

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

Applicant/Program: Kentuckians for the Commonwealth Smoketown Getdown

Applicant Requested Amount: \$3125.00

Appropriation Request Amount: \$ 1850.00

Executive Summary of Request

This is the 5th Annual festival and it will offer a variety of opportunities for adults and youth to participate in various activities. This neighborhood block party is a celebration of Smoketown's rich history and culture and will showcase work of community groups and neighbors. The Getdown will feature live entertainment and family friendly activities.

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.

4
District #

Barbara J. Smith
Primary Sponsor Signature

1850.00
Amount

7-16-2018
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:

Kentuckians for the Commonwealth Smoketown Getdown

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

District 16 _____ \$ _____

District 17 _____ \$ _____

District 18 _____ \$ _____

District 19 _____ \$ _____

District 20 _____ \$ _____

District 21 _____ \$ _____

District 22 _____ \$ _____

District 23 _____ \$ _____

District 24 _____ \$ _____

District 25 _____ \$ _____

District 26 _____ \$ _____

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization: Kentuckians for the Commonwealth <i>(as listed on: http://www.sos.ky.gov/business/records)</i>			
Main Office Street & Mailing Address: 131 N Mill St/PO Box 1450 London, KY 40743			
Website: kftc.org			
Applicant Contact:	Becky Jones	Title:	Jefferson County Organizer
Phone:	502-589-3188	Email:	becky@kftc.org
Financial Contact:	same	Title:	same
Phone:	same	Email:	same
Organization's Representative who attended NDF Training: Becky Jones			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	760 Hancock St Louisville, KY		
Council District(s):	4	Zip Code(s):	40203
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: Smoketown GetDown for Democracy			
Total Request: (\$)	\$3,150	Total Metro Award (this program) in previous year: (\$)	1650
Purpose of Request (check all that apply):			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
IRS Exempt Status Determination Letter Current year projected budget Current financial statement Most recent IRS Form 990 or 1120-H Articles of Incorporation (current & signed) Cost estimates from proposed vendor if request is for capital expense		Signed lease if rent costs are being requested IRS Form W9 Evaluation forms if used in the proposed program Annual audit (if required by organization) Faith Based Organization Certification Form, if applicable	
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:	N/A	Amount: (\$)	
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the applicant met the BBB Charity Review Standards? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

Our Mission: Kentuckians For The Commonwealth is a statewide citizens' organization working for a new balance of power and a just society. As we work together we build our strength, individually and as a group, and we find solutions to real life problems. We use direct action to challenge – and change – unfair political, economic and social systems. Our membership is open to all people who are committed to equality, democracy and non-violent change.

Our Vision:

We are working for a day when Kentuckians – and all people –
enjoy a better quality of life.

When the lives of people and communities matter before profits.

When our communities have good jobs that support our families
without doing damage to the water, air, and land.

When companies and the wealthy pay their share of taxes
and can't buy elections.

When all people have health care, shelter, food,
education, and other basic needs.

When children are listened to and valued.

When discrimination is wiped out of our laws, habits, and hearts.

And when the voices of ordinary people
are heard and respected in our democracy.

Kentuckians for the Commonwealth (KFTC) is a 36-year-old grassroots organization of over 11,000 members across Kentucky. We have 14 local chapters and at-large members in many counties. There are over 2,300 KFTC members in the Jefferson County KFTC Chapter here in Metro Louisville. KFTC uses a set of core strategies, from leadership development to communications, to impact a broad range of issues, including coal and water, new energy and transition, economic justice, and voting rights. Our Jefferson County Chapter is focused on various local issues, including increasing affordable housing funding in Metro Louisville and improving air quality in our community.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Cassia Herron	October 2018
Meta Mendel-Reyes	October 2018
Christian Torp	October 2018
Randy Wilson	October 2018
Leslie Bebensee	October 2018
Sarah Bowling	October 2018
Chanda Campbell	October 2018
Amy Copelin	October 2018
Aeryn Darst	October 2018
Barbara Farley	October 2018
Joy Fitzgerald	October 2018
Christopher Merritt	October 2018
Robby Ollivam	October 2018
Wendy Warren	October 2018
Kimberly Shepherd	October 2018

Describe the Board term limit policy:

Can serve up to 3 one year terms.

Three Highest Paid Staff Names	Annual Salary
Burt Lauderdale	\$84,481
Jerry Hardt	\$82,502
Lisa Abbott	\$68,960

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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 Jefferson County Chapter of Kentuckians for the Commonwealth is hosting the 5th Annual Smoketown Getdown for Democracy on Friday, September 14th, 2018 from 4:00-10:00pm on Hancock Street and the Hancock Green between Jacob and Lampton Streets.

This neighborhood block party is a celebration of Smoketown's rich history and culture and will showcase the work of community groups and neighbors. The street will be closed to traffic starting at 12pm and will remain closed until 11:59pm. We are expecting a peak attendance of 499 people.

This event is free and open to the public and will feature live entertainment, Smoketown organizations and businesses, non-partisan voter registration, family-friendly activities, food trucks, and local craft beer from West Sixth Brewing Co. The event is being advertised across the city, but there will be special emphasis on inviting Smoketown residents.

Some of the organizations that will have booths at the Smoketown GetDown include YouthBuild Louisville, Metro United Way, the Logan St Market, Bates CDC, Family Health Centers, and many more.

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

The NDF funding will be used to pay for:

Rental of sound equipment and payment for sound technician from Real Feel Audio: \$500

Rental of stage, tent, and generator: \$1,500

Rental of 4 portable toilets from Suburban Portable: \$350

Poster design and printing from the Steam Exchange: \$800

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

KFTC will use proceeds from this event to support local organizing efforts by the Jefferson County Chapter of KFTC, including but not limited to the chapter's Air Quality and Economic Justice campaigns within Metro Louisville.

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.

☐ 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.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served:

The Smoketown GetDown is a continuation of KFTC's community building efforts in the Smoketown neighborhood and surrounding areas. The event is also a celebration of the neighborhoods rich history and culture and a showcase of the amazing work of local organizations and neighbors. Smoketown residents will have the opportunity to learn and connect with community organization and network with their fellow neighbors. The event will offer people outside of Smoketown a chance to learn more about the neighborhood and all it has to offer.

This year, KFTC is working in collaboration with other Smoketown organizations and businesses to plan the GetDown, including YouthBuild, Kertis Creative, Hope by Hope, the Smoketown Neighborhood Association, and Smoketown Family Wellness. This process is strengthening the relationships among these community institutions.

Attendees will also be exposed to local food and beer, engage in family friendly activities, and see performances by local musicians and dancers. They will also have the chance to register to vote or update their voter registration. All voter registration and education will be non-partisan.

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.

KFTC has been working in the Smoketown neighborhood since 2014, hosting community cookouts and the annual Smoketown GetDown, organizing community canvassing projects in 2014, 2015 and 2016, and creating and distributing 3 community newsletters in 2016.

In 2014, KFTC worked with Center for Neighborhoods to help reactivate the Smoketown Neighborhood Association. Since that time KFTC has worked with the Smoketown Neighborhood Association and several other community groups to amplify the voices of Smoketown residents in local decision-making processes and promote community-wide conversations in the areas of neighborhood development, community safety, neighborhood beautification, and housing. As mentioned above, this year several community organizations and businesses are also helping to plan the event, including YouthBuild, Kertis Creative, Hope by Hope, the Smoketown Neighborhood Association, and Smoketown Family Wellness.

Additionally, Several neighborhood organizations will have booths at the GetDown, including, Center for Neighborhoods, Bates Community Development Corporation, Metro United Way, YouthBuild Louisville, and Steam Exchange. The 3rd annual GetDown was co-sponsored by more than 40 organizations and individuals and more than 30 organizations participated in the event.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies			
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)	\$3,150	\$3,840	\$6,990
J: Machinery & Equipment			
K: Capital Project			
L: Other Expenses (See Detailed List on Page 8)			
*TOTAL PROGRAM/PROJECT FUNDS	\$3,150	\$3,840	\$6,990
% of Program Budget	45 %	55 %	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)	\$3,590
Fees Collected from Program Participants	\$250
Other (please specify)	
Total Revenue for Columns 2 Expenses **	\$3,840

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

**Must equal or exceed total in column 2.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7 (circle one and use multiple sheets if necessary)	Column 1	Column 2	Column (1 + 2)=3
	Proposed Metro Funds	Non- Metro Funds	Total Funds
Special Events Permit		\$40.00	
Master Vendor Permit		\$250.00	
Barricades (x 8)		\$65.00	
Trash bins/liners		\$15.00	
Portalets (4 units)	\$350.00		
Sound Equipment & Technician	\$500.00		
Stage, Tent, Generator	\$1,500.00		
Temporary Insurance		\$650.00	
Poster Design (By Steam Exchange students)	\$300		
Poster Printing (By Steam Exchange Students)	\$500		
Social Media Promotion (snapchat filter, facebook boosted post)		\$120.00	
Miscellaneous supplies (art supplies, ice, stage banner, etc)		\$400.00	
Honorariums for performers		\$1500	
Security		\$500	
No Parking Signage		\$300	
Total	\$3,150	\$3,840	\$6,990

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
N/A		
<i>Total Value of In-Kind</i> (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)		

* 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 2018

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

If YES, please explain:

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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.
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:		Date:	7/10/2018
Legal Signatory: (please print):	Rebecca Jones	Title:	Jefferson Co Organizer
Phone:	502-589-3188	Extension:	
Email:	becky@kftc.org		

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

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

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Kentuckians For The Commonwealth

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC

☐ C Corporation

☐ S Corporation

☐ Partnership

☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☒ Other (see instructions) ►

501c4 non profit organization

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

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

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

5 Address (number, street, and apt. or suite no.) See instructions.

PO Box 1450

Requester's name and address (optional)

6 City, state, and ZIP code

London, KY 40743

7 List account number(s) here (optional)

61-1015576

Part I Taxpayer Identification Number (TIN)

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

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

____ - ____ - ____

or

Employer identification number

____ - ____

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. 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 am 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 is correct.

