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

Applicant/Program: Portland Festival	InC.
Applicant Requested Amount: # 10,000	
Appropriation Request Amount: \$10,000	

Portland Festival expenses for event Security Parks, SWM Szervices, barricades, picnic tables and portalets - June 1-2, 2018 **Executive Summary of Request**

 Is this program/project a fundraiser?
 Yes
 No

 Is this applicant a faith based organization?
 Yes
 No

 Does this application include funding for sub-grantee(s)?
 Yes
 No

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

Cheri B. Hamilton Primary Sponsor Signature

\$ 8,500

5-21-18

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 Final Appropriations Amount:

Date

1 | Page Effective May 2016 Applicant/Program:

Fortland Festival, The.

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

Council Member Signature and Amount

District 1	\$
District 2	\$
District 3	\$
District 4 Jallara etten Junt	\$\$1500-
District 5 Cheri B. Hamilton	\$\$ 8,500
District 6	\$
District 7	\$
District 8	\$
District 9	
District 10	
District 11	
District 12	\$
District 13	\$
District 14	\$
District 15	\$

2 | Page Effective May 2016

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION	
Legal Name of Applicant Organization Partland Festival, Are	
Program Name and Request Amount Partland Jetical, #10,000	
Parliena Artival, #10,000	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	Hes
Is the funding proposed by Council Member(\$) less than or equal to the request amount?	yes
Is the proposed public purpose of the program viable and well-documented?	ues
Will all of the funding go to programs specific to Louisville/Jefferson County?	Mes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	·ues
Has prior Metro Funds committed/granted been disclosed?	
Is the application properly signed and dated by authorized signatory?	
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	ing s
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	m
 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?	Jes
Is the entity's board member list (with term length/term limits) included?	itses
s 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?	· tres
s the cost estimate(s) from proposed vendor (if request is for capital expense) included?	NA
s the most recent annual audit (if required by organization) included?	NA
s a copy of Signed Lease (if rent costs are requested) included?	.HA
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	NA
Are the Articles of Incorporation of the Agency included?	yes
s the IRS Form W-9 included?	Mes
s the IRS Form 990 included?	NA
Are the evaluation forms (if program participants are given evaluation forms) included?	.nu
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	na
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant net the BBB Charity Review Standards?	·NO
Prepared by: $Mq q (cb)$ Date: $5 - Z - 18$	

		SECTION 1 - APPLI	CANT INFORMATIO	ON
Legal Name of Applic (as listed on: http://www.		Portland For	tival Inc	
		ddress: 3329 Northwest	ern Parkway Louis	sville KY 40212
Website: NA				
Applicant Contact:	Mary L	effler	Title:	President
Phone:	502-554		Email:	portlandfestivalinfo@gmail.com
Financial Contact:	Kerrie (Clifford	Title:	Treasurer
Phone:	502-643	8-1471	Email:	kerrie.clifford@yahoo.com
Organization's Repre	sentative	who attended NDF Train	ing: Mary Leffler	
		L AREA(S) WHERE PROGI		
Program Facility Loca		Portland neighborhood		
Council District(s):		District 5	Zip Code(s):	40212
	SECTI	ON 2 - PROGRAM REQUI	and the second second second second	
PROGRAM/PROJECT		Portland Festiv		
Total Request: (\$)	\$10,000	1 .		n) in previous year: (\$) 0
Purpose of Request (check all t	hat apply):		
Operating F	unds (gen	erally cannot exceed 33%	of agency's total of	operating budget)
Programmin	ng/service	s/events for direct benefi	t to community or	qualified individuals
Capital Proj	ect of the	organization (equipment,	furnishing, buildir	ng, etc)
The Following are Re	quired At	achments:		
IRS Exempt Status De	eterminatio	n Letter	Signed lease if r	ent costs are being requested
Current year projecte	ed budget		IRS Form W9	
Current financial stat	ement		Evaluation form	s if used in the proposed program
Most recent IRS Form	n 990 or 11	20-H	Annual audit (if	required by organization)
Articles of Incorporat	tion (curre	nt & signed)	Faith Based Org	anization Certification Form, if applicable
Cost estimates from capital expense	proposed v	endor if request is for		
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:			Amount: (\$)	
Source:			Amount: (\$)	
Source: Amount: (\$)				
Has the applicant con	tacted the	BBB Charity Review for p	participation?	Yes 🔳 No
Has the applicant me	t the BBB	Charity Review Standards	? 🗌 Yes 🔳 No	

