0.00	0.00	0.00 0.00	733.66 0.00	2,166.74 392.48
61200 - Professional & Contract Fees 61400 - Refreshments	0.00	2,932.48 66.90	0.00 536.56	0.00	0.00 0.00	80.76 1,262.00 0.00	152.37 4,194.48 603.46
61700 · Supplies 60000 · Program & Event Expenses - Other	0.00	60,69 625,00	241.29 0.00	0.00	0.00	53.36 0.00	355.34 625.00
Total 60000 · Program & Event Expenses	0.00		1,497,48	96,34	393.41	2,254,77	10,480.77
60900 - Business Expenses							
60920 - Registration/Permit Fees Total 60900 - Business Expenses	0.00	0.00	0.00	0.00	0.00	15.00	15.00
62180 - Contract Services							10.00
62135 - ExDirector Contract 62130 - Commissions 62150 - Computer Support Fees 62160 - Outside Contract/Labor Services	0.00 0.00 0.00 0.00	0.00 350.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	5,384.60 1,500.00 111.27 0.00	5,384,60 1,850,00 111,27 0.00
Total 62100 · Contract Services	0.00	350.00	0.00	0.00	0.00	6,995.87	7,345.87
65000 · Operations 65101 · OLNC Donations 65038 · Rent Expense 65011 · Cleaning & Maintenance	0.00 0.00 0.00	0,00 0,00 0,00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	200.00 120.00 480.00	200.00 120.00 460.00
65014 · Computer/Tech Supplies 65019 · Membership Dues	0.00	0.00	0.00	0.00	0.00	107.40 100.00	107.40 100.00
65025 - Postage, Mailing Service 65030 - Printing and Copying	0.00 0.00	0.00 0.00	0.00	0.00	00.0	12.25 224.35	12.25 224.35
65032 · Professional Fees 65040 · Office Supplies	0.00	0.00 21.19	0.00 0.00	0.00 0.00	0.00	2,825.00 258.28	2,825.00 279.47
65060 - Telephone, Telecommunications 65090 - Utilities	0.00 0.00	115.38 0.00	0.00	0.00 55.35	0.00	793.89 70.06	909.27 125.41
65100 - Marketing 65100.9 - Web Related	0.00	0.00	0.00	0.00	0.00	1,815.46	1,815.46
Total 65100 · Marketing	0.00	0.00	0.00	0.00	0.00	1,815.46	1,815.46
Total 65000 · Operations	0.00	136.57	0.00	55.35	0.00	6,986.69	7,178.61
65200 - Other Types of Expenses 65222 - Special Other Insurances 65220 - Insurance - Liability, D and O	0.00	1,449.00 0.00	0.00	0.00 104.00	0.00 0.00	0.00 967,95	1,449.00 1,071.95
Total 65200 · Other Types of Expenses Total Expense	0.00	1,449,00	0.00	104,00	0.00	967.95	2,520.95
Net Ordinary Income	50,60	8,174.34 7,779.34	1,497.48	255.69 569.31	393.41 648,69	42,334.80 -29,486.03	52,655.72 -19.135.57
Other Income/Expense Other Income 80025 - Miscellaneous Revenue							
Total Other Income	0.00	0.00	0.00	0.00	0.00	126,00	126,00
Other Expense 80050 · Miscellaneous Expense							
80050 · Miscellaneous Expense Total Other Expense	0.00	0.00	0.00	0.00	0.00	68.44	68.44
Net Other Income	0.00	0.00	0.00	0.00	0.00	57.56	57.56
Net Income	50.60	7,779.34	1,302.52	569,31	648.69	-29,428.47	-19,078.01

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

Open to Public Inspection

Department of the Treasury

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

inte		wenue Service Finindimiation about Form 990-EZ and its instructions is at		
Α	For th	ne 2016 calendar year, or tax year beginning , and ending		
В		f applicable: C Name of organization	D Emple	oyer identification number
	Address	change		
	Name o		31	-1106357
	Initial re	(Northstate	E Telepi	none number
Ц	Final re	turn/lerminated 1340 SOUTH FOURTH ST-IN CENTRAL PAR	50	2-635-5244
	Amende	d return City or town, state or province, country, and ZIP or foreign postal code		Exemption
	2.3	ion pending LOUISVILLE KY 40208		per ▶
G	Accou	nting Method:		if the organization is not
1		ite: DLDLOUISVILLE.ORG	120000000000000000000000000000000000000	ach Schedule B
J	Tax-ex			0-EZ, or 990-PF).
K	Form	of organization: X Corporation Trust Association Other	,	3, 3. 333 1. /.
L	Add fin	es 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets		
(Pa	rt II, colu	umn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	> \$	125,671
F	Part I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instruc	tions for	Part I)
		Check if the organization used Schedule O to respond to any question in this Part I		X
	1	Contributions, gifts, grants, and similar amounts received	1	64,630
	2	Program service revenue including government tees and contracts	2	61,037
	3	Membership dues and assessments	3	
	4	Investment income	4	4
	5a	Gross amount from sale of assets other than inventory 5a		
	b	Less: cost or other basis and sales expenses 5b		,
	С	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	а	Gross income from gaming (attach Schedule G if greater than		
ne		\$15,000) 6a		
Revenue	ь	Gross income from fundraising events (not including \$ of contributions	7 1	
Re		from fundraising events reported on line 1) (attach Schedule G if the		
		sum of such gross income and contributions exceeds \$15,000) 6b		
	С	Less: direct expenses from gaming and fundraising events 6c		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract		
		line 6c)	6d	
	7a	Gross sales of inventory, less returns and allowances 7a		
	b	Less: cost of goods sold 7b		
	C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		
	8	Other revenue (describe in Schedule O)	8	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	125,671
	10	Grants and similar amounts paid (list in Schedule O)	10	2,571
	11	Benefits paid to or for members	11	
es	12	Salaries, other compensation, and employee benefits	12	54,478
ens	13	Professional fees and other payments to independent contractors		7,582
Expenses	14	Occupancy, rent, utilities, and maintenance	14	2,709
ш	15	Printing, publications, postage, and snipping	15	6,151
	16	Other expenses (describe in Schedule O)	16	66,300
	17	Total expenses. And lines to through to	17	139,791
ş	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-14,120
Net Assets	19	Net 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)		140 ===
¥ A	20		19	142,778
N	21	Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year Combine lines 18 through 20	20	100 (50
For		Net assets or fund balances at end of year. Combine lines 18 through 20	21	128,658

Form **990-EZ** (2016)