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

Sign
Here

Signature of
U.S. person ►

Date ►

8/1/2018

General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

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, later.

Internal Revenue Service
District Director

Department of the Treasury

P. O. Box 2508
Cincinnati, OH 45201

Date: JUN 15 1998

Kentuckians for the
Commonwealth, Inc.
P.O. Box 1450
London, KY 40743-1450

Person to Contact:
Carol Kraft
Telephone Number:
513-241-5199
Fax Number:
513-684-5936
Federal Identification Number:
[REDACTED]

Dear Sir or Madam:

This letter is in response to your request for affirmation of your organization's exempt status.

In July, 1983 we issued a determination letter that recognized your organization as exempt from federal income tax under section 501(c)(4) of the Internal Revenue Code. That letter is still in effect.

All exempt organizations (unless specifically excluded) are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$200 or more paid to each employee during a calendar year. Your organization is also liable for tax under the Federal Unemployment Tax Act for each employee to whom it pays \$50 or more during a calendar quarter if, during the current or preceding calendar year, the organization had one or more employees at any time in each of 20 calendar weeks or it paid wages of \$1,500 or more in any calendar quarter.

If your organization's character, method of operation, or purposes change, please let us know so we can consider the effect of the change on the organization's exempt status. Also, your organization should inform us of all changes in its name or address.

Your organization is required to file Form 990, Return of Organization Exempt from Income Tax, if its gross receipts each year are normally more than \$25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of the organization's annual accounting period. The law imposes a penalty of \$20 a day, up to a maximum of \$10,000, when a return is filed late, unless there is reasonable cause for the delay.

Because your organization is not one described in section 170(c) of the Code, donors may not deduct contributions made to it. You should advise your organization's contributors to that effect.

Your organization is not required to file federal income tax returns unless it is subject to the tax on unrelated business income under section 511 of the Internal Revenue Code. If your organization is subject to this tax, it must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your organization's activities are unrelated trade or business as defined in Code section 513.

Kentucky Coalition (Kentuckians For The Commonwealth)

2018 Operating Budget Analysis

Through 5/31/18 42% of fiscal year

For Internal Management Purposes Only

	Monthly Budgets thru Current Month End	Actual thru Current Month End	Variance in \$'s	% Actual to Monthly Budgets	2018 Organizational Budget	% Actual to Annual Budget
Income						
Grants	1,453,987	1,575,587	121,600	108	2,190,791	72
Carryover: GRF	292,185	292,185	0	100	292,185	100
Grassroots (2018)	163,292	169,642	6,350	104	500,000	34
Self-Generated	3,788	2,200	-1,588	58	10,000	22
Endowment Transfer	0	0	0	-	46,000	0
Total	\$1,913,252	\$2,039,613	\$126,361	107%	\$3,038,976	67%
Expenses						
Payroll	734,098	674,061	-60,037	92	1,843,775	37
Employee Benefits	194,386	183,984	-10,402	95	433,952	42
Contracted Services	83,013	61,725	-21,288	74	259,750	24
Media/Communications	18,500	3,096	-15,404	17	57,500	5
Insurance	3,933	3,270	-663	83	15,750	21
Rent/Utilities	29,838	31,198	1,360	105	68,000	46
Equipment	10,021	6,148	-3,873	61	29,750	21
Maintenance	600	150	-450	25	2,000	8
Telephone	13,000	7,500	-5,500	58	30,000	25
Supplies	5,475	4,085	-1,390	75	17,000	24
Postage/Shipping	18,558	17,289	-1,269	93	37,000	47
Printing/Copying	21,096	14,949	-6,147	71	52,000	29
Meetings/Workshops	8,945	13,983	5,038	156	55,000	25
Education/Research	2,724	1,224	-1,500	45	7,500	16
Travel	41,052	38,029	-3,023	93	115,000	33
Miscellaneous	5,212	5,330	118	102	13,000	41
Total	\$1,190,451	\$1,066,020	-\$124,431	90%	\$3,036,976	35%
Surplus (Deficit)	\$722,801	\$973,593			2,000	

Kentucky Coalition, Inc.

131 N Mill St
PO Box 1450
London KY 40743

Balance Sheet**As of May 2018**

6/14/18
10:34:22 AM

Assets			
Current Assets			
Cash			
KC Checking Account	\$877,495.83		
Receivables			
Grants Receivable	\$2,000,000.00		
Other Receivables	-\$305,022.00		
Long-Term Investments			
Fixed Assets			
Furn, Fixtures and Computers			
FFC	\$85,071.99		
Accum Dep - FFC	-\$67,451.15		
Other Assets			
Deposits		\$6,490.00	
Unused Asset Accts			
Total Assets			<u>\$2,596,584.67</u>
Liabilities			
Current Liabilities			
Gen'l Accts Payable			
Accumulated Leave	\$175,914.69		
Due to KFTC	-\$7,453.25		
Endowment Loan		\$168,176.75	
Total Liabilities			\$336,638.19
Net Assets			
Net Assets w/o Donor Restricti		\$718,351.76	
Current Year Net Activity		-\$153,383.28	
Net Assets with Donor Restrict		<u>\$1,694,978.00</u>	
Total Net Assets			\$2,259,946.48
Total Liability & Equity			<u>\$2,596,584.67</u>

ORIGINAL COPY FILED
SECRETARY OF STATE OF KENTUCKY
FRANKFORT, KENTUCKY

DEC 20 1982

ARTICLES OF INCORPORATION
OF THE
KENTUCKY FAIR TAX COALITION, INC.

Carrollton Hill
SECRETARY OF STATE

Know All Men by These Presents:

That we, the undersigned, have this day voluntarily associated ourselves together for the purpose of forming a non-profit corporation under the laws of the Commonwealth of Kentucky, and to that end do hereby adopt articles of incorporation as follows:

ARTICLE I

The name of the corporation is KENTUCKY FAIR TAX COALITION, INC. and by such name it shall be known body corporate and its duration shall be perpetual.

ARTICLE II

(A) The specific and primary purposes for which this corporation is formed are:

(1) To promote the social welfare; to provide relief for the poor, the distressed and the underprivileged; to lessen neighborhood tensions; to eliminate prejudice and discrimination; to combat community deterioration; to promote the development of infrastructure necessary to provide for enhanced economic opportunities for the people of Kentucky; to ensure uniform application of the taxing laws of Kentucky to all residents of the state; to promote improvement of the public schools in Kentucky; to promote the development of adequate housing for all residents of Kentucky; to educate the public generally on matters of taxation and land use; to promote and assist in the organization of local community groups whose objectives and purposes are substantially similar to those enumerated in these Articles of Incorporation; to engage in efforts designed to improve the quality

of life for all Kentuckians including, but not limited to: encouraging all persons to actively participate in the democratic and electoral process, but not encouraging such participation on behalf of or in opposition to any specific political campaign or candidate for public office; encouraging all persons and members of this organization to actively participate in the legislative process at the local, state, and federal levels to promote the furtherance of the purposes enumerated herein; to promote and encourage litigation to further the purposes and objectives enumerated herein.

(2) To aid, support and assist by gifts, contributions or otherwise, other corporations, community chests, funds and foundations organized and operated exclusively for charitable, religious, scientific, literary or educational purposes, no part of the net earnings of which inures to the benefit of any member or individual.

(3) Either directly or indirectly, and either alone or in conjunction or cooperation with others, whether such others be persons or organizations of any kind or nature, such as corporation, firms, associations, trusts, institutional foundations, or Governmental bureaus, departments or agencies, to do any and all lawful activities which may be necessary, useful or desirable for the furtherance, accomplishment, fostering or attainment of the foregoing purposes.