Page 1 Effective May 2016

Applicant's Initials ML.

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

The mission of Portland Festival Inc is celebrating tradition, promoting fellowship, and aspiring to a bright future.

The organization works to organize an annual two day, family friendly neighborhood festival. This tradition has been carried on for over 44 years and provides an opportunity for past, present, and future residents, business owners, and supporters to come together. The vision for Portland Festival Inc is to engage residents, business owners, and supporters to build on the strong, proud, and connected community that exists in the Portland neighborhood. Additionally, it provides a showcase and raises awareness of the rich history, vibrant art community, commercial and residential real estate offerings and over 400 businesses currently operating within the Portland neighborhood for anyone who is unfamiliar with what is truly a hidden gem in the city of Louisville.

Leveraging the talent, passion, and diversity represented by members of Portland Festival Inc, residents, volunteers, community leaders, and friends of Portland, who in many cases have invested years of devoted service, tireless efforts, and financial support for the betterment of the neighborhood, will drive our vision.

Success depends on commitment, respect, candor, compromise, and keeping our vision at the heart of all we do!

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF		
Board Member	Term End Date	
Mary Leffler	June 2021	
LaDonna Estes	June 2021	
Leia Whitt	June 2021	
Kerrie Clifford	June 2021	
Austin Allen	June 2019	
Danny McDole	June 2019	
Jake Ashby	June 2019	
Jim Miller	June 2020	
Linda Hamilton	June 2020	
Mike Neagle	June 2020	
Missy Harris	June 2019	
Juanita Kelly	June 2019	
Richard Lannan	June 2019	
Ronnie Hamilton	June 2019	

Describe the Board term limit policy:

Board members shall serve a term of three (3) years from the date of their election. No board member shall serve more than two (2) consecutive three-year terms.

Three Highest Paid Staff Names	Annual Salary
Not applicable	

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 Portland Festival will occur on Friday, June 1, and Saturday, June 2, 2018. The event will include a street parade, live bands, vendor booths, an entire block of kid zone entertainment and so much more.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s): Any funds received will be utilized to offset expenses for event security, environmental services through Louisville Metro Solid Waste Management Support, barricades, picnic tables, and portalets.



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

Any funds received will be utilized to offset expenses for event security, environmental services through Louisville Metro Solid Waste Management Support, barricades, picnic tables, and portalets.

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:

- The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:
 - ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.

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

Louisville Metro Solid Waste Management Services, Moon Portables Restrooms Inc., Louisville Metro Parks, Louisville Metro Police

- 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.

Applicant's Initials

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 Portland Festival provides a positive, family friendly event that brings the community together. Through the parade, music, kid's activities, food and merchandise vendors the passion, pride, and flavor of the Portland neighborhood are showcased. It encourages attendance from indivudals outside of the neighborhood to experience its unique attributes in a safe and inviting way which assists in elevating the perception of the community.

Attendance levels and comment cards obtaining demographic information and feedback will be collected to track and measure effectiveness of event.

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.

The organization has relationships with over 100 local businesses and volunteers. Each provide valuable resources (time, money, and volunteers) to ensure the successful execution of the event. Some of the sponsors are as follows:

Argo Networks, Caudill Seed, Corner Market, Curtis Market, Dad's Auto Sales, Dr. Pavon Dental, Dismas Charities Facilities Management, Fishersips, Heine Brothers Coffee, Holiday Hairstyles, In & Out Dairy, Janes Brothers Shaheen's Department Store, Kentucky Foam Insulation, Kroger, Lanning Chemical, Mercer Transportation Nic Transportation, PNC Bank, Ratterman Funeral Home, Sav A Lot, SonaBlast, Shawnee Golf Carts Vulcan Hart

Applicant's Initials ML.