Part II Balance Sheets (see the instr Check if the organization used S			question in this	Part I	II			X
				(A) Beg	ginning of ye	ear		(B) End of year
22 Cash, savings, and investments					87,4	489	22	73,979
23 Land and buildings			1			0	23	
24 Other assets (describe in Schedule O)					64,	104	24	65,258
25 Total assets			,		151,	593	25	139,237
26 Total liabilities (describe in Schedule O)				1900 - 2002	8,8	315	26	10,579
27 Net assets or fund balances (line 27 of column					142,		27	128,658
Part III Statement of Program Serv				s for	Part III)			
Check if the organization used S						X		Expenses
What is the organization's primary exempt purpose?							IRA	equired for section
See Schedule 0								1(c)(3) and 501(c)(4)
Describe the organization's program service accompli	lishments for a	each of its three la	mest program sen	rices		_		anizations; optional for
as measured by expenses. In a clear and concise m								ers.)
persons benefited, and other relevant information for							001	1613.
28 VARIOUS NEIGHBORHOOD EVENTS TO ENHA			CHOMONOR THE				ΙТ	
						• • • • •		
NEIGHBORHOODS UNIQUE HISTORY AND A				• • • • • •			1 1	
HOLIDAY HOUSE TOUR, TALES OF TERRO						Ш.	20-	46,089
			eck here		P	ш	28a	40,003
29 OPERATION OF OLD LOUISVILLE INFORM NEIGHBORHOOD ORGANIZATIONS AND EVE			SUPPORT OF	•••••	• • • • • • • • • • • • • • • • • • • •			
• • • • • • • • • • • • • • • • • • • •								
(Grants \$) If this ame						Щ.	29a	44,413
30 CENTRAL PARK IMPROVEMENTS, COMMUNITY					······ •	ш		
JU CENTRAL FARR IMPROVEMENTS, COMMUNI.	I GARDEN,	AND REIGHBORNO	OD PAINTENANCE	·····		· · · · · ·	1 1	
							1 1	
(O			ale base			. —	20-	10 424
(Grants \$) If this amo		foreign grants, che	eck here		>		30a	10,424
31 Other program services (describe in Schedule O))	foreign grants, che	eck here		▶			
Other program services (describe in Schedule O) (Grants \$ 2,571) If this amount	ount includes	foreign grants, che foreign grants, che	eck here		▶	Ó	31a	5,031
Other program services (describe in Schedule O (Grants \$ 2,571) If this amo Total program service expenses (add lines 28a	ount includes a through 31a)	foreign grants, che foreign grants, che	eck here		Þ		31a 32	5,031 105,957
Other program services (describe in Schedule O) (Grants \$ 2,571) If this amount	ount includes a through 31a s, and Key E	foreign grants, che foreign grants, che) mployees (list eac	eck here		nsated—s		31a 32 e instru	5,031 105,957
Other program services (describe in Schedule Of 2,571) If this amount of the service expenses (add lines 28a Part IV List of Officers, Directors, Trustee Check if the organization used Schedule Of 1	ount includes a through 31a s, and Key E	foreign grants, che foreign grants, che mployees (list eacond to any questio	ck here ch one even if not com in this Part IV (c) Reportable	comper	nsated — s	th ber	31a 32 e instru	5,031 105,957 actions for Part IV)
Other program services (describe in Schedule O (Grants \$ 2,571) If this amount of the service expenses (add lines 28a Part IV List of Officers, Directors, Trustee	ount includes a through 31a s, and Key E	foreign grants, che foreign grants, che mployees (list eac ond to any questio (b) Average hours per week	ck here th one even if not con in this Part IV (c) Reportable compensation (Forms W-2/1099-N	omper	nsated — s (d) Heal contribution benefit	th bers to e	31a 32 e instru nefits, mployee	5,031 105,957 actions for Part IV)
Other program services (describe in Schedule O (Grants \$ 2,571) If this amount of the service expenses (add lines 28a Part IV List of Officers, Directors, Trustee Check if the organization used Schedule (a) Name and title	ount includes a through 31a s, and Key E	foreign grants, che foreign grants, che mployees (list eacond to any questio	ck here th one even if not come in this Part IV (c) Reportable compensation (Forms, W 2/400 N	omper	nsated — s	th bers to e	31a 32 e instru nefits, mployee	5,031 105,957 actions for Part IV)
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D	2
Page	-3

P	Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in instructions for Part V) Check if the organization used Schedule O to respond to any question in this	the Part V		П
33			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		x
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the	į .		1
	change on Schedule O (see instructions)	34		X
35a				
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b		35b		
C	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	1	X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
	during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a				
b	Did the organization file Form 1120-POL for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:	7.00		188
а				
b		333		
40a	, , , ,			
	section 4911 ▶; section 4912 ▶; section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year	1 1		l
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			
	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958	835		
d				
-	40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		x
41	List the states with which a copy of this return is filed ▶ None			
42a	The organization's books are in care of ▶ ERIC COWLEY Telephone no. ▶	502-293	1-9	471
	1340 SOUTH FOURTH ST			
	Located at ► LOUISVILLE KY ZIP + 4 ►	40208		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
_	Financial Accounts (FBAR).			37
С	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country: ▶	42c		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			
*3	and enter the amount of tax-exempt interest received or accrued during the tax year			
	and enter the amount of tax-exempt milerest received of accided during the tax year		V	Na
14a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		Yes	No
	completed instead of Form 000 F7	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			-
	completed instead of Form 990-EZ	44b		X
С	Did the organization receive any payments for indoor tanning services during the year?	44c		X
	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	440		
955	explanation in Schedule O	44d		
i5a	Did the organization have a controlled entity within the meaning of section 512(h)(13)?	450		X
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the		100	
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ (see instructions)	45b		X

_		
Par	OF	_

46	Did th	ne organization engage, directly or indirectly, in polit ndidates for public office? If "Yes," complete Schedu	ical campaign activitie	s on behalf of or in opp	position	46	Yes	No X
Pa	rt VI	Section 501(c)(3) organizations onl All section 501(c)(3) organizations must a 50 and 51. Check if the organization used Schedule	y nswer questions 47	-49b and 52, and co	omplete the tables for I	lines		
47	Did th	e organization engage in lobbying activities or have		77			Yes	No
4,		K (0.4 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 .				47		х
48		organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," c	omplete Schedule E		48	t	X
49a	Did the	e organization make any transfers to an exempt no	on-charitable related of	rganization?	***************************************	49a	1	X
b	If "Yes	s," was the related organization a section 527 organ	· · · · · · · · · · · · · · · · · · ·				1	
50		lete this table for the organization's five highest cor	mpensated employees	(other than officers, dir	ectors, trustees, and key	· · · · · · · · · · · · · · · · · · ·		-
	emplo	yees) who each received more than \$100,000 of co	ompensation from the	organization. If there is	none, enter "None."			
		(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimate other cor		
No	ne							
				300 (000 000 000 000 000 000 000 000 000				
							*	
f 51	Comple	ete this table for the organization's five highest con	npensated independer	nt contractors who each	received more than			
	\$100,0	(a) Name and business address of each independent			pe of service	(c) Compe	nsation	
No	ne							
						100 Me 80 100 U		
						-		
d	Total n	number of other independent contractors each recei	ving over \$100,000	>				
52	Did the	e organization complete Schedule A? Note: All sec	tion 501(c)(3) organiza	ations must attach a				
		eted Schedule A				X Yes		No
Jnder rue, c	penalties orrect, a	s of perjury, I declare that I have examined this return, in nd complete. Declaration of preparer (other than officer) is	cluding accompanying so s based on all informatio	hedules and statements, a n of which preparer has ar	nd to the best of my knowle ny knowledge.	dge and belie	f, it is	
	$\neg \Gamma$	N						
Sign		Signature of officer		Da				
Here		HOWARD ROSENBERG		CHAIRMAN				
	ᆛ	Type or print name and title Print/Type preparer's name	Description of the state of the					
n . :		Print Type preparers name	Preparer's signature		Date Check	if PTIN		
Paid Prepa	and the same of th	Mary C Morrow			07/27/17 self-em	12007	69897	
Jse (Onto F	Firm's address > Mary Morrow & As			Firm's EIN ▶	73-16	8846	<u> </u>
		Firm's address > 1347 S 3rd St St Louisville, KY	40208-3300		Phone no. 50	02-419	-802	25
May 1	he IRS	discuss this return with the preparer shown above			ritore ito.	▶ X Ye		No
						Form 99		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number OLD LOUISVILLE NEIGHBORHOOD COUNCIL 31-1106357 Part I 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 12, 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)(iii). Enter the hospital's name, 4 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 7 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.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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). 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12q, 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 I, 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). (iv) Is the organization (iii) Type of organization (v) Amount of monetary (vi) Amount of listed in your governing organization (described on lines 1-10 support (see other support (see above (see instructions)) document? instructions) instructions) (A) (B) (C) (D)

(E)