(B) In furtherance, but not in limitation, of the foregoing purposes, the corporation shall have the following general purposes and powers;

(1) To receive and administer funds and contributions received by grant, gift, deed, bequest, or devise, and otherwise to acquire money, securities, property, real, personal and mixed, rights and services of every kind and description, and to hold, lend, make guarantees, invest, expend, contribute, use, lease, sell or otherwise dispose of any money, securities,

property, real, personal and mixed, rights or services so acquired for the purposes above mentioned:

(2) To borrow money and to make, accept, endorse execute and issue bonds, debentures, promissory notes, and other corporate obligations, for moneys borrowed, or in payment of property acquired or for any of the purposes of the corporation, and to secure payment of any such obligation by mortgage, pledge, deed, indenture, agreement or other instrument of trust, or by other lien upon, assignment of or agreement-in regard to all or any part of the property, rights or privileges of the corporation;

(3) To invest and reinvest its funds in such mortgages, bonds, notes, debentures, shares of preferred and common stock, and property, real, personal or mixed, tangible or intangible, all as the corporation's board of directors shall deem advisable and as may be permitted by law;

(4) To do all such other acts as are necessary or convenient to accomplish the objects and purposes herein set forth to the same extent and as fully as any natural person could or might do and as are not forbidden by law or by these Articles of Incorporation or by the bylaws of the corporation; and;

(5) To have all powers that may be conferred upon non-profit corporations formed under the General Nonprofit Corporation Law of the Commonwealth of Kentucky.

All of the foregoing purposes and powers and all other purposes and powers of this corporation as stated in these Articles of Incorporation shall be exclusively for such charitable purposes as are within the meaning of Section 501 (c) (4) of the Internal Revenue Code of 1954 as amended and Chapter 273 of the Kentucky Revised Statutes of the Commonwealth of Kentucky.

ARTICLE III

The address of the registered office of the Corporation in the Commonwealth of Kentucky is P.O. Box 1393, Lexington, Kentucky, 40591, and the name of the registered agent of the corporation is Joe F. Childers.

ARTICLE IV

The corporation formed hereby shall have no capital stock, and shall be composed of members rather than shareholders.

ARTICLE V

There shall be three (3) initial directors who comprise the board of directors of the corporation, and who shall serve until the first annual meeting, and those directors are:

(NAME)	(ADDRESS)
Gladys Maynard	Main Street, P.O. Box 60, Lovely, KY 41321
Mary Jane Adams	Long Branch Road, Yeaddiss, KY 41777
Jerry Hardt	Box 697, Salyersville, Ky 41465 Burning Fork Road,

The board of directors shall henceforth consist of the chairperson, vice-chairperson, and secretary-treasurer elected annually by the eligible membership of the corporation present and voting at each annual meeting of the corporation.

ARTICLE VI

The board of directors, by resolution adopted by a majority of the directors annually at the first meeting of the board subsequent to the annual meeting of the corporation shall appoint a steering committee composed of the chairperson, the vice-chairperson, and one representative, who shall be an eligible member, from each county which contains fifteen (15) eligible members, which representative shall be chosen by said eligible members, and said committee shall vary in size between annual meetings as counties attain the fifteen (15) member threshold, and said committee shall have and exercise all the authority of the board of directors including, but not limited to:

amending these articles of incorporation or the by-laws of the corporation; appointing other committees of the membership to carry out the purposes of the corporation; authorizing the sale, lease, purchase or encumbrance of all or any part of the property or assets of the corporation; authorizing the voluntary dissolution of the corporation; adopting a plan for the distribution of assets of the corporation; hiring of staff to carry out the purposes of the corporation; adopting an annual budget for carrying out the purposes of the corporation; implementing the policy and agenda of the corporation which shall generally be determined by the membership of the corporation at the annual meeting; and setting the annual dues payable by the eligible members.

ARTICLE VII

The eligible membership of the corporation shall be open to the public and not exclusive or discriminatory, and shall consist of all members who have paid their annual dues as determined by the steering committee. However, the steering committee shall have the authority to expel any member of the corporation only for reason that such member has actively engaged in activities contrary to the purposes enumerated herein, and such action of the steering committee shall be final and irrevocable.

ARTICLE VIII

The property of this corporation is irrevocably dedicated to charitable purposes, no part of any net earnings of the corporation shall inure to the benefit of any members or individual and no substantial part of the activities of the corporation shall consist of participating in political campaigns (including the publishing or distributing of other materials of any political camp or on behalf of any candidate for public office). Upon dissolution and distribution of the corporation's

assesses, no member, as member of the corporation, shall be entitled for distribution or division of its remaining property or its proceeds after payment of all debts and obligations, and the balance of all money and other property received by the corporation from any source, including its operations, shall be transferred or conveyed to one or more domestic or foreign non-profit corporations, societies, or organizations engaged in activities substantially similar to those of this corporation and within the intention of Section 501(c)(4) of the Internal Revenue Code of 1954 as amended and Chapter 273 of the Kentucky Revised Statutes of the Commonwealth of Kentucky, pursuant to a plan of distribution adopted by the steering committee of the corporation.

ARTICLE IX

The names of the persons who are to be incorporators to the articles are as follows:

(NAME)	(ADDRESS)
Gladys Maynard	Main Street,
Mary Jane Adams	P.O. Box 60, Lovely, KY 41231
Jerry Hardt	Long Branch Road, Yeadiss, Ky 41777
	Box 697, Salyersville, KY 41465
	Burning Fork Road,

ARTICLE X

The initial By-Laws may be adopted by the Board of Directors of the corporation, and may be amended, altered, or replaced by the steering committee of the corporation.

ARTICLE XI

Members of the corporation shall not be personally liable for any debt or obligation of the corporation solely by reason of being members.

ARTICLE XII

The Articles of Incorporation of this corporation may be changed by either written consent of a majority of the members of the steering committee, or by vote of a majority of the members of the steering committee who are present and voting at a meeting duly called upon notice for the specific purpose of changing the articles.

In witness whereof, we, the incorporators, have hereunto set our hands this 7th day of December, A.D. 1982.

Gladys Maynard
GLADYS MAYNARD

Mary Jane Adams
MARY JANE ADAMS

Jerry Hardt
JERRY HARDT

Subscribed and sworn to before me by Gladys Maynard, Mary Jane Adams, and Jerry Hardt this 7th day of December 1982.

Joe F. Childers
NOTARY PUBLIC, STATE AT LARGE

My commission expires: July 6, 1986

9. The tax system should be diversified to provide a broad revenue base and to minimize the effect of imperfections on any one tax. Each form of taxation should not be looked at in isolation, but evaluated as part of the total tax system. Further, the impact of tax laws should be consistent with other public policies, e.g., the conservation of energy, the preservation of neighborhoods, etc.

(The term government as used in the above principles refers to all levels of government.)

In witness whereof, we, the Chairperson and Secretary-Treasurer of the Kentucky Fair Tax Coalition, Sidney Cornett and Jerry Hardt, respectively, have hereunto set our hands this 9th day of November, A.D. 1984.

Sidney Cornett
Sidney Cornett

Jerry Hardt
Jerry Hardt

Subscribed and sworn to before me by Sidney Cornett and Jerry Hardt this 9th day of November, 1984.

Joseph A. Szakos
Joseph A. Szakos, Notary

My commission expires: March 23, 1989

ORIGINAL COPY
FILED
SECRETARY OF STATE OF KENTUCKY
FRANKFORT, KENTUCKY

DEC 14 1987

ARTICLES OF AMENDMENT
TO THE ARTICLES OF INCORPORATION OF
KENTUCKY FAIR TAX COALITION, INC.

Dr. J. C. Davis
Sup

1. The name of the corporation is Kentucky Fair Tax Coalition.
2. The Amendment to the Articles of Incorporation is set forth as follows:

This organization shall be called KENTUCKIANS FOR THE COMMONWEALTH, INC.

3. This Amendment was approved by the Board of Directors at a meeting on November 14, 1987, and received at least 2/3 of the votes cast by the members present at the meeting.

Mary Jane Adams
MARY JANE ADAMS, CHAIRPERSON

Denise Giardina
DENISE GIARDINA,
SECRETARY-TREASURER

Subscribed and acknowledged before me, a notary public by Mary Jane Adams and Denise Giardina, this 8th day of December, 1987.

Joseph B. Stahon
Notary Public, State-at-Large

My Commission expires: March 23, 1988

THIS DOCUMENT PREPARED BY:

Phillip J. Shepherd
PHILLIP J. SHEPHERD
SHEPHERD & CHILDERS
P.O. Box 782
Frankfort, Kentucky 40602
502/223-2338

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF

KENTUCKIANS FOR THE COMMONWEALTH, INC.