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.

	Column 1	Column 2	Column (1+2)=3	
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds	
A: Personnel Costs Including Benefits		0		
B: Rent/Utilities		0		
C: Office Supplies		0		
D: Telephone		0		
E: In-town Travel		0		
F: Client Assistance (See Detailed List on Page 8)		0		
G: Professional Service Contracts		0		
H: Program Materials		0		
I: Community Events & Festivals (See Detailed List on Page 8)	10000	31000	41000	
J: Machinery & Equipment		0		
K: Capital Project		0		
L: Other Expenses (See Detailed List on Page 8)		0		
*TOTAL PROGRAM/PROJECT FUNDS	10000	31000	41000	
% of Program Budget	32.25 %	67.75 %	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)	18000
Fees Collected from Program Participants	
Other (please specify) Vendor Fees, merchandise sales,	18000
Other (please specify) Vendor Fees, Merchandise sales, ride percentage, rattles Total Revenue for Columns 2 Expenses **	36000

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

**Must equal or exceed total in column 2.

Page 7 Effective May 2016

Applicant's Initials ML.

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
Louisville Metro Solid Waste Mangement Svcs	2171.68		2171.68
Moon Portables Restrooms Inc	1720.00		1720.00
Louisville Metro parks - 30 picnic tables	450.00		450.00
Louisville Metro Police - off duty security	5658.32	6441.68	12100.00
DRH Security		1200.00	1200.00
Louisville Metro - parade security		2000.00	2000.00
Event insurance - Ky Farm Bureau		1460.62	1460.62
Advertising - Portland Anchor, Facebook		600.00	600.00
ColorStage - Stage rental		7500.00	7500.00
Metro Louisville Permits - special event, parade, master vendor		475.00	475.00
Safe Ti Co - Barricades		350.00	350.00
Action Logz t-shirts		1972.70	1972.70
Entertainment - Bands		7000.00	7000.00
Supplies (Trophies, paper, ink, etc)		400.00	400.00
Signage - no parking		400.00	400.00
Doo Wop Shop - sound equipment for 2nd stage		200.00	200.00
The Event Company - second stage		1000.00	1000.00
Total	10000.00	31000.00	41000.00

Applicant's Initials M.L.

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

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Volunteers	17000.00	Total hrs 1700 @ \$10 per hour
Volunteer Meals	735.00	3 meals/ 35 volunters/\$7 each
Supplies	400.00	\$125/per day/3 days
Gift cards	300.00	\$300 Kroger
Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution &Other In Kind)	18435.00	

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

Agency Fiscal Year Start Date: January 1

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

If YES, please explain:

Applicant's Initials 1.

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

- 1. Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
- 2. Applicant 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.
- 6. Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
- 7. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end.
- 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.

Signatur	e of Legal Signatory:	Mary Lall	Den	Date:	April 7, 2018
Legal Sig	gnatory: (please print):	Portland Festival Mary Le	effler	Title:	President
Phone:	502-554-2806	Extension:	Email:	portlandfest	valinfo@gmail.com

Applicant's Initials



Louisville Metro Government Office of Management and Budget

Neighborhood Development Fund Training Attestation

Grantee Organization Name: Portland Festival Inc.

Grantee Representative Name: Mary Leffler, President

I agree that I am an authorized representative and/or signatory of the organization named above and attest to having viewed the Neighborhood Development Fund training presentation. I understand the reporting requirements of the Neighborhood Development Fund grant. Additionally, after viewing the presentation, I have correctly answered the below questions.

Please check:



I viewed the NDF training material on the website

Answer the following questions before signing (Circle or write in the correct answer).