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

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

Sec	cuon A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	13,047	14,518	112,149	63,752	64,101	267,567
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	13,047	14,518	112,149	63,752	64,101	267,567
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.						267,567
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	13,047	14,518	112,149	63,752	64,101	267,567
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10				DAG -		267. 567
12	Gross receipts from related activities, etc.	(see instructions)	<u>l</u>			12	267,567
13	First five years. If the Form 990 is for the	• • • • • • • • • • • • • • • • • • • •		h or fifth tay year			61,041
	organization, check this box and stop here						ьП
Sec	tion C. Computation of Public Su		age	************************			
14	Public support percentage for 2016 (line 6,			(f))		14	100.00%
15	Public support percentage from 2015 Scher	dule A, Part II, line	14	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		15	100.00%
16a	33 1/3% support test-2016. If the organize	zation did not check	the box on line 13	, and line 14 is 33	1/3% or more, ch		
	box and stop here. The organization qualifi	ies as a publicly su	pported organization	on			▶ X
b	33 1/3% support test-2015. If the organize	cation did not check	a box on line 13 c	or 16a, and line 15			
	this box and $\ensuremath{\text{stop}}$ here. The organization $\ensuremath{\textbf{q}}$	ualifies as a public	ly supported organi	zation		222	▶□
17a	10%-facts-and-circumstances test—2016	If the organization	n did not check a b	ox on line 13, 16a,	or 16b, and line 1	4 is	
	10% or more, and if the organization meets						
	Part VI how the organization meets the "fac						
	organization						▶ 🔲
b	10%-racts-and-circumstances test—2015	. If the organization	n did not check a b	ox on line 13, 16a,	16b, or 17a, and	line	
	15 is 10% or more, and if the organization				and a series of the series of		
	Explain in Part VI how the organization me						
	supported organization						▶ ∐
8	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		
	instructions						▶∐
					90	hedule A /Form 990	or 000 E7) 2016

Schedule A (Form 990 or 990-EZ) 2016

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

(Complete only if you checked the box on line 10 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.)

Sec	ction A. Public Support		are toote noted i	pictics c	ompioto i dit i	•-/	
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						<u> </u>
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						
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						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			-			
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
202	tion B. Total Support					1	
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	(4) 2012	(5) 2010	(6) 2014	(u) 2013	(6) 2010	(i) Total
10a							3,516.1-1.0-1.0-1.0-1.0-1.0-1.0-1.0-1.0-1.0-1
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
1	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
2	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
3	Total support. (Add lines 9, 10c, 11, and 12.)						
4	First five years. If the Form 990 is for the organization, check this box and stop here			商		(c)(3)	▶ □
Sec	tion C. Computation of Public Su	pport Percent	tage	Section of the sectio			
5	Public support percentage for 2016 (line 8,	column (f) divided	by line 13, column	ı (f))		15	%
6	Public support percentage from 2015 Scher	dule A, Part III, lin	e 15			16	%
	tion D. Computation of Investmen						
7	Investment income percentage for 2016 (lin	ie 10c, column (f)	divided by line 13,	column (f))			%%
8	Investment income percentage from 2015 S						%%
9a	33 1/3% support tests—2016. If the organ						, \sqcap
b	17 is not more than 33 1/3%, check this box 33 1/3% support tests—2015. If the organ						▶ ⊔
	line 18 is not more than 33 1/3%, check this						▶□
0	Private foundation. If the organization did						
	9		,	.,			

Schedule A (Form 990 or 990-EZ) 2016

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in 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 how the organization determined that the supporte			
	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.
- 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 when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in 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 4a "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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 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 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).
- 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?
- Ç 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
- 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).
- 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).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a 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
- 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
- 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
- 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.
- 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.)

	Yes	No
1		
2		
За		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
7		
8	A.S.A.	
9a		
9b		
9c		
10a		
10b	or 990-E	71.00

Page 4

Parent of Supported Organizations.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

the role played by the organization in this regard.

trustees of each of the supported organizations? Provide details in

of its supported organizations? If "Yes," describe in

3a

Sched	ule A (Form 990 or 990-EZ) 2016 OLD LOUISVILLE NEIGHBORHO	OD COU	NCIL 31-1106	3357 Page 6
Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting	Organizati	ions	<u> </u>
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust or instructions. All other Type III non-functionally integrated supporting organizations	n Nov. 20, 19	970 (explain in Part VI).	iee
Sect	tion A - Adjusted Net Income	must comple	(A) Prior Year	(B) Current Year
1	Net short-term capital gain	1		(optional)
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		-+-+		
col	lection of gross income or for management, conservation, or			
	intenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).	8		
Secti	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			\(\frac{1}{2} \)
ins	tructions for short tax year or assets held for part of year):			
	a Average monthly value of securities	1a		
	b Average monthly cash balances	1b		
	c Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
	e Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see	instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Section	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

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

Schedule A (Form 990 or 990-EZ) 2016

emergency temporary reduction (see instructions).

instructions).

	V Type III Non-Functionally Integrated 509(a)(Current Year
	Amounts paid to supported organizations to accomplish exempt pu	imoses		
	Amounts paid to perform activity that directly furthers exempt purp			
	organizations, in excess of income from activity	osco or supported		
	Administrative expenses paid to accomplish exempt purposes of s	unnorted organizations		
		apported organizations		
	Amounts paid to acquire exempt-use assets			
_	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.	enization is responsive		
	Distributions to attentive supported organizations to which the organizations to which the organizations	inization is responsive		i
	(provide details in Part VI). See instructions.			
	Distributable amount for 2016 from Section C, line 6			
0	Line 8 amount divided by Line 9 amount		(2)	(iii)
		(i)	(ii) Underdistributions	("') Distributable
	Section E - Distribution Allocations (see instructions)	Excess Distributions		Amount for 2016
			Pre-2016	Amount for 2016
	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required-explain in Part VI). See			
_	instructions. Excess distributions carryover, if any, to 2016:			
	Excess distributions carryover, if any, to 2010.			
a				Value of the
b	C 2042			
	From 2013			
	From 2014			
	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Carryover from 2011 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from			
	Section D, line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h		The second secon	1
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а			the second secon	
	Excess from 2013			
b	Excess from 2013 Excess from 2014			

	m 990 or 990-EZ) 2016 OLD LOUISVILLE NEIGHBORHOOD COUNCIL 31-1106357 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E,
	lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE O (Form 990 or 990-EZ)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

OLD LOUISVILLE NEIGHBORHOOD COUNCIL

Employer identification number 31–1106357

Form 990-EZ, Part I, Line 16 -	Other Exp	enses	
Description		Amount	
Expenses			
MARKETING - OPERATIONS	\$	5,727	·····
BANK FEES	\$	120	
REFRESHMENTS	\$	1,082	
SUPPLIES	\$	589	
TELEPHONE	\$	1,801	
MISC	\$	15	
EQUIPMENT RENTAL	\$	869	
GIFT SHOP	\$	117	
DUES	\$	149	
SUPPLIES	\$	1,981	
SMALL FURNITURE	\$	87	
TECH SUPPLIES	\$	163	
FINANCE CHARGE	\$	82	
LIABILITY & D&O INS	\$	1,863	
WORKERS COMP	\$	126	·
OLD LOUISVILLE LIVE	\$	28,577	
TOURS	\$	2,386	
HOLIDAY HOUSE TOUR	\$	5,047	•••••
PARK GROUNDS	ş	9,262	
COMMUNITY GARDEN	\$	228	
TALES OF TERROR	\$	4,600	
STREET SIGNS	\$	411	

Schedule O (Form 990 or 990-EZ) (2016) Page 2 Name of the organization Employer identification number OLD LOUISVILLE NEIGHBORHOOD COUNCIL 31-1106357 PROP TAX - JUBILEE PARK \$ 523 Non-investment Depreciation 495 Total \$ 66,300 Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances Description Amount PRIOR YEAR ADJUSTMENT Form 990-EZ, Part II, Line 24 - Other Assets Description Beg. of Year End of Year Grants Receivable 1,000 \$ 5,550 Accounts Receivable 600 \$ Prepaid Expenses and Deferred Charges 336 \$ 0 FF&E 62,908 \$ 62,908 Less Accumulated Depreciation 3,387 \$ 5,135 3,556 \$ 3,556 Less Accumulated Amortization 909 \$ 1,621 Total \$ 64,104 \$ 65,258 Form 990-EZ, Part II, Line 26 - Other Liabilities Description Beg. of Year End of Year Accounts Payable and Accrued Expenses 1,051 \$ 2,222 CREDIT CARDS 0 \$ 4,785 PAYROLL LIABILITIES 3,398 7,696 \$ SALES TAX PAYABLE 68 \$ 174 Form 990-EZ, Part III - Primary Exempt Purpose Page 1 of 2