0173106.09

mstratton
NAOA

Trey Grayson
Secretary of State
Received and Filed
06/24/2009 3:23:52 PM
Fee Receipt: \$8.00

Pursuant to the provisions of the Kentucky Nonprofit Corporation Act, the undersigned adopts the following Articles of Amendment to its Articles of Incorporation:

- FIRST: The name of the Corporation is Kentuckians for the Commonwealth, Inc.
- SECOND: The following amendments of the Articles of Incorporation were adopted by the Corporation in the manner prescribed by the Kentucky Nonprofit Corporation Act:

Article II (A) (1) is hereby amended to read:

(1) To promote the social welfare; to provide relief for the poor, the distressed and the underprivileged; to lessen neighborhood tensions; to eliminate prejudice and discrimination; to combat community deterioration; to promote the development of infrastructure necessary to provide for enhanced economic opportunities for the people of Kentucky; to ensure uniform application of the taxing laws of Kentucky to all residents of the Commonwealth; to promote improvement of the public schools in Kentucky; to promote the development of adequate housing for all residents of Kentucky; to educate the public generally on matters of taxation and land use; to promote and assist in the organization of local community groups whose objectives and purposes are substantially similar to those enumerated in these Articles of Incorporation; to engage in efforts designed to improve the quality of life for all Kentuckians including, but not limited to: encouraging all persons to actively participate in the democratic and electoral process and encouraging all persons and members of this organization to actively participate in the legislative process at the local, state, and federal levels; to promote the furtherance of the purposes enumerated herein; and to promote and encourage litigation to further the purposes and objectives enumerated herein.

Article II is hereby amended to insert new section (C) to read:

ARTICLE II (C)

These principles guide tax reform work:

1. The burden of taxes should be in proportion to the citizen's ability to pay.

2. All citizens have the duty/right to contribute to the common good. One usual way is the payment of taxes to support government.
3. Government has the duty to collect sufficient revenue to promote the common good and to deliver the services that are best supported through government.
4. For government to tax in excess of the requirements of the common good or to waste tax revenues is unjust since this unfairly deprives the citizen of his property and the produce of his labor without a corresponding common benefit.
5. The taxation and appropriation process should allow government the necessary flexibility for responsible fiscal management adaptable to changing circumstances and priorities.
6. The use of tax laws as incentives or disincentives to action should be viewed in the light of the common good. The granting of tax preferences (e.g., exemptions, deductions, etc.) should be genuinely premised on the promotion of the common interest and not upon special interest or favoritism.
7. Taxes once established should be collected with even handed enforcement. To permit the illegal nonpayment or underpayment of taxes is unjust to those who comply with the law.
8. The norm for choosing a form of taxation should first be the equitable distribution of civic burden and not the ease of collection or the lack of popular opposition. However, where there are equivalent equitable options, the simpler methods should be used.
9. The tax system should be diversified to provide a broad revenue base and to minimize the effect of imperfections on any one tax. Each form of taxation should not be looked at in isolation, but evaluated as part of the total tax system. Further, the impact of tax laws should be consistent with other public policies, e.g., the conservation of energy, the preservation of neighborhoods, etc.)

(The term government as used in the above principles refers to all levels of government.)

Article V is hereby amended to read:

ARTICLE V

The board of directors shall be known as the "steering committee" and shall consist of the chairperson, vice-chairperson, secretary-treasurer, at-large representative, immediate past chairperson, and one representative

from each county chapter. The members of the steering committee shall be selected as provided in the corporation's by-laws.

Article VI is amended to read:

ARTICLE VI

The steering committee shall implement the policy and agenda of the corporation which shall generally be determined by the membership of the corporation at the annual meeting.

Article VIII is hereby amended to read:

ARTICLE VIII

The property of this corporation is irrevocably dedicated to social welfare purposes. No part of the net earnings of the Corporation shall inure to the benefit of or be distributed to any member, director, employee or other individual, partnership, estate, trust or corporation having a personal or private interest in the corporation. Compensation for services actually rendered and reimbursement for expenses actually incurred in attending to the affairs of this Corporation shall be limited to reasonable amounts. So long as it is primarily engaged in nonpolitical activities which support social welfare, the Corporation may participate or intervene in lawful political campaign activity on behalf of or in opposition to candidates for public office. Notwithstanding any other provision of these Articles or of any Bylaws adopted thereunder, this corporation shall not take any action not permitted by the laws which then apply to this Corporation.

Upon dissolution and distribution of the corporation's assets, no member, as member of the corporation, shall be entitled to a distribution or division of its remaining property or its proceeds after payment of all debts and obligations, and the balance of all money and other property received by the corporation from any source, including its operations, shall be transferred or conveyed to one or more domestic or foreign nonprofit corporations, societies, or organizations engaged in activities substantially similar to those of this corporation and within the intention of Section 501(c)(4) of the Internal Revenue Code of 1986, as amended, and Chapter 273 of the Kentucky Revised Statutes of the Commonwealth of Kentucky, pursuant to a plan of distribution adopted by the board of the corporation.

The reference in Article II to the "Internal Revenue Code of 1956" is hereby amended to refer to the "Internal Revenue Code of 1986."

THIRD: These amendments were adopted at a meeting of the Board of Directors of the Corporation held on May 16, 2009, and received the vote of at least a majority of the Directors in office, there being no members having voting rights in respect thereof.

BY:

K.A. Owens
K.A. Owens
CHAIRPERSON

Pamela J. Maggard
Pam Maggard
SECRETARY/TREASURER

State of Kentucky, County of Laurel, Sec. 1, DEAN
JOHNSON, Clerk of the Laurel County Court, do certify that the
foregoing Articles was, on
the 7 day of August 20 09, at 12:39 P.M.,
lodged in my office for record, and that it has been duly recorded in my
said office, together with this and the certificate thereon endorsed.
Given under my hand this 7 day of Aug
20 09 at Laurel Book 23 Page 480
Clerk [Signature] D.C.

Baldwin CPAs, PLLC
713 W Main St
Richmond, KY 40475-1351

Kentuckians for the Commonwealth,
Inc.
P.O. Box 1450
London, KY 40743-1450
|||||

Filing Instructions

**Kentuckians for the Commonwealth,
Inc.**

Exempt Organization Tax Return

Taxable Year Ended December 31, 2016

Date Due: November 15, 2017

Remittance: None is required. Your Form 990 for the tax year ended 12/31/16 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Sign the IRS e-file Authorization and mail it as soon as possible to:

Baldwin CPAs, PLLC
713 W Main St
Richmond, KY 40475-1351

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

Form **990**Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016
Open to Public
Inspection
A For the 2016 calendar year, or tax year beginning , and ending**B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**Kentuckians for the Commonwealth, Inc.**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

P.O. Box 1450

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

London**KY 40743-1450****F** Name and address of principal officer:**Burt Lauderdale****P.O. Box 1450****London****KY 40743-1450****D** Employer identification number****_***5576****E** Telephone number**606-878-2161****G** Gross receipts\$**326,380****H(a)** Is this a group return for subordinates ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

I Tax-exempt status:☐ 501(c)(3)☒ 501(c)

(

4)

(insert no.)

☐ 4947(a)(1) or☐ 527**J** Website:**www.kftc.org****H(c)** Group exemption number**K** Form of organization:☒ Corporation☐ Trust☐ Association☐ Other**L** Year of formation: **1982****M** State of legal domicile: **KY****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: Promote citizen participation in the democratic process especially around social justice issues.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	
	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	
	6	Total number of volunteers (estimate if necessary)	
	Revenue	7a	Total unrelated business revenue from Part VIII, column (C), line 12
7b		Net unrelated business taxable income from Form 990-T, line 34	
8 Contributions and grants (Part VIII, line 1h)		Prior Year	
9 Program service revenue (Part VIII, line 2g)		Current Year	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)			
Expenses	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	
	16b	Total fundraising expenses (Part IX, column (D), line 25)	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	
	19	Revenue less expenses. Subtract line 18 from line 12	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	
	21	Total liabilities (Part X, line 26)	
	22	Net assets or fund balances. Subtract line 21 from line 20	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign
Here

Signature of officer

Date

Burt Lauderdale**Executive Director**

Type or print name and title

Paid
Preparer
Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if

PTIN

Myron D. Fisher**Myron D. Fisher****11/13/17**

self-employed

Firm's name

Baldwin CPAs, PLLC

Firm's EIN

****_***6603**

Firm's address

713 W Main St**Richmond, KY 40475-1351**

Phone no.