- 1. The NDF funding your agency received is a gift from LMG? True or False
- Name the three budget categories that require a detail list. <u>Client assistance</u>, <u>community events and festivals</u>, and <u>other expenses</u>
- 3. If your agency charged gross pay to NDF, you are required to provide additional documentation to satisfy reporting requirements. (True) or False
- 4. Which four questions should your financial support documentation answer at all times? who, what, when and _where
- 5. Your agency is considered noncompliant if you do not account for funds received and/or your financial report is missing support documentation? True or False
- 6. Canceled check, bank statement, invoice and receipt are considered proof of payment. True or False.

Fortland Destural Mary Liffen Grantee Representative Signature

April 7, 2018 Date

502-574-3219

NOTE: Please return to Rox	anne Steele	
E-mail address:	Roxanne.Steele@louisvilleky.gov	Fax:
Mailing Address:	Louisville Metro Government	
5	ATTN: NDF Coordinator	
	611 West Jefferson St.	
	Louisvillo KV 40202	

DEPARTMENT OF THE TREASURY

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

FEB 16 2018

Date:

PORTLAND FESTIVAL INC PO BOX 11124 LOUISVILLE, KY 40211-0000 Employer Identification Number:

DLN:

26053429005108 Contact Person: ID# 31954 CUSTOMER SERVICE Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Public Charity Status: 170(b)(1)(A)(vi) Form 990/990-EZ/990-N Required: Yes Effective Date of Exemption: October 23, 2017 Contribution Deductibility: Yes Addendum Applies: No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

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

Sincerely,

Stephen a mortun

Director, Exempt Organizations Rulings and Agreements

Letter 947



2018 Portland Festival Budget

Net Difference		5000	
	TOTALS	36000	41000
Projected Expenses			41000
Projected Revenue		18000	
Projected Donations		18000	



2018 Portland Festival Budget

	2018	
Expenses	Projected	Notes
Action Logoz T-shirts	1972	T-shirts volunteers and merchandise sales
Advertising	600	Portland Anchor, Facebook
Bands	7000	Main and second stage entertainment
Colorstage	7500	sound & stage main stage
Doo Wop Shop	200	2nd stage sound equipment
Event Company	1000	Second Stage
Insurance	1460	Event insurance Ky Farm Bureau
Louisville Metro SWMS	2172	Sweeper, dumpsters, wire baskets, boxes
Metro Parks	450	Picnic tables
Metro Permits	475	Event, parade, master vendor
Moon Portables Restrooms	1720	Portalets
Safe Ti Co	350	Barricades
Security - DRH (t-shirt)	1200	
Security - LMPD (main)	12100	LMPD - Rob Schadle
Security - Parade	2000	
Signage	400	No parking signs for festival
Supplies	400	Trophies, paper, ink, etc