Schedule O (Form 990 or 990-EZ) (2016) Name of the organization	Page
OLD LOUISVILLE NEIGHBORHOOD COUNCIL	Employer identification number 31–1106357
To advocate, promote, and protect Old Louisville's histo	
and streetscapes within a diverse neighborhood of reside	ents and businesses
while advancing artistic and cultural events to build co	ommunity.
Form 990-EZ, Part III, Line 31 - All Other Accomplishmen	t
•	
Support of TOONERVILLE TROLLEY NEIGHBORHOOD ORGANIZATION	
·	
	••••
	•••••
	Dama 0 = 5 0
	Page 2 of 2

Department of the Treasury

(99)

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

► Information about Form 4562 and its separate instructions is at

OMB No. 1545-0172

Internal Revenue Service Name(s) shown on return

OLD LOUISVILLE NEIGHBORHOOD COUNCIL

Identifying number 31-1106357

	ness or activity to which this form relates Indirect Deprecia	ation						
		ense Certain Pro	perty Under Sec	tion 179	301000 TO 10000			
		e any listed proper			complete Da	rt I		
1	Maximum amount (see instruct	4:\					Ta	F00 000
2	Total cost of section 179 prope	erty placed in service (s	ee instructions)				1	500,000
3	Threshold cost of section 179	property before reduction	on in limitation (see in	netructione\	•••••••	• • • • • • • • • • • • • • • • • • • •	2	2 010 000
4	Reduction in limitation. Subtract	t line 3 from line 2. If z	ern or less enter .				3	2,010,000
5	Dollar limitation for tax year. Subtrac	t line 4 from line 1. If zero	or less enter .O. If man	ind filing congretoly	ann instructions	• • • • • • • • • • • • •	4	
6		otion of property	The state of the s	(b) Cost (business use			5	
	The state of the s			(b) Oust (business use	e Oray)	c) Elected cost		
7	Listed property. Enter the amou	int from line 20			т			
8	Total elected cost of section 17	O proporty Add amoun	to in column (a) lines		7			
9	Tentative deduction. Enter the	s property. Add arribun					8	
10	Carryover of disallowed deduction	on from line 12 of trains	0045 5 4500				9	
11	Carryover of disallowed deduction	on from line 13 of your	2015 Form 4562		· • • • • • • • • • • • • • • • • • • •		10	
12	Business income limitation. Enter	er the smaller of busine	ess income (not less i	than zero) or line	5 (see instructi	ons)	11	
	Section 179 expense deduction	. Add lines 9 and 10, bi	ut don't enter more th	an line 11	· 		12	
13 Note	Carryover of disallowed deduction: Don't use Part II or Part III belo	on to 2017. Add lines 9	and 10, less line 12		13			
							-	
	Special Deprecia	ation Allowance a	na Other Depre	ciation (Don'	t include liste	ed properi	y.) (S	ee instructions.)
14	Special depreciation allowance		ther than listed prope	erty) placed in se	rvice			
	during the tax year (see instruct	tions)					14	
15	Property subject to section 168	(f)(1) election					15	
16	Outer depressation findiduting At	uno)					16	1,556
_ Pa	art III MACRS Deprecia	ation (Don't include	le listed property. Section		tions.)			
17	MACRS deductions for assets p	placed in service in tax					17	192
18	If you are electing to group any assets place	ced in service during the tax ye	ear into one or more general	asset accounts, check	here	▶ □	", 1	132
	Section B-	Assets Placed in Ser	vice During 2016 Ta	x Year Using th	e General Dep	reciation S	ystem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment used only-see instructions)	on se (d) Recovery	(e) Convention	(f) Metho		(g) Depreciation deduction
19a	3-year property					1		
b	5-year property					 	-	
С	7-year property					1		
d	10-year property					†		
е	15-year property						-+	
f	20-year property					 	-+	
g	25-year property			25 vrs.		S/L	$\neg +$	
	Residential rental			27.5 yrs.	MM	S/L		
	property			27.5 yrs.	MM	S/L	-	
i	Nonresidential real			39 yrs.	MM			
	property			35 yis.	MM	S/L S/L	\rightarrow	
	Section C—A	ssets Placed in Servi	ce During 2016 Tax	Year Using the	Alternative De	preciation 9	Systom	
20a	Class life				THOMALINE DE	T	ysten	·
b	12-year			12 yrs.		S/L	\dashv	
	40-year				NAN.	S/L		
	rt IV Summary (See in	nstructions)		40 yrs.	MM	S/L		
21	Listed property. Enter amount fro						T	
22	Total. Add amounts from line 12,		nee 10 and 20 in cal-	ump (a) and lie-	21 Ente-		21	
_	here and on the appropriate lines	s of vour return Parton	rehine and 9 some—	tions cooling	∠ı. ⊑⊓ler			4 844
23	For assets shown above and plan				JUDIS		22	1,748
	portion of the basis attributable to	ocu ili service duririg tr	e current year, enter	uie				
	portion of the pasis attributable to	J SECTION ZOOM COSTS			23			

OHD	TOOTSATTIFE	NETCHBOKHOOD	COUNCIL	31-11063	57		
Form 4562 (2					•		
Part V	Listed Prope	erty (Include automobi	los cortain a	thor vohisles			

	property les first) Date placed in service Basis for depreciation (business/investment use only) Recovery period Convention Depreciation deduction Convention (i) Elected section 179 cost														
	Section A	—Depreciation	and Othe	r Inform	nation (Caution:	See the	instructi	ons for	limits fo	r passe	nger au	omobiles	i.)	
24a Do you ha	ive evidence to support	the business/investme	ent use claimed	!?			1 1	-		Comment of the commen					. IN
(a) Type of property (list vehicles first)	Date placed	Business/ investment use	S			asis for dep ousiness/inv	estment	Recover	ry	(g) Method/		(h) Depreci	ation	Elected	(i) section 179
						service d	uring			T				17500	
					use (se	e instruc	tions)				25				
26 Property	used more than	50% in a qualifie	ed business	use:											
									T		\top			T	
		%						<u>L</u>							
					- 1							1,,,,			
27 Property	used 50% or less	in a qualified b	usiness use	·-	L									<u> </u>	
	4404 0070 01 1033	in a qualified b	usiness use	<u>. </u>	\top			Γ	T-						
oper and		%							S/	1_	- 1				
		70							+ 3	<u>-</u>	+				
		%						ĺ	S/	١.	1				
28 Add amo	ounts in column (h)	, lines 25 through	h 27. Enter	here ar	nd on lin	e 21. par	ge 1				8				
	ounts in column (i),										.0		29		
							Use of		and the second second second second		*******		. 23		
Complete this	section for vehicles	s used by a sole	proprietor,	partner,	or othe	r "more t	han 5%	owner,"	or relate	ed perso	n. If voi	ı provide	ed vehicle	35	
o your employ	ees, first answer t	ne questions in	Section C to	see if	you mee	et an exc	eption to	comple	ling this	section	for thos	e vehicl	es.	20	
				1	(a)	(b)	(0	;)		(d)	1	(e)		f)
	siness/investment			ven	icle 1	Veh	ide 2	Vehic	de 3	Vel	ticle 4	Vel	nicle 5	Veh	cle 6
the year	(don't include con	nmuting miles)									ariyesi				
	nmuting miles driv		ear												
32 Total oth	er personal (nonc	ommuting)													
miles dri															
	es driven during th	e year. Add		1		1						1		1	
	through 32			ļ		<u> </u>									
	vehicle available for	5		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	g off-duty hours?				ļ						-				
	vehicle used prima														
	owner or related p									10.77.00.000.00					
o is another	r vehicle available			<u> </u>						L	L	<u> </u>	<u> </u>		
unswer these q	uestions to determ	nine if you meet	an exception	on to cor	-	s aren't									
	owners or related			s).											
your emp				ion to completing Section B for vehicles used by employees who aren't bits all personal use of vehicles, including commuting, by our bits personal use of vehicles, except commuting, by your		Yes	No								
		olicy statement	that probibi	te noreo	nal uso	of vobiel									
emplovee	s? See the instruc	tions for vehicle	s used by a	comorate	officers	directo	rs or 1%	or mon	uuriy, D	y your					
9 Do you to	eat all use of vehic	cles by employe	es as perso	nal use?											
	rovide more than f					mation fr	om vour	employe	es abo	ut the					
	e vehicles, and reta												1	1	
1 Do you m	neet the requireme	nts concerning	qualified au	tomobile	demon	stration u	use? (Se	e instruc	tions.)			• • • • • • • • •			
Note: If y	our answer to 37,	38, 39, 40, or 4	1 is "Yes," o	don't con	nplete S	ection B	for the c	overed v	ehicles						
Part VI	Amortization														
		1	(b)			((c)		(d)		(e)			(f)	
	(a) Description of costs		Date amor	rtization	1		ole amount	- 1	Code se		Amortiza period		Amortizat	ion for this	year
		1	begir								percenta				28
2 Amortizati	on of costs that be	egins during you	r 2016 tax	year (se	e instruc	tions):									
												T			
	on of costs that be											43			712
4 Total, Add	d amounts in colur	nn (f) Soo tha i	netructions :	for when	n to man							1			TAC.