859-626-9040

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990** (2016)

Part IV Checklist of Required Schedules

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 2	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 32	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a X	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b X	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

Form 990 (2016) **Kentuckians for the Commonwealth, **-***5576**Page **7****Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Burt Lauderdale	50.00									
Executive Director	0.00	X		X				79,634	0	0
(2) Homer White	0.00									
Sec/Treasurer	0.00	X		X				0	0	0
(3) Elizabeth Sanders	0.00									
Chair	0.00	X		X				0	0	0
(4) Leslie Bebensee	0.00									
Director	0.00	X						0	0	0
(5) Ryan Fenwick	0.00									
At Large Rep	0.00	X		X				0	0	0
(6) Dana Beasley Brown	0.00									
Immediate Past Chair	0.00	X		X				0	0	0
(7) JoAnn Schwartz	0.00									
Director	0.00	X						0	0	0
(8) Lillian Prosperino	0.00									
Director	0.00	X						0	0	0
(9) Charly Sholty	0.00									
Director	0.00	X						0	0	0
(10) Leah Bayens	0.00									
Director	0.00	X						0	0	0
(11) Meta Mendel-Reyes	0.00									
Vice Chair	0.00	X		X				0	0	0

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	219,909			
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		219,909			
Program Service Revenue	2a Renewals	Busn. Code	31,564	31,564		
	b New Memberships		23,345	23,345		
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		54,909			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2,269		
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
6a Gross rents		(i) Real (ii) Personal				
b Less: rental exps.						
c Rental inc. or (loss)						
d Net rental income or (loss)						
7a Gross amount from sales of assets other than inventory		(i) Securities (ii) Other	9,502			
b Less: cost or other basis & sales exps			14,744			
c Gain or (loss)			-5,242			
d Net gain or (loss)			-5,242	-5,242		
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		a				
b Less: direct expenses		b				
c Net income or (loss) from fundraising events						
9a Gross income from gaming activities. See Part IV, line 19		a				
b Less: direct expenses		b				
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances		a	4,068			
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory		4,068			4,068	
Miscellaneous Revenue		Busn. Code				
11a Special Events		29,803	29,803			
b Pass Through Income		5,000	5,000			
c Miscellaneous		920	920			
d All other revenue						
e Total. Add lines 11a-11d		35,723				
12 Total revenue. See instructions.		311,636	85,390	0	6,337	

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing		1	
	2 Savings and temporary cash investments	55,908	2	145,896
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	62,359	7	18,686
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	11,995		
	b Less: accumulated depreciation	11,995	10c	11,995
	11 Investments—publicly traded securities	61,107	11	62,452
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,800	15	26,906
16 Total assets. Add lines 1 through 15 (must equal line 34)	193,169	16	265,935	
Liabilities	17 Accounts payable and accrued expenses		17	16,777
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	53,031	23	53,031
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	17,636	25	7,114
	26 Total liabilities. Add lines 17 through 25	70,667	26	76,922
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	122,502	27	179,013
	28 Temporarily restricted net assets		28	10,000
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	122,502	33	189,013	
34 Total liabilities and net assets/fund balances	193,169	34	265,935	

Schedule B
(Form 990, 990-EZ,
or 990-PF)
 Department of the Treasury
 Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2016

Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Name of the organization

**Kentuckians for the Commonwealth,
 Inc.**

Employer identification number

**** - ***5576**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(**4**) (enter number) organization

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 $\frac{1}{3}$ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

SCHEDULE C
(Form 990 or 990-EZ)**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2016**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization **Kentuckians for the Commonwealth,
Inc.**Employer identification number
****_***5576****Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) \$ **125,871**
- 3 Volunteer hours for political campaign activities (see instructions) **160**

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ **32,047**
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ **58,675**
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ **90,722**
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☒ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1) New Power PAC P O Box 1450	London KY 40743	**_***7896	58,675	
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2016

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		X
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		X

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C, Part IV, Additional Information

Kentuckians for Commonwealth(KFTC) deployed resources for political activities. A large portion of these expenses were for 501 (C) (4) permissable voter engagement activities including voter registration, education & mobilization.

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016**Open to Public
Inspection**

Name of the organization

**Kentuckians for the Commonwealth,
Inc.**

Employer identification number

**** - ***5576****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

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

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

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

(ii) Assets included in Form 990, Part X

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

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

b Assets included in Form 990, Part X

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

(a) Description		(b) Book value
(1)	Prepaid Expenses	25,306
(2)	Due from employees	1,600
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		26,906

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	Other Liabilities	7,114
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)		7,114

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds

KFTC works with grant partners to ensure that all grant requirements are met including reporting requirements.KFTC work with other partners to ensure the appropriate use of designated funds.

Schedule O (Form 990 or 990-EZ) (2016)

Page 2

Name of the organization

Employer identification number

Kentuckians for the Commonwealth,

-*5576

receive a cost of living allowance. When resources are available, each year employees receive a raise based on accruing an additional year of experience. The salary scale was created and approved by the governing body in 2005. It has been adjusted each year for inflation. It is reviewed regularly by the Finance Committee and Steering Committee.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Compensation scale was created based upon research including how other similar organizations approach compensation. Each year all employees receive a cost of living allowance. When resources are available, each year employees receive a raise based on accruing an additional year of experience. The salary scale was created and approved by the governing body in 2005. It has been adjusted each year for inflation. It is reviewed regularly by the Finance Committee and Steering Committee.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

KFTC's governing documents & financial statements are available to the public. To obtain, one must make a request in writing to our main office at P.O. Box 1450 London, KY 40743. We may require reimbursement for copying and postage.

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

Restricted Grant \$ 10,000

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
									Yes	No
(1)										
(2)										
(3)										
(4)										

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(1)	(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
					Yes	No			Yes	No		Yes	No	
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(11)														

Form 990	Two Year Comparison Report	2015 & 2016
For calendar year 2016, or tax year beginning , ending		

Name **Kentuckians for the Commonwealth, Inc.** Taxpayer Identification Number ****_***5576**

		2015	2016	Differences
Revenue	1. Contributions, gifts, grants	1. 168,258	219,909	51,651
	2. Membership dues and assessments	2.		
	3. Government contributions and grants	3.		
	4. Program service revenue	4. 62,793	54,909	-7,884
	5. Investment income	5. 2,617	2,269	-348
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7. -368	-5,242	-4,874
	8. Net income or (loss) from fundraising events	8.		
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10. 3,654	4,068	414
	11. Other revenue	11. 3,064	35,723	32,659
	12. Total revenue. Add lines 1 through 11	12. 240,018	311,636	71,618
Expenses	13. Grants and similar amounts paid	13.	95,722	95,722
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15.		
	16. Salaries, other compensation, and employee benefits	16. 59,953	77,683	17,730
	17. Professional fundraising fees	17.		
	18. Other professional fees	18.		
	19. Occupancy, rent, utilities, and maintenance	19. 2,286	5,372	3,086
	20. Depreciation and Depletion	20.		
	21. Other expenses	21. 68,750	86,077	17,327
	22. Total expenses. Add lines 13 through 21	22. 130,989	264,854	133,865
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 109,029	46,782	-62,247
Other Information	24. Total exempt revenue	24. 240,018	311,636	71,618
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 71,760	91,727	19,967
	27. Total assets	27. 193,169	265,935	72,766
	28. Total liabilities	28. 70,667	76,922	6,255
	29. Retained earnings	29. 122,502	189,013	66,511
	30. Number of voting members of governing body	30. 18	18	
	31. Number of independent voting members of governing body	31. 18	18	
	32. Number of employees	32. 32	32	
	33. Number of volunteers	33. 10000	11000	

Form 990T	Tax Return History					2016
Name	Kentuckians for the Commonwealth, Inc.					Employer Identification Number **-***5576
	2012	2013	2014	2015	2016	2017
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed 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						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						

Federal Statements

FYE: 12/31/2016

Taxable Interest on Investments

Description		Unrelated	Exclusion	Postal	Acquired after	US
Amount		Business Code	Code	Code	6/30/75	Obs (\$ or %)
	\$ 47		14			
Total	\$ 47					

Taxable Dividends from Securities

Description		Unrelated	Exclusion	Postal	Acquired after	US
Amount		Business Code	Code	Code	6/30/75	Obs (\$ or %)
	\$ 2,222		14			
Total	\$ 2,222					

45610 Kentuckians for the Commonwealth,

**-*5576

FYE: 12/31/2016

11/13/2017 5:02 PM

Federal Statements

Savings - EOY

<u>Description</u>	<u>Amount</u>
KFTC Checking Account	\$ 139,143
Family Bank Now Checking	1,125
Charles Schwab Money Market	5,628
Total	<u>\$ 145,896</u>

Baldwin CPAs, PLLC
713 W Main St
Richmond, KY 40475-1351

Kentucky Coalition, Inc.
P.O. Box 1450
London, KY 40743-1450
|||||

Filing Instructions

Kentucky Coalition, Inc.