Treasurer's Report - May 2, 2018 PNC Account XXXXXX

DATE	CHECK #	DESCRIPTION	DEBIT	CREDIT	BALANCE FORWARD	NOTES	IMAGES
					\$19,290.62		
						\$80 Raffle tickets, \$175 booth vendor merchandise, \$50	
4/20/2018		Deposit		\$370.00	\$19,660.62	legal fee reimbursement, \$65 donations	
4/4/2018	1006	Kentucky Farm Bureau	\$1,410.62		\$18.250.00	Event insurance	
., .,							
4/9/2018	Debit	Office Depot	\$96.80		\$18,153.20	Paper, envelopes, printer ink	
4/9/2018	1008	Event Company	\$1,000.00		\$17,153.20	2nd stage purchase -need receipt	
4/11/2018	Debit	Amazon Marketplace	\$2.22		\$17,150.98	FRAUD	
						Bank Street Liquors \$100, Victor Mathis \$200, Curtis	
						Market, \$200, Chef Supply \$100, Valerie Shelton \$100, Michael & Christina Clifford \$50, Holiday Hairstyles \$200,	
						Monica Simmons (vendor) \$175, \$282 raffle tickets, \$10	
4/16/2018		Deposit		\$1,407.00	\$18,557.98	donation (board)	
4/16/2018		Deposit		\$500.00	\$10.057.08	Sponsorship Edith Bingham \$500	
1/10/2010				\$000.00	\$19,001.90		
4/16/2018	1007	Portland Anchor - April Ad	\$200.40		\$18,857.58		
						Sadler's \$200, Junior Cheathm \$200, The Wright Cut \$50,	
						Big Lou (Drew Day) \$200, Nicholas Neagle \$12.06, Rick \$3, Gagle's Market \$20, Lucky Junior's \$14, Orvilla Yeardon	
						\$75, Watrous Architects \$200, Bennett's Towing \$200, Tom	
4/02/0019		Deposit		\$1,849.06		Ford, \$100, Cravens AC (Vendor) \$175, Pool man \$100,	
4/23/2018		Deposit		φ1,849.06	\$20,700.64	Schoppenhorst \$200, James Pigram \$30, Raffle \$70)	
4/23/2018	Debit	Krispy Kreme	\$25.99		\$20,680.65	Doughnuts for building clean up 4/21/2018	

Completed 5/2/18 KDC



Treasurer's Report - May 2, 2018 PNC Account XXXXXX

Balance to Bank Book

Statement Ending Balance	\$20,680.65
Outstanding Items	
4/28 deposit	\$1,395.00
Facebook promo debit	-\$20.00
Anchor Ad May	-\$200.40
Color Stage deposit	-\$3,750.00
	\$18,105.25

Exempt payee

	Name (as shown on your income tax return)	
į.	Portland Festival Inc	
page 2.	Business name/disregarded entity name, if different from above	
Instructions on pa	Check appropriate box for federal tax classification: Individual/sole proprietor C Corporation S Corporation Partnership Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partner)	Trust/estate
	✓ Other (see instructions) ► 501(c)3 - Nonprofit - Exempt 0	Charity
- iii	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
Specific	3329 Northwestern Parkway	
e S	City, state, and ZIP code	
See	Louisville, KY 40212	
	List account number(s) here (optional)	

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

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

mplover i	tentific	ation nu	mhar	

Part II Certification

Under penalties of perjury, I certify that:

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

3. I am a U.S. citizen or other U.S. person (defined below).

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

instruction	ns on page 4.					-			-	
Sign Here	Signature of U.S. person ►	K	Irul	_	ef	A	nd	Date 🕨 🤇	l	pil 7, 2018
										1

General Instructions

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

Purpose of Form

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

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

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

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

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

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

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

An individual who is a U.S. citizen or U.S. resident alien,

· A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,

- · An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

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

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of St

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

Articles of Incorporation Non-profit Corporation

NAOI 1000331.09 Alison Lundergan Grimes Secretary of State Received and Filed 10/23/2017 2:48:24 PM Fee receipt: \$8.00

NAI

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

Article I: The name of the company is

Portland Festival, Inc.

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

401 Lochinvar Pl, Douglass Hills, KY 40243

and the name of the initial registered agent at that address is Hancock Law Offices, PLLC

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

3329 Northwestern Pkwy, Louisville, KY 40212

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

Kerrie Clifford

403 N 26th St, Louisville, KY 40212

Article V: The number of directors constituting the initial board of directors is 4. The name and mailing address of each director is

Kerrie Clifford Mary Leffler Ladonna Estes Leia Whitt

403 N 26th St, Louisville, KY 40212 2823 Montgomery St, Louisville, KY 40212 6320 Maravian Dr, Louisville, KY 40212 2619 Rowan St, Louisville, KY 40212

Article VI: The purpose of the company is: To organize and execute neighborhood festivals.