OLNC OLD LOUISVILLE NEIGHBORHOOD COUNCIL 31-1106357 Federal Asset Report

07/27/2017 2:17 PM

FYE: 12/31/2016

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	Per Conv Meth	Prior	Current
1 3	MACRS: COPIER FURNITURE & FIXTURES ADDITIONAL FF&E	5/11/12 9/01/14 1/01/15	825 749 655 2,229	X X X	412 374 327 1,113	5 HY 200DB 7 HY 200DB 7 HY 200DB	754 520 374 1,648	47 65 80 192
2 5	Depreciation: LEGACY LEASEHOLD IMP WINDOWS LEGACY ADDITIONAL Total Other Depreciation	9/01/14 9/08/15 1/01/15	48,867 9,900 1,912 60,679	-	48,867 9,900 1,912 60,679	39 MO S/L 39 MO S/L 39 MO S/L	1,618 74 47 1,739	1,253 254 49 1,556
	Total ACRS and Other Depre	ciation	60,679	=	60,679		1,739	1,556
	ization: PROGRAM START-UP ADDITIONAL START-UP	9/01/14 1/01/15	988 2,568 3,556		988 2,568 3,556	5 MOAmort 5 MOAmort	395 514 909	198 514 712
	Grand Totals Less: Dispositions and Transfe Less: Start-up/Org Expense Net Grand Totals	rs - =	66,464 0 0 66,464	;- =	65,348 0 0 65,348		4,296 0 0 4,296	2,460 0 0 2,460

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OLNC OLD LOUISVILLE NEIGHBORHOOD COUNCIL
31-1106357 KY Asset Report

FYE: 12/31/2016

Asset Description	Date In Service	Cost	Basis for Depr	KY Prior	KY Current	Federal Current	Difference Fed - KY
Prior MACRS: 1 COPIER 3 FURNITURE & FIXTURES 7 ADDITIONAL FF&E	5/11/12 9/01/14 1/01/15	825 749 655 2,229	825 749 655 2,229	754 520 374 1,648	47 65 80 192	47 65 80 192	0 0 0
Other Depreciation: 2 LEGACY LEASEHOLD IMP 5 WINDOWS 6 LEGACY ADDITIONAL Total Other Depreciation	9/01/14 9/08/15 1/01/15	48,867 9,900 1,912 60,679	48,867 9,900 1,912 60,679	1,618 74 47 1,739	1,253 254 49 1,556	1,253 254 49 1,556	0 0 0 0
Total ACRS and Other I	epreciation =	60,679	60,679	1,739	1,556	1,556	0
Amortization: 4 PROGRAM START-UP 8 ADDITIONAL START-UP	9/01/14 1/01/15 =	988 2,568 3,556	988 2,568 3,556	395 514 909	198 514 712	198 514 712	0 0 0
Grand Totals Less: Dispositions Less: Start-up/Org Exper Net Grand Totals	ise _	66,464 0 0 66,464	66,464 0 0 66,464	4,296 0 0 4,296	2,460 0 0 2,460	2,460 0 0 2,460	0 0 0

OLNC OLD LOUISVILLE NEIGHBORHOOD COUNCIL 31-1106357 AMT Asset Report

07/27/2017 2:17 PM

FYE: 12/31/2016

Asset	Description MACRS:	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	Per Conv Meth	Prior	Current
1	COPIER	5/11/12	825		X	412	5 HY 200DB	754	47
3	FURNITURE & FIXTURES	9/01/14	749		X	374	7 HY 200DB	520	65
7	ADDITIONAL FF&E	1/01/15	655		X .	327	7 HY 200DB	374	80
	*		2,229			1,113		1,648	192
Other 2 5 6	Depreciation: LEGACY LEASEHOLD IMP WINDOWS LEGACY ADDITIONAL Total Other Depreciation	9/01/14 9/08/15 1/01/15	0 0 0 0			0 0 0	0 HY 0 HY 0 HY	0 0 0 0	0 0 0 0
	Total ACRS and Other Depre	ciation	0			0		0	0
	Grand Totals Less: Dispositions and Transfe Net Grand Totals	ers	2,229 0 2,229			1,113 0 1,113		1,648 0 1,648	192 0 192

OLNC- OLD LOUISVILLE NEIGHBORHOOD COUNCIL
31-1106357 Bonus Depreciation Report

07/27/2017 2:17 PM

FYE: 12/31/2016

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
Activity: Fo	orm 990, Page 1							
	IER NITURE & FIXTURES ITIONAL FF&E	5/11/12 9/01/14 1/01/15	825 749 655		0 0 0	0 0 0	413 375 328	412 374 327
		Form 990, Page 1	2,229		0	0	1,116	1,113
		Grand Total	2,229		0	0	1,116	1,113

OLNC OLD LOUISVILLE NEIGHBORHOOD COUNCIL 31-1106357 Depreciation Adjustment Report

FYE: 12/31/2016

All Business Activities

07/27/2017 2:17 PM

Form Unit Asse	t Description	TaxAMT	AMT Adjustments/ Preferences
MACRS Adjustme Page 1 1 Page 1 1 Page 1 1	tts: COPIER FURNITURE & FIXTURES ADDITIONAL FF&E	47 47 65 65 80 80 192 192	0 0 0 0

OLNC OLD LOUISVILLE NEIGHBORHOOD COUNCIL
31-1106357 Future Depreciation Report FYE: 12/31/17

FYE: 12/31/2016

Form 990, Page 1

07/27/2017 2:17 PM

Asset	Description	Date In Service	Cost	Tax	AMT	
Prior N	MACRS:					
1 3 7	COPIER FURNITURE & FIXTURES ADDITIONAL FF&E	5/11/12 9/01/14 1/01/15	825 749 655 2,229	24 47 58 129	24 47 58 129	
Other]	Depreciation:					
2 5 6	LEGACY LEASEHOLD IMP WINDOWS LEGACY ADDITIONAL	9/01/14 9/08/15 1/01/15	48,867 9,900 1,912 60,679	1,253 254 49 1,556	0 0 0 0	
	Total Other Depreciation Total ACRS and Other Depreciation		60,679	1,556	0	
Amortiz	<u>ration:</u>					
4 8	PROGRAM START-UP ADDITIONAL START-UP	9/01/14 1/01/15	988 2,568 3,556	197 513 710	0 0	
	Grand Totals		66,464	2,395	129	

FYE: 12/31/2016

OLNC OLD LOUISVILLE NEIGHBORHOOD COUNCIL
31-1106357 KY Future Depreciation Report FYE: 12/31/17

Asset	Description	Date In Service	Cost	KY
Prior M	MACRS:			
1 3 7	COPIER FURNITURE & FIXTURES ADDITIONAL FF&E	5/11/12 9/01/14 1/01/15	825 749 655 2,229	24 47 58 129
<u>Other</u>	Depreciation:			
2 5 6	LEGACY LEASEHOLD IMP WINDOWS LEGACY ADDITIONAL	9/01/14 9/08/15 1/01/15	48,867 9,900 1,912	1,253 254 49
	Total Other Depreciation		60,679	1,556
	Total ACRS and Other Depreciation		60,679	1,556
Amortiz	zation:			
4 8	PROGRAM START-UP ADDITIONAL START-UP	9/01/14 1/01/15	988 2,568 3,556	197 513 710
	Grand Totals		66,464	2,395