Exempt Organization Tax Return

Taxable Year Ended December 31, 2016

Date Due: November 15, 2017

Remittance: None is required. Your Form 990 for the tax year ended 12/31/16 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Sign the IRS e-file Authorization and mail it as soon as possible to:

Baldwin CPAs, PLLC
713 W Main St
Richmond, KY 40475-1351

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

Form **990**Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016
Open to Public
Inspection
A For the 2016 calendar year, or tax year beginning , and ending**B Check if applicable:**

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**Kentucky Coalition, Inc.**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

P.O. Box 1450

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

London**KY 40743-1450****F Name and address of principal officer:****Burt Lauderdale****PO Box 1450****London****KY 40743****D Employer identification number******_***3237****E Telephone number****606-878-2161****G Gross receipts \$ 3,421,941****H(a) Is this a group return for subordinates?** ☐ Yes ☒ No**H(b) Are all subordinates included?** ☐ Yes ☐ No

If "No," attach a list. (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J Website:** **N/A****K Form of organization:** ☒ Corporation ☐ Trust ☐ Association ☐ Other**H(c) Group exemption number****L Year of formation: 1984****M State of legal domicile: KY****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: To support grassroots organizing, leadership development & public education around important public policy. KY Coalition seeks to promote active citizen participation in the democratic process.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	8
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	8
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	60
	Revenue	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a
b Net unrelated business taxable income from Form 990-T, line 34		7b	0
8 Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g)		1,362,837	2,901,135
Expenses	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	132,201	34,278
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	223,949	40,508
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	222,839	145,226
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,941,826	3,121,147
	14 Benefits paid to or for members (Part IX, column (A), line 4)	198,850	126,498
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,451,776	1,408,053
	b Total fundraising expenses (Part IX, column (D), line 25)	0	0
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	47,549	443,468
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	443,468	599,595
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12	2,094,094	2,134,146
	20 Total assets (Part X, line 16)	-152,268	987,001
	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	4,280,990	5,348,320

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date	
	Burt Lauderdale		Executive Director	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if PTIN
	Myron D. Fisher	Myron D. Fisher	11/13/17	self-employed *****
	Firm's name	Firm's EIN		
	Baldwin CPAs, PLLC	**_***6603		
	Firm's address	Phone no.		
	713 W Main St	859-626-9040		
	Richmond, KY 40475-1351			

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990** (2016)

Part IV Checklist of Required Schedules

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 25	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 0	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

Form 990 (2016) **Kentucky Coalition, Inc.******--***3237**Page **7****Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Burt Lauderdale	0.00									
Executive Director	50.00	X		X				0	79,634	0
(2) Megan Naseman	0.00									
Director	0.00	X						0	0	0
(3) Dana Beasley Brown	0.00									
Immediate Past Chair	0.00	X		X				0	0	0
(4) Mary Love	0.00									
Director	0.00	X						0	0	0
(5) Elizabeth Sanders	0.00									
Chair	0.00	X		X				0	0	0
(6) Homer White	0.00									
Sec Treasurer	0.00	X		X				0	0	0
(7) Tayna Fogle	0.00									
Director	0.00	X						0	0	0
(8) Meta Mendel Reyes	0.00									
Vice Chair	0.00	X		X				0	0	0
(9) Ryan Fenwick	0.00									
At Large Rep	0.00	X		X				0	0	0
(10)										
(11)										

Form 990 (2016) **Kentucky Coalition, Inc.******_***3237**Page **9****Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,901,135			
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		2,901,135			
Program Service Revenue	2a Renewals	Busn. Code	33,348	33,348		
	b New Membership		930	930		
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		34,278			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		35,841		
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
		(i) Real (ii) Personal				
6a Gross rents						
b Less: rental exps.						
c Rental inc. or (loss)						
d Net rental income or (loss)						
7a Gross amount from sales of assets other than inventory		(i) Securities (ii) Other	305,461			
b Less: cost or other basis & sales exps			300,794			
c Gain or (loss)			4,667			
d Net gain or (loss)			4,667	4,667		
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		a	3,445			
b Less: direct expenses		b				
c Net income or (loss) from fundraising events			3,445			
9a Gross income from gaming activities. See Part IV, line 19		a				
b Less: direct expenses		b				
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Busn. Code				
11a Pass Through Income		126,498	126,498			
b Rent Income		8,400	8,400			
c Misc		6,776	6,776			
d All other revenue		107	107			
e Total. Add lines 11a-11d		141,781				
12 Total revenue. See instructions.		3,121,147	180,726	0	35,841	

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	649,519	1	1,183,856
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	2,084,503	3	2,649,978
	4 Accounts receivable, net	336,353	4	336,353
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	12,425	7	12,675
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	5,266
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 217,217		
	b Less: accumulated depreciation	10b 104,393	10c	112,824
	11 Investments—publicly traded securities	1,063,444	11	1,033,305
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	12,001	15	14,063
16 Total assets. Add lines 1 through 15 (must equal line 34)	4,280,990	16	5,348,320	
Liabilities	17 Accounts payable and accrued expenses	182,956	17	313,148
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	398,712	25	345,039
	26 Total liabilities. Add lines 17 through 25	581,668	26	658,187
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,589,819	27	2,040,155
	28 Temporarily restricted net assets	2,109,503	28	2,649,978
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	3,699,322	33	4,690,133
	34 Total liabilities and net assets/fund balances	4,280,990	34	5,348,320

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2016**Open to Public
Inspection**

Name of the organization

Kentucky Coalition, Inc.

Employer identification number

****-***3237****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.)

- 1 ☐ 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).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 ☐ 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).**
- 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.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ 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 university:
- 10 ☐ 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.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ 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 12g.
- a ☐ **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.**
- 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.**
- 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.**
- d ☐ **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.**
- e ☐ 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.
- f Enter the number of supported organizations:
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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.)

Section A. Public Support

Calendar 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.")						
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a** ☐ The organization satisfied the Activities Test. Complete line 2 below.
- b** ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c** ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.**
- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

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

Section D - Distributions		Current Year		
1	Amounts paid to supported organizations to accomplish exempt purposes			
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of supported organizations			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	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 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:			
a				
b	Excess from 2013			
c	Excess from 2014			
d	Excess from 2015			
e	Excess from 2016			

Schedule B
(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2016

Name of the organization

Kentucky Coalition, Inc.

Employer identification number

**** - *** 3237**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(**3**) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 $\frac{1}{3}$ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Page 2 of 2

Page 2

Name of organization

Kentucky Coalition, Inc.

Employer identification number

-*3237

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	MACED (Stoneman) 433 Chestnut Street Berea KY 40403	\$ 120,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	New World Foundation 666 West End Ave NY NY 10025	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	Surdna Foundation 330 Madison Ave#30 New York NY 10017	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	MACED (JPB) 433 Chestnut Street Berea KY 40403	\$ 800,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	0													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	6,816													
c Total lobbying expenditures (add lines 1a and 1b)	6,816													
d Other exempt purpose expenditures	0													
e Total exempt purpose expenditures (add lines 1c and 1d)	6,816													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,363													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)	341													
h Subtract line 1g from line 1a. If zero or less, enter -0-	0													
i Subtract line 1f from line 1c. If zero or less, enter -0-	5,453													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No													

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	247,922	238,814	6	1,363	488,105
b Lobbying ceiling amount (150% of line 2a, column(e))					732,158
c Total lobbying expenditures	11,303	1,570	31	6,816	19,720
d Grassroots nontaxable amount	61,981	59,704	2	341	122,028
e Grassroots ceiling amount (150% of line 2d, column (e))					183,042
f Grassroots lobbying expenditures				0	

Part IV	Supplemental Information <i>(continued)</i>
----------------	--

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

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

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

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

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

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

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

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,529,780	1,609,166	1,594,250	1,294,184	1,206,408
b Contributions					5,094
c Net investment earnings, gains, and losses	52,508	12,965	91,059	269,505	100,776
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	2,255	1,854	92,190	6,199	2,094
g End of year balance	1,580,033	1,529,780	1,609,166	1,594,250	1,294,184

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

a Board designated or quasi-endowment **100.00** %

b Permanent endowment %

c Temporarily restricted endowment %

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

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

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		55,000		55,000
b Buildings		77,145	36,942	40,203
c Leasehold improvements				
d Equipment		85,072	67,451	17,621
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				112,824

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

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

1	Total revenue, gains, and other support per audited financial statements	1	2,998,459
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	3,810
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	3,810
3	Subtract line 2e from line 1	3	2,994,649
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	126,498
c	Add lines 4a and 4b	4c	126,498
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,121,147

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

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

1	Total expenses and losses per audited financial statements	1	2,007,648
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	2,007,648
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	126,498
c	Add lines 4a and 4b	4c	126,498
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,134,146

Part XIII Supplemental Information.

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

Part V, Line 4 - Intended Uses for Endowment Funds

The purpose of the endowment is to support the mission and goals of the Kentucky Coalition and Kentuckians for the Common Wealth

Part XI, Line 4b - Revenue Amounts Included on Return - Other

Pass Through Income \$ 126,498

Part XII, Line 4b - Expense Amounts Included on Return - Other

Pass Through Expenses \$ 126,498

SCHEDULE I
(Form 990)Department of the Treasury
Internal Revenue Service**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016**Open to Public
Inspection**

Name of the organization

Kentucky Coalition, Inc.