Executed by the Incorporator on Monday, October 23, 2017

Name of incorporator: Kerrie Clifford

Signature of individual signing on behalf of Incorporator: Kerrie Clifford

I, Hancock Law Offices, PLLC, consent to serve as the Registered Agent on behalf of the corporation.

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

Nancy S Hancock

				· · · · ·		
	Aliso		onwealth of an Grimes,	Kentucky Secretary c	KY Secreta Received ar 3/18/201	NARP dergan Grimes ry of State Id Filed 18 2:06:42 PM ot: \$15.00
Alison Lunder Secretary P. O. Boy Frankfort, KY (502) 564 http://www.se	of State (1150 10602-115 I-3490		1	l Report e Filing		ARP
Company: Company ID: State of origin: Formation date: Date filed: Fee:		Portland Fest 1000331 Kentucky 10/23/2017 12 3/18/2018 2:0 \$15.00	2:00:00 AM			
Principal Office				· · ·		
3329 Northwesterr Louisville, KY 4021						
Registered Agent Hancock Law Offic 401 Lochinvar Pl Douglass Hills, KY	es, PLLC	dress				
Current Officers President	Mary Le		0000 11.			
Secretary Vice President Treasurer	Leia Wh LaDonn Kenrie C	itt a Estes	2619 Rowan Str 6320 Maravian I	ery Street, Louisville, reet, Louisville, Ky, 2 Drive, Louisville, Ky, et, Louisville, Ky, 40	40212 40258	
Directors		14				
Director Director Director Director Director Director Director Director Director	Danny M Jim Mille Linda Ha Mike Ne Richard Austin Al Jake Ast Missy Ha Nita Kell Rornie H	er amilton agle Lannan Ilen arris y	1718 Rowan Str 1900 Rowan Str 3622 Northweste 3808 Jewell Ave 3429 Bank Stree 2910 Duncan St 7504 Waldwick (1731 Rowan Stree	Street, Louisville, Ky, 44 eet, Louisville, Ky, 44 ern Parkway, Louisvi nue, Louisville, Ky, 402 reet, Louisville, Ky, 402 reet, Louisville, Ky, 40 Court, Louisville, Ky, 40 Street, Louisville, Ky, 40	0212 0212 Ile, Ky, 4021 0212 12 0212 40258 0203	2
County: Business size: Business type:		Jefferson Small Other				
Signatures]
Signature Title		Kerrie Clifford Treasurer				

Portland Festival, Inc.

General Information

Organization Number	1000331
Name	Portland Festival, Inc.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	КҮ
Country	USA
File Date	10/23/2017 2:48:24 PM
Organization Date	10/23/2017
Last Annual Report	3/18/2018
Principal Office	3329 Northwestern Pkwy
	Louisville, KY 40212
Registered Agent	Hancock Law Offices, PLLC
	401 Lochinvar Pl
	Douglass Hills, KY 40243

Current Officers

President	Mary Leffler
Vice President	LaDonna Estes
Secretary	Leia Whitt
Treasurer	Kerrie Clifford
Director	Danny McDole
Director	J <u>im Miller</u>
Director	Linda Hamilton
Director	<u>Mike Neagle</u>
Director	Richard Lannan
Director	Austin Allen
Director	J <u>ake Ashby</u>
Director	<u>Missy Harris</u>
Director	<u>Nita Kelly</u>
Director	Ronnie Hamilton

Individuals / Entities listed at time of formation

Director	Kerrie Clifford
Director	<u>Mary Leffler</u>
Director	<u>Ladonna Estes</u>
Director	<u>Leia Whitt</u>
Incorporator	Kerrie Clifford
Registered Agent	Hancock Law Offices, PLLC

Images available online

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

Annual Report	3/18/2018	1 page	PDF
Articles of Incorporation	10/23/2017 2:48:25 PM	1 page	PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced	
Annual report	3/18/2018 2:06:42 PM	3/18/2018 2:06:42 PM		
Add	10/23/2017 2:48:24 PM	10/23/2017 2:48:24 PM		

Microfilmed Images