Form **990**

Name

Two Year Comparison Report

2015 & 2016

For calendar year 2016, or tax year beginning

ending

Taxpayer Identification Number

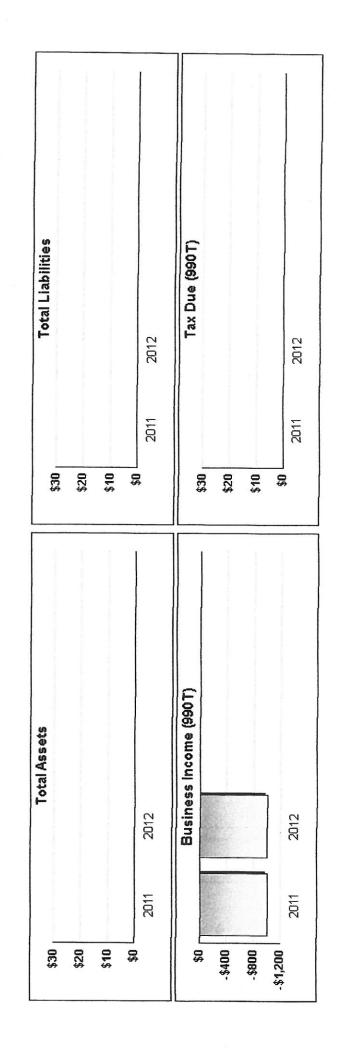
31-1106357

OLD LOUISVILLE NEIGHBORHOOD COUNC	IL		31-3	1106357
		2015	2016	Differences
1. Contributions, gifts, grants	1.			
2. Membership dues and assessments	2.			
3. Government contributions and grants				
4. Program service revenue				
5. Investment income	5.			
6. Proceeds from tax exempt bonds	6.			
7. Net gain or (loss) from sale of assets other than inventory				
Net income or (loss) from fundraising events	3.7073349			
9. Net income or (loss) from gaming				
10. Net gain or (loss) on sales of inventory				
11. Other revenue				
12. Total revenue. Add lines 1 through 11	12.			
13. Grants and similar amounts paid	13.			
14. Benefits paid to or for members				
15. Compensation of officers, directors, trustees, etc.	15.			
16. Salaries, other compensation, and employee benefits	16.			
17. Professional fundraising fees				
18. Other professional fees				
19. Occupancy, rent, utilities, and maintenance	19.			
20. Depreciation and Depletion				
21. Other expenses	E 00.25			
22. Total expenses. Add lines 13 through 21	22.			
23. Excess or (Deficit). Subtract line 22 from line 12	23.			
24. Total exempt revenue	24.			
25. Total unrelated revenue				
26. Total excludable revenue	26.			
26. Total excludable revenue 27. Total assets 28. Total liabilities 29. Retained earnings				
28. Total liabilities				
29. Retained earnings				
30. Number of voting members of governing body	30.	8		
31. Number of independent voting members of governing body		8		
32. Number of employees	32.	2		
33. Number of volunteers	33.			

Name OLD LOUISVILLE Business activity profit/loss Capital gains/losses Partner and S Corp gain/loss Rental income* Debt-financed income*	E NEIGHBORHOOD	HOOD COUNCIL			Emplo 31	Employer Identification Number 31-1106357
Business activity profit/loss Capital gains/losses Partner and S Corp gain/loss Rental income*						
Business activity profit/loss Capital gains/losses Partner and S Corp gain/loss Rental income*	2012	2013	2014	2015	2016	2017
Partner and S Corp gain/loss Rental Income* Debt-financed income*						
Rental income* Debt-financed income*						
Dept-inial red income						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income						
Total trade or business income.						
Compensation of officers, ect.						
Other salaries and wages						
d maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						
	Contributions			Exempt R	Exempt Revenue (Loss)	
\$30			\$30		The second secon	
\$20			\$20			
6			-			
016			DL#			
0\$			0\$			
2011 2012			2011	2012		
£xpenses	Expenses Deductions		\$30	Net Exel	Net Exempt Revenue	
			<u></u>			
\$20			\$20			
\$10			\$10			
08			\$			
2011 2012			2011	2012		

Form 990T	-			Tax Retu	Tax Return History			2016
Name	OLD LOUISVILLE NEIGHBORHOOD	EIGHBO	f 1	COUNCIL			Empk 31	Employer Identification Number 31-1106357
	2012	12	2013		2014	2015	2016	2017
Other deductions								
Net operating loss deduction	deduction							
Specific deduction		1,000	1	1,000				
Income after expense and deductions		-1,000	T-	-1,000				
Income tax (corporate or trust)	te or trust)							
Other taxes								
Total taxes								
General business credit	edit							
Other credits								
Net tax after credits	ø							
Estimated tax payments	ents							
Other payments								
Balance due/Overpayment	payment							

^{*} Income shown net of expenses



7/27/2017 2:17 PM 2,134 650 9,111 48,893 249 61,041 Amount ٠O٠ Schedule A, Part II, Line 12 - Current year OLNC OLD LOUISVILLE NEIGHBORHOOD COUNCIL Federal Statements Description OLD LOUISVILLE TOURS COMMUNITY GARDEN GHOST WALK/TALES OF TERROR HOLIDAY HOUSE TOURS GARVIN GATE BANK INTEREST 31-1106357 FYE: 12/31/2016 Total

Form W-9

(Rev. December 2014) 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.

	I de Nicola de la constanta de										
	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Old Louisville Neighborhood Council										
Je 2.	2 Business name/disregarded entity name, if different from above										
Print or type Specific Instructions on page	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate single-member LLC ☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶						4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any)				
Print or type	Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the tax classification of the single-member owner.		ove for	code	(if any	rom FA					
0 0	✓ Other (see instructions) Address (number, street, and apt. or suite no.)	Requester	'e namo	1				713100 17			
e G	200 to 100 to 10	riequester	SHarrie	and auc	11 655 (1	opuone	ш				
Š	1340 S 4th Street										
See	6 City, state, and ZIP code										
Ø	Louisville, KY 40208-2350										
	7 List account number(s) here (optional)										
Par	Taxpayer Identification Number (TIN)										
	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to av		ocial se	curity n	umbe	r					
backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>											
TIN on page 3. Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for unidelines on whose number to enter							_				
							_				
guidelines on whose number to enter. 3 1 - 1 1 0 6 3 5 7						7					
Part II Certification											
Unde	penalties of perjury, I certify that:										
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and											
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and											
3. I a	m a U.S. citizen or other U.S. person (defined below); and										
4. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	g is correc	ct.								
becau intere gener	ication instructions. You must cross out item 2 above if you have been notified by the IRS the last you have failed to report all interest and dividends on your tax return. For real estate transfer paid, acquisition or abandonment of secured property, cancellation of debt, contributions to ally, payments other than interest and dividends, you are not required to sign the certification, ctions on page 3.	actions, ite o an indivi	em 2 do dual re	es not tiremen	apply t arra	. For i	nortg ent (If	jage RA), a	and		
Sign Here	Signature of U.S. person hown Gelds Filliams Director Da	nte > 5	/30	//7	7						

General Instructions

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

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

Purpose of Form

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

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

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

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

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

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number o 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, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.

FILED IN OFFICE A 29567

GARTICLES OF INCORPORATION

ORIGINAL COPY FILED SECRETARY OF STATE OF KENTUCKY, FRANKFORT, KENTUCKY

OF

THE OLD LOUISVILLE INFORMATION CENTER, INC.

MAY 1 6 1983

I, THE UNDERSIGNED, for the purpose of forming a non-profit, non-stock corporation, under and pursuant to the laws of the Commonwealth of Kentucky, and more particularly Chapter 273 of the Kentucky Revised Statutes, hereby certify as follows:

ARTICLE I

The name of the Corporation shall be:

THE OLD LOUISVILLE INFORMATION CENTER, INC.