Employer identification number

-*3237

Part I General Information on Grants and Assistance**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	Mountain Association for Community							
	433 Chestnut Street							
	Berea KY 40403	**--***0246	501c3	66,930				Appalachian Transiti
(2)	Appalachian Voices							
	171 Grand Blvd							
	Boone NC 28607	**--***9956	501c3	59,568			Appal Transiti	
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table							2
3	Enter total number of other organizations listed in the line 1 table							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

DAA

Schedule I (Form 990) (2016)

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2016**Open to Public
Inspection**

Name of the organization

Kentucky Coalition, Inc.

Employer identification number

**** - ***3237****Form 990, Part VI, Line 11b - Organization's Process to Review Form 990**

A copy of the 990 and audit is provided to the KY Coalition Board prior to filing.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

KY Coalition falls under the anti-nepotism rule and conflict of interest statement outlined in the KFTC policies. The KC Board is responsible for monitoring and enforcing these policies for KC.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

Compensation is under reimbursement with related organization. A compensation scale was created based upon research including how other similar organizations approach compensation. Each year all employees receive a cost of living adjustment. When resources are available, each year employees receive a raise based on accruing an additional year of experience. The salary scale was created and approved by the governing body in 2005. It has been adjusted each year for inflation. It is reviewed annually by leadership.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Compensation is under reimbursement with related organization.

A compensation scale was created based upon research including how other similar organizations approach compensation. Each year all employees receive a cost of living adjustment. When resources are available, each year employees receive a raise based on accruing an additional year of

SCHEDULE R
(Form 990)**Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.Department of the Treasury
Internal Revenue Service
Name of the organization**Kentucky Coalition, Inc.**

Employer identification number

-*3237

OMB No. 1545-0047

2016**Open to Public
Inspection****Part I Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
							Yes No
(1)	Kentuckians for the Commonwealth P O Box 1450 London KY 40743 **-***5576	Promote	KY	501C4		N/A	X
(2)		citizen				N/A	X
(3)		Partnership				N/A	X
(4)							
(5)							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

DAA

Schedule R (Form 990) 2016

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to related organization(s)**c** Gift, grant, or capital contribution from related organization(s)**d** Loans or loan guarantees to or for related organization(s)**e** Loans or loan guarantees by related organization(s)**f** Dividends from related organization(s)**g** Sale of assets to related organization(s)**h** Purchase of assets from related organization(s)**i** Exchange of assets with related organization(s)**j** Lease of facilities, equipment, or other assets to related organization(s)**k** Lease of facilities, equipment, or other assets from related organization(s)**l** Performance of services or membership or fundraising solicitations for related organization(s)**m** Performance of services or membership or fundraising solicitations by related organization(s)**n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)**o** Sharing of paid employees with related organization(s)**p** Reimbursement paid to related organization(s) for expenses**q** Reimbursement paid by related organization(s) for expenses**r** Other transfer of cash or property to related organization(s)**s** Other transfer of cash or property from related organization(s)**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization		(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Kentuckians for the Commonwealth		o	956,847	Payroll
(2) Kentuckians for the Commonwealth		n	8,477	Reimbursement
(3) Kentuckians for the Commonwealth		p	332,584	Reimb Emp Benefits
(4) Kentuckians for the Commonwealth		q	8,477	Reimb Joint Costs
(5)				
(6)				

Part VII	Supplemental Information Provide additional information
-----------------	---

Provide additional information for responses to questions on Schedule R (See instructions).

Federal Asset Report

Form 990, Page 1

FYE: 12/31/2016

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Prior MACRS:												
27	PHONE SYSTEM	12/31/98	2,350				2,350	5	HY	S/L	2,115	0
124	Computer- MacBijj 13" 20 GHZ 80 GB	3/27/07	1,548				1,548	5	HY	200DB	1,548	0
125	Computer-Apple Desk IMAC 20/CTO	2/21/07	1,813				1,813	5	HY	200DB	1,813	0
126	Phone System	4/05/07	3,496				3,496	7	HY	200DB	3,496	0
127	Computer-Apple Laptop MacBook Pro	3/31/07	2,146				2,146	5	HY	200DB	2,146	0
128	Camera	4/25/07	540				540	7	HY	200DB	540	0
130	Furniture-Office	5/14/07	1,500				1,500	7	HY	200DB	1,500	0
131	2 Computers-MacBook 13" 2.0GHZ 1 GB F	8/22/07	2,696				2,696	5	HY	200DB	2,696	0
132	Computer-MacBook 13" 2.0GHZ 1 GB RA	9/17/07	1,388				1,388	5	HY	200DB	1,388	0
133	Printer-Xerox Phaser Series 6q80 DN	8/13/07	612				612	5	HY	200DB	612	0
155	Mac Book Air Computer	8/29/11	1,511			X	0	5	HY	200DB	1,511	0
			<u>19,600</u>				<u>18,089</u>				<u>19,365</u>	<u>0</u>
Other Depreciation:												
134	MacBook Pro Computer	2/21/08	1,844				1,844	5	MO	S/L	1,844	0
136	MacBook Pro Computer	5/15/08	1,405				1,405	5	MO	S/L	1,405	0
137	MacBook Pro Computer	6/09/08	1,402				1,402	5	MO	S/L	1,402	0
138	MacBook Pro Computer	6/16/08	1,402				1,402	5	MO	S/L	1,402	0
139	MacBook Pro Computer	7/14/08	1,402				1,402	5	MO	S/L	1,402	0
140	Camera	1/14/08	703				703	5	MO	S/L	703	0
141	Projector	2/14/08	750				750	5	MO	S/L	750	0
142	MacBook Pro Computer	10/24/08	2,278				2,278	5	MO	S/L	2,278	0
143	MacBook Pro Computer	12/31/08	1,418				1,418	5	MO	S/L	1,418	0
144	MacBook Pro Computer	12/23/08	1,323				1,323	5	MO	S/L	1,323	0
145	Camera	11/13/08	832				832	5	MO	S/L	832	0
146	Copier	12/31/08	650				650	5	MO	S/L	650	0
147	Macbook Computer	3/22/09	1,650				1,650	5	MO	S/L	1,650	0
148	Macbook Computer	5/15/09	1,694				1,694	5	MO	S/L	1,694	0
149	Macbook Computer	10/03/09	1,668				1,668	5	MO	S/L	1,668	0
150	Macbook Computer	10/20/09	1,243				1,243	5	MO	S/L	1,243	0
151	Dell Computer	8/26/09	700				700	5	MO	S/L	700	0
152	Printer and Warranty	6/21/10	570				570	5	MO	S/L	570	0
153	Projector	8/18/10	715				715	5	MO	S/L	715	0
154	Computer - Robin	11/17/10	2,065				2,065	5	MO	S/L	2,065	0
156	Computer for Louisville Volunteer	2/22/12	1,105				1,105	5	MO	S/L	847	221
157	Dell Computer	3/14/12	834				834	5	MO	S/L	639	167
158	Mac Computer	4/17/12	1,520				1,520	5	MO	S/L	1,115	304
159	Macbook + Applecare	9/24/12	1,556				1,556	5	MO	S/L	1,011	312
160	Macbook Pro + Applecare	8/14/12	1,713				1,713	5	MO	S/L	1,171	342
161	Kevin's Computer	11/13/12	1,178				1,178	5	MO	S/L	746	236
162	Macbook Computer	1/08/13	2,866				2,866	5	MO	S/L	1,720	573
163	Macbook Computer	1/15/13	4,900				4,900	5	MO	S/L	2,940	980
164	Macbook Computer	10/14/13	1,268				1,268	5	MO	S/L	571	253
165	Macbook Computer	12/31/13	2,327				2,327	5	MO	S/L	931	465
166	Computer	2/21/14	2,470				2,470	5	MO	S/L	906	494
167	Apple Computer	4/15/14	1,532				1,532	5	MO	S/L	536	307
168	Computer	9/22/14	6,299				6,299	5	MO	S/L	1,575	1,260
169	New roof for London office	12/17/14	11,995				11,995	20	MO	S/L	600	600
170	London Office Renovation	6/30/15	10,190				10,190	20	MO	S/L	255	509
	Total Other Depreciation		<u>77,467</u>				<u>77,467</u>				<u>41,277</u>	<u>7,023</u>
	Total ACRS and Other Depreciation		<u>77,467</u>				<u>77,467</u>				<u>41,277</u>	<u>7,023</u>
	Grand Totals		97,067				95,556				60,642	7,023
	Less: Dispositions and Transfers		0				0				0	0
	Less: Start-up/Org Expense		0				0				0	0
	Net Grand Totals		<u>97,067</u>				<u>95,556</u>				<u>60,642</u>	<u>7,023</u>