ARTICLE II

The duration of the Corporation shall be perpetual.

ARTICLE III

The principal place of business of the Corporation is to be located at 1340 So. Fourth Street (in Central Park), Louisville, Kentucky, 40208 and such other places in said city or elsewhere as its Board of Directors may by resolution designate.

The name and address of the registered agent for service of process is:

Richard L. Janes 1340 So. 4th Street (in Central Park) Louisville, Kentucky 40208

ARTICLE IV

The Corporation is organized and shall be operated exclusively for charitable and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1954 (or corresponding provisions of any later Federal tax laws), including

for such purposes the making of distributions to organizations and individuals for the purpose of engaging in activity falling within the purposes of the Corporation and permitted for an organization exempt under said Section 501(c)(3).

The purposes of the Corporation shall be more specifically

stated as follows:

1) To operate a resource center for the residents of the Old Louisville neighborhood which will provide a wide variety of educational material, information, and other services to help them meet social, health, welfare, educational and cultural needs.

2) To engage in educational and charitable activity designed to lessen neighborhood tensions and to encourage and pro-

mote community cooperation and pride.

3) To engage in educational and charitable activity designed to combat neighborhood deterioration and to promote com-

munity revitalization and development.

4) To encourage, promote, and provide activity for neighborhood youth designed to instill in them a friendly and cooperative spirit and to advance their educational and cultural development.

ARTICLE V

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

ARTICLE VI

The Corporation shall be empowered to do all acts reasonable and necessary and within the laws of the State of Kentucky, in particular those enumerated in KRS 273.171, to further its purposes set out in Article IV, except as follows and as otherwise stated in these Articles:

a) No substantial part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing or distribution of statements), any political campaign on behalf of any candidate for public office.

- b) Notwithstanding, any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1954 or the corresponding provisions of any subsequent Federal tax laws. If and so long as the Corporation is a private foundation as defined in Section 509(a) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws:
 - l) The Corporation shall distribute its income for each taxable year at such time and in such manner as not to become subject to the tax on undistributed income imposed by Section 4942 of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.
 - 2) The Corporation shall not engage in any act of self-dealing as defined in Section 4941(d) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.
 - 3) The Corporation shall not retain any excess business holdings as defined in Section 4943(c) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.
 - 4) The Corporation shall not make any investments in such manner as to subject it to tax under Section 4944 of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.
 - 5) The Corporation shall not make any taxable expenditures as defined in Section 4945(d) of the Internal Revenue Code of 1954, or corresponding provisions of any later Federal tax laws.

ARTICLE VII

The names and addresses of the incorporators are:

INCORPORATOR

MAILING ADDRESS

Richard L. Janes

1409 So. Brook Street Louisville, Kentucky 40208

ARTICLE VIII

The names and addresses of the members of the initial Board of Directors are:

Richard L. Janes 1409 So. Brook Street Louisville, Kentucky 40208

Carolyn Beall 1216 So. Floyd Street Louisville, Kentucky 40203

Rose Greenough Nett 940 So. 6th Street Louisville, Kentucky 40203

ARTICLE IX

The initial By-Laws shall be adopted by the initial Board Thereafter, the Corporation shall be governed by of Directors. the By-Laws.

ARTICLE X

The officers and members of this Corporation shall not be held personally liable for any debt or obligation of the Corporation solely because of their position as officers and members of the Corporation.

ARTICLE XI

In the event of dissolution of the Corporation, the Board of Directors shall, after paying or making provision for the payment of all liabilities of the Corporation, dispose of all assets of the Corporation exclusively for the purposes of the Corporation, in such manner, or to such organizations organized and operated exclusively for charitable or educational purposes. sively for charitable or educational purposes as shall at the time qualify as an exempt organization under Section 501(c)(3) of the Internal Revenue Code of 1954 (or corresponding provisions of any later Federal tax laws), as the Board of Directors shall determine.

The remaining assets, if any, shall be disposed of by the Circuit Court of the county in which the principal office for

the Corporation is then located, exclusively for such purposes or to such organizations as said Court shall determine are organized and operated exclusively for such purposes.

ARTICLE XII

Amendments to these Articles shall be made pursuant to the provisions of K.R.S. 273.263.

IN TESTIMONY WHEREOF, witness the signatures of the Incorporator of this Corporation on this 2 day of way

Diose Jan

Before me, the undersigned authority, personally appeared RICHARD L. JANES and being first duly sworn, acknowledged that he was an incorporator of the aforementioned Corporation, and that he signed the foregoing Articles of Incorporation as his free act and deed.

Witness my signature and seal of office this 2 day of May, 1983.

My Commission Expires: 8-16-86

NOTARY PUBLIC, STATE-AF-LARGE, KENTUCKY

This Document Prepared By:

JEFFREY B. SEGAL ATTORNEY AT LAW LEGAL AID SOCIETY, INC. 425 W. Muhammad Ali Blvd. Louisville, Kentucky 40202 (502) 584-1254

ARTICLES OF AMENDMENT

WE, THE UNDERSIGNED, duly elected President and Secretary of the Old Louisville Information Center, Inc., hereby certify that said Corporation is a nonstock, nonprofit corporation incorporated on May 2, 1983 under the laws of the Commonwealth of Kentucky, Chapter 273 of the Kentucky Revised Statutes more particularly.

We further certify that the following Amendment was adopted at a duly constituted meeting of the Board of Directors held on June II, 1984, pursuant to K.R.S. 273.261, that a quorum was present, and that said amendment received at least two-thirds of the votes which directors present were entitled to cast.

We further certify that the following is the Amendment so adopted which shall be filed with the Secretary of State and other such necessary and proper parties.

That Article IV, Section I of this Corporation as presently filed with the Secretary of State shall be changed to read:

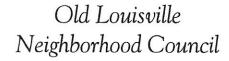
FROM: "To operate a resource center for the residents of the Old Louisville neighborhood which will provide a wide variety of educational material, information, and other services to help them meet social, health, welfare, educational and cultural needs."

TO: "To operate a resource center, open to the public, which will provide a wide variety of educational material, information, and other services to help people meet social, health, welfare, educational and cultural needs.

That the following be added as a new article, Article XIII:

"The Board of Directors shall consist of nine (9) Directors. They shall be the Chairperson, Vice-Chairperson, Secretary and Treasurer of the Old Louisville Neighborhood Council, plus five (5) other Directors elected by the Old Louisville Neighborhood Council and who shall be members in good standing of one of the consistuent block clubs of the Old Louisville Neighborhood Council."

	RICHARD T. CALLAWAY, PRESIDENT
	MARTHA CHISM, SECRETARY
STATE OF KENTUCKY) COUNTY OF JEFFERSON)	•
The foregoing Articles of Am day of <u>SEPTEMBER</u> , President, and Martha Chism	1985, by Richard T. Callaway
Witness my hand and official	Secretary, of the Old Louisville cky corporation, on behalf of the Corporation. seal this 10 day of SEPTEMBER 1985. Deary Public, State at Large, KY commission expires Apr. 23, 1989. NOTARY PUBLIC, KENTUCKY, STATE-AT-LARGE
JEFFREY B. SEGAL, ATTORNEY-AT-LAW LEGAL AID SOCIETY, INC. 425 W. Muhammad Ali Blvd. Louisville, Kentucky 40202 (502)-584-1254	LODGED BY AND RECORDED AND RECORDED JIM "POP" MALONE J.C.C. ORIGINAL COEN FILED FRANCOR, INCLORE CCT. 9.4 1005
	OCT 24 1985 Dreject Plais -2- BOOK 346 PAGE 17 STATE





The Old Louisville Neighborhood Council, Inc.

On July 22, 2014, the board of directors for the Old Louisville Neighborhood Council (Federal EIN # 61-0933474), a 501 (c)4 tax-exempt nonprofit organization, unanimously voted to dissolve the corporation. On August 22, 2014, the Articles of Dissolution were filed with the Commonwealth of Kentucky. All assets previously controlled by the Old Louisville Neighborhood Council were transferred to the Old Louisville Information Center, a 501 (c)3 tax-exempt nonprofit organization.

On July 22, 2014, the board of directors for the Old Louisville Information Center (Federal EIN # 31-1106357) adopted an amendment of Article I, effectively changing the corporation's name to the Old Louisville Neighborhood Council, Inc. On August 22, 2014, articles of amendment were filed with the Commonwealth of Kentucky.

Old Louisville Neighborhood Council, INC Executive Committee as of January 2015:

Howard Rosenberg, Chairman Jason Scott, Vice Chairman Leah Wiseman, Secretary Eric Cowley, Treasurer

Phone: (502) 635-5244

Address: The Old Louisville Neighborhood Council, Inc.

1340 S. 4th Street in Central Park Louisville, KY 40208-2350

Email: olnc@bellsouth.net

Website: www.oldlouisville.org

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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 8/19/2014 11:12 AM Fee Receipt: \$5.00

ARTICLES OF DISSOLUTION OF THE OLD LOUISVILLE NEIGHBORHOOD COUNCIL, INC.

- 1. The name of the Corporation is The Old Louisville Neighborhood Council, Inc.
- 2. The Resolution to Dissolve and the Corporation's Plan of Distribution were adopted at a meeting of the members held on July 22, 2014 at which a quorum was present, and such resolution and plan received at least two-thirds (2/3) of the votes that members present at such meeting or represented by proxy were entitled to cast.
- 3. All debts, obligations and liabilities of the Corporation have been paid and discharged.
- 4. The Corporation's assets have been distributed, in accordance with the Corporation's Articles of Incorporation and its Plan of Distribution, to The Old Louisville Information Center, Inc., an organization described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended.
- 5. All of the Corporation's remaining property and assets have been transferred, conveyed or distributed in accordance with the provisions of KRS 273.161 to KRS 273.390.
 - 6. There are no suits pending against the Corporation in any court.

I declare under penalty of perjury under the laws of Kentucky that the foregoing is true and correct.

Howard Rosenberg President

Date: July 29, 2014

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Document No.: DN2014184423 Lodged By: WYATT TARRANT COMBS Recorded On: 08/20/2014 09:56:11 Total Fees: 11.00 Transfer Tax: .00 County Clerk: BOBBIE HOLSCLAW-JEFF CO KY Deputy Clerk: EVEMAY

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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 8/19/2014 11:12 AM Fee Receipt: \$8.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 584-3490 www.sos.ky.gov

Articles of Amendment (Domestic Nonprofit Corporation)

NPA

Pursuant to the provisions of KRS 14A and KRS Chapter 273, the undersigned applies to amend articles and, for that purpose, submits the following statements:

1. The name of the corporation on record with the Office of the Secretary of State is:

The Old Louisville Neighborhood Council, Inc.

(The name must be identical to the name on record with the Secretary of State.)

2. The text of each amendment adopted: Article IV (4): Upon dissolution of the Council, the Board of Directors shall, after paying or making provision for the payment of all liabilities of the Council, dispose of all the assets of the Council exclusively for the purpose of the Council in such manner, or to such organization or organizations established and operated exclusively for charitable purposes as shall at the time qualify under Sec. 501(c)(3) of the Internal Revenue Code of 1986, as amended, as the Board of Directors shall determine.

3. The date of adoption of each amendment was July 22, 2014

- 4. Check either a, b or c (whichever is applicable):
 - a. ______ The amendment(s) was (were) duly adopted by a quorum present at such meeting and that such amendment received at least two-thirds (2/3) of the votes which members present at such meeting or represented by proxy were entitled to cast.

b. The amendment(s) was (were) duly adopted by consent in writing and was (were) signed by all members

entitled to vote with respect thereto.

c. The amendment(s) was (were) duly adopted by the board of directors and such amendment(s) received the vote of a majority of the directors in office since there are no members or members entitled to vote.

5. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is (Delayed effective date and/or time)

I deciare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.

Signature of Officer or Chairmen of the Board

Howard Rosenberg

President

July 22, 2014

Printed Name

Title

Date

(01/12)

Document No.: DN2014104422 Lodged By: WYATT TARRANT COMBS Recorded On: 08/20/2014 09:55:39 Total Fees: 11.00 Transfer Tax: 00 County Clerk: BOBBIE HOLSCLAW-JEFF CO KY Deputy Clerk: EVEMAY

END OF DOCUMENT

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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 8/19/2014 11:15 AM Fee Receipt: \$8.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

		WINIE .	
Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Amendment (Domestic Nonprofit Corporation)		NPA
	RS 14A and KRS Chapter 273, the undersigned applies statements:	s to amend articles	and, for that
1. The name of the comoration	on record with the Office of the Secretary of State is:		
	formation Center, Inc.		
	name on record with the Secretary of State.)		
2. The text of each amendmen	Article is The name of the compression shall be The	Old Louisville Neighbori	nood Council, Inc.
			And the second second
			Congression of the Asian
	hd. 22 2044		
The date of adoption of each	amendment was July 22, 2014		·
4. Check either a, b or c (whiche	ver is applicable):		
amendment received at by proxy were entitled to	old(s) was (were) duly adopted by a quorum present at a i least two-thirds (2/3) of the votes which members pres o cast. It(s) was (were) duly adopted by consent in writing and	ent at such meeting	or represented
c The amendmen	pect thereto. It(s) was (were) duly adopted by the board of directors a the directors in office since there are no members or m	and such amendme	nt(s) received
	ve upon filing, unless a delayed effective date and/or tin		
or the delayed effective date car	nnot be prior to the date the application is filed. The date	· (Doin	yed effective date
designs under namelty of narium	y under the laws of Kentucky that the forgoing is true ar		indfor time)
deviate under paymenty dispersor		ia 30/130t.	
THIV	Howard Rosenberg	President	July 22, 2014
signature of Officer or Chairman of th	ne Board Printed Name	Title	Date
	•		
01/12)		Lodged By: WY Recorded On:	
		Total Fees: Transfer Tax:	11.00 .00 BOBBIE HOLSCLAW-JEFF CO KY
		Deputy Clerk:	EAENAA UNTORTHM-1514 CR KA

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THE OLD LOUISVILLE NEIGHBORHOOD COUNCIL, INC.

General Information

Organization Number

Name

THE OLD LOUISVILLE NEIGHBORHOOD COUNCIL, INC.

Profit or Non-Profit

KCO - Kentucky Corporation

A - Active G-Good

N - Non-profit

Company Type

Status

Standing

File Date State

KY

5/16/1983

5/16/1983 Organization Date

1340 S. 4TH ST.(IN CENTRAL PARK) 6/13/2017 Last Annual Report Principal Office

Registered Agent

OLD LOUISVILLE NEIGHBORHOOD COUNCIL INC. 1340 S. 4TH. ST.

LOUISVILLE, KY 40208

IN CENTRAL PARK

LOUISVILLE, KY 40208

Current Officers

President

Howard Rosenberg

James Brooks Vice President

Secretary

Chuck Anderson

ames Brooks Leah Stewart Treasurer Director

Director

Leah Stewart

Director

Charles Anderson

Individuals / Entities listed at time of formation

Director

RICHARD L JANES

RICHARD L JANES COROLYN BEALL Incorporator Director Director

ROSE GREENOUGH NETT

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.

6/13/2017 1 page
6/28/2016 6/30/2015 6/30/2014
tough land

PDF	PDF	PDF	PDF	PDF	PDF
tiff	tiff	tiff	tiff	tiff	tiff
1 page					
3/22/1993	3/27/1992	7/1/1991	7/1/1991	7/1/1990	7/1/1989
Annual Report					

Assumed Names

Activity History

Org. Referenced				THE OLD LOUISVILLE INFORMATION CENTER, INC.
File Date Effective Date	6/13/2017 11:33:07 AM 6/13/2017 11:33:07 AM	6/28/2016 3:54:17 PM 6/28/2016 3:54:17 PM	6/30/2015 11:30:17 AM 6/30/2015 11:30:17 AM	Amendment - Change name 8/19/2014 11:15:23 AM 8/19/2014
Filing	Annual report 6,	Annual report 6,	Annual report 6/	Amendment - Change name 8,

Microfilmed Images