45665 Kentucky Coalition, Inc.

11/13/2017 3:20 PM

_*3237

Depreciation Adjustment Report

FYE: 12/31/2016

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
-------------	-------------	--------------	--------------------	------------	------------	---

There are no assets that meet the criteria of this report

Form 990	Two Year Comparison Report	2015 & 2016
For calendar year 2016, or tax year beginning , ending		

Name

Taxpayer Identification Number

Kentucky Coalition, Inc.**** - *** 3237**

		2015	2016	Differences
Revenue	1. Contributions, gifts, grants	1. 1,362,837	2,901,135	1,538,298
	2. Membership dues and assessments	2.		
	3. Government contributions and grants	3.		
	4. Program service revenue	4. 132,201	34,278	-97,923
	5. Investment income	5. 42,769	35,841	-6,928
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7. 181,180	4,667	-176,513
	8. Net income or (loss) from fundraising events	8.	3,445	3,445
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10.		
	11. Other revenue	11. 222,839	141,781	-81,058
	12. Total revenue. Add lines 1 through 11	12. 1,941,826	3,121,147	1,179,321
Expenses	13. Grants and similar amounts paid	13. 198,850	126,498	-72,352
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15.		
	16. Salaries, other compensation, and employee benefits	16. 1,451,776	1,408,053	-43,723
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 81,894	215,920	134,026
	19. Occupancy, rent, utilities, and maintenance	19. 48,856	74,077	25,221
	20. Depreciation and Depletion	20. 8,369	7,990	-379
	21. Other expenses	21. 304,349	301,608	-2,741
	22. Total expenses. Add lines 13 through 21	22. 2,094,094	2,134,146	40,052
	23. Excess or (Deficit). Subtract line 22 from line 12	23. -152,268	987,001	1,139,269
Other Information	24. Total exempt revenue	24. 1,941,826	3,121,147	1,179,321
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 578,989	216,567	-362,422
	27. Total assets	27. 4,280,990	5,348,320	1,067,330
	28. Total liabilities	28. 581,668	658,187	76,519
	29. Retained earnings	29. 3,699,322	4,690,133	990,811
	30. Number of voting members of governing body	30. 8	8	
	31. Number of independent voting members of governing body	31. 8	8	
	32. Number of employees	32. 0	0	
	33. Number of volunteers	33. 50	60	

Form 990T		Tax Return History					2016
Name		Kentucky Coalition, Inc.					Employer Identification Number **-***3237
	2012	2013	2014	2015	2016	2017	
Business activity profit/loss							
Capital gains/losses							
Partner and S Corp gain/loss							
Rental income*							
Debt-financed 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							
Repairs and maintenance							
Bad debts							
Interest							
Taxes and licenses							
Charitable contributions							
Depreciation and Depletion							
Deferred compensation plans							
Employee benefit programs							

Federal Statements

FYE: 12/31/2016

Taxable Interest on Investments

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
Interest- Family Bank/ 1st Co						
\$ 2			14			
Interest- Schwab Money Fund	1		14			
Interest- Nature Conserv	3,465		14			
Interest- Union City NJ	5,170		14			
Interest- Portland OR	1,578		14			
Interest- Michigan Fin Au	2,875		14			
Interest- HEAD CLF loan	250		14			
Interest- Claire's store	444		14			
Interest- ToysrUS	190		14			
Interest-Erickson	578		14			
Interest-Frontier Commn	1,743		14			
Interest-Seagate-HDD	540		14			
Interest Borrowed ANFI	17		14			
Interest-Forte Capital	1		14			
Interest-Parnassus	1,767		14			
Interest- SuperValu Bond	462		14			
Interest- Century Link	253		14			
Interest- Toys R us	424		14			
Interest-Genworth Bond	552		14			
Interest-Micron Bond	643		14			
Interest-Avon Bond	304		14			
Interest-Tital Intl Bond	1,004		14			
Interest-US Steel Bond	189		14			
Interest	210		14			

Federal Statements

11/13/2017 3:20 PM

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
Contracted Services	\$ 215,920	\$ 195,451	\$ 15,330	\$ 5,139
Total	\$ 215,920	\$ 195,451	\$ 15,330	\$ 5,139

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
London office depr	\$ 1,929		\$ 1,929	\$ 26
Maintenance	1,094	990	78	
Total	\$ 3,023	\$ 990	\$ 2,007	\$ 26

Federal Statements

FYE: 12/31/2016

Cash - EOY

<u>Description</u>	<u>Amount</u>
KC Checking Account	\$ 928,896
First Commonwealth Checking	3,880
Schwab Money Fund(9940)	4,934
Schwab Money Fund(7798)	945
Alliance checking Account	159,110
Coastal Equities	34,313
Forte Capital	51,352
cash	426
Total	<u>\$ 1,183,856</u>

Grants receivable - EOY

<u>Description</u>	<u>Amount</u>
Grants Receivable	\$ 1,650,000
Other Receivables	-305,022
Grant receivable-Current	1,305,000
Total	<u>\$ 2,649,978</u>

Accounts receivable - EOY

<u>Description</u>	<u>Amount</u>
Loan for cash flow	\$ 336,353
Accounts Receivable	
Total	<u>\$ 336,353</u>

Accounts payable - EOY

<u>Description</u>	<u>Amount</u>
Accumulated Leave	\$ 186,070
Accumulated Vacation	2,881
Year End Payable	40,981
Year End Payable	5,665
Misc Liability	77,551
Total	<u>\$ 313,148</u>

KENTUCKIANS FOR THE COMMONWEALTH, INC.

General Information

Organization Number	0173106
Name	KENTUCKIANS FOR THE COMMONWEALTH, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	12/20/1982
Organization Date	12/20/1982
Last Annual Report	4/20/2018
Principal Office	P. O. BOX 1450 131 N. MILL STREET LONDON, KY 40743
Registered Agent	BURT LAUDERDALE P. O. BOX 1450 131 N. MILL ST. LONDON, KY 40741

Current Officers

Chairman	Meta Mendel-Reyes
Vice Chairman	Randall Wilson
Secretary	Christian Torp
Trustee	Cassia Herron
Trustee	Mary Love
Director	Barbara Farley
Director	Amy Copelin
Director	Summer Bolton
Director	Sarah Bowling
Director	Robert Olivam
Director	Chanda Campbell
Director	Christopher Merritt
Director	Chase Gladson
Director	Leslie Bebensee
Director	Joy Fitzgerald
Director	Wendy Warren
Director	Amanda Groves
Director	David Miller

Individuals / Entities listed at time of formation

Director	GLADYS MAYNARD
-----------------	--------------------------------

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	4/20/2018 11:04:48 AM	4/20/2018 11:04:48 AM	
Annual report	3/23/2017 4:07:23 PM	3/23/2017 4:07:23 PM	
Annual report	2/5/2016 10:34:59 AM	2/5/2016 10:34:59 AM	
Annual report	2/6/2015 1:27:05 PM	2/6/2015 1:27:05 PM	
Annual report	1/29/2014 8:27:08 PM	1/29/2014 8:27:08 PM	
Amendment to annual report	6/17/2013 1:55:28 PM	6/17/2013 1:55:28 PM	
Annual report	4/11/2013 2:56:27 PM	4/11/2013 2:56:27 PM	
Annual report	6/6/2012 3:32:10 PM	6/6/2012 3:32:10 PM	
Annual report	6/10/2011 1:51:24 PM	6/10/2011 1:51:24 PM	
Annual report	6/2/2010 3:40:33 PM	6/2/2010 3:40:33 PM	
Amendment - Miscellaneous amendments	6/24/2009 3:23:52 PM	6/24/2009	
Annual report	6/22/2009 9:16:41 PM	6/22/2009 9:16:41 PM	
Annual report	4/9/2008 10:55:01 AM	4/9/2008 10:55:01 AM	
Annual report	6/27/2007 11:47:36 AM	6/27/2007 11:47:36 AM	
Annual report	3/10/2006 2:51:50 PM	3/10/2006	
Annual report	6/28/2005	6/28/2005	
Reinstatement	10/7/1998	10/7/1998	
Registered agent address change	10/7/1998	10/7/1998	
Principal office change	10/7/1998	10/7/1998	
Admin Dis. A. report not in	11/1/1995	11/1/1995	
Amendment previous name	12/14/1987	12/14/1987	KENTUCKY FAIR TAX COALITION, INC.

Microfilmed Images

Microfilm images are not available online. They can be ordered by faxing a [Request For Corporate Documents](#) to the Corporate Records Branch at 502-564-5687.

Annual Report	7/29/2004	1 page
Annual Report	8/25/2003	1 page
Annual Report	7/29/2002	1 page
Annual Report	7/23/2001	1 page
Annual Report	6/29/2000	1 page