NEIGHBORHOOD DEVELOPMENT FUND
Not-for-Profit Transmittal and Approval Form
Applicant/Program: Wilder Park Association
Applicant Requested Amount: $\$ 2,250$
Appropriation Request Amount: $\$ 2,250$

Executive Summary of Request
Wilder Park Neighborhood Association is requesting funding for four neighborhood events-all of which are open to the public.

| Is this program/project a fundraiser? | $\square$ Yes | $\square$ No |
| :--- | :--- | :--- |
| Is this applicant a faith based organization? | $\square$ Yes | $\square$ No |
| Does this application include funding for sub-grantee(s)? | $\square$ Yes | $\square$ |

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.


## 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:

Date
Final Appropriations Amount: $\qquad$

# LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION 

| Legal Name of Applicant Organization Wilder Park Association |  |
| :---: | :---: |
| Program Name and Request Amount Program services, Festivals, Newsletter |  |
|  | Yes/No/NA |
| Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding? | Yes |
| Is the funding proposed by Council Member(s) less than or equal to the request amount? | Yes |
| Is the proposed public purpose of the program viable and well-documented? | Yes |
| Will all of the funding go to programs specific to Louisville/Jefferson County? | Yes |
| Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet? | Yes |
| Has prior Metro Funds committed/granted been disclosed? | No |
| Is the application properly signed and dated by authorized signatory? | ves |
| Is proof of Tax Exempt status of 501(c) $3,4,6,19,1120-\mathrm{H}$ included? | Yes |
| If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district? | No |
| Is the entity in good standing with: <br> - Kentucky Secretary of State? <br> Louisville Metro Revenue Commission? <br> - Louisville Metro Government? <br> - Internal Revenue Service? <br> Louisville Metro Human Relations Commission? | Yes |
| Is the current Fiscal Year Budget included? | Yes |
| Is the entity's board member list (with term length/term limits) included? | Yes |
| Is recommended funding less than 33\% of total agency operating budget? | Yes |
| Does the application budget reflect only the revenue and expenses of the project/program? | Yes |
| Is the cost estimate(s) from proposed vendor (if request is for capital expense) included? | N/A |
| Is the most recent annual audit (if required by organization) included? | N/A |
| Is a copy of Signed Lease (if rent costs are requested) included? | N/A |
| Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included? | N/A |
| Are the Articles of Incorporation of the Agency included? | Yes |
| Is the IRS Form W-9 included? | Yes |
| Is the IRS Form 990 included? | Yes |
| Are the evaluation forms (if program participants are given evaluation forms) included? | N/A |
| Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)? | N/A |
| Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards? | N/A |
| Prepared by: Shughes. Date: Aug 21, 2018 |  |

4|Page
Effective May 2016

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION



Page 1
Effective May 2016 $\qquad$

## SECTION 3-AGENCY DETAILS

## Describe Agency's Vision, Mission and Services:

The Wilder Park Neighborhood Association is dedicated to promoting a cohesive, safe, and friendly environment for neighbors to know each other in order to work together and live together in harmony. The Board of Directors act as leaders for the neighborhood, providing pertinent, timely information as well as contact information for various government services and programs.

Page 2

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

## SECTION A - BOARD OF DIRECTORS AND PAND STAFF

| Board Member | Term End Date |
| :--- | :--- |
| Ron Geary, President | NA |
| Katie Chaney, Vice President | NA |
| Sean McNamara, Treasurer | NA |
| Robin Sample, Recording Secretary | NA |
| Mike Martin, Correspondence Secretary | NA |
| A. B. Roman, Charter Director | NA |
| George Parker, Facilities/Rentals | NA |
| Robin Miller, Director | NA |
| David Reece, Director | NA |
| Louise Dillihay, Director | NA |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

## Describe the Board term limit policy:

Directors are elected for a term with no limits and are volunteers

| Three Highest Paid Staff Names | Annual Salary |
| :--- | :--- |
| None |  |
|  |  |

Page 3

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

## SECTTOON 5 - PROGRAM/PROJECT NARRATHYE

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 Wilder Park Neighborhood Association is requesting NDF to cover funding for four neighborhood events open to the public:

| Easter Egg Hunt | $\$ 150.00$ |
| :--- | :--- |
| Corn Roast | $\$ 200.00$ |
| Chili Fest | $\$ 625.00$ |
| Ice Crearn Social | $\$ 150.00$ |

We are also requesting $\$ 1,125.00$ to cover the annual newsletter printing and delivery expense.

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

| Easter Egg Hunt | $\$ 150.00$ for food and prizes |
| :--- | :--- |
| Corn Roast | $\$ 200,00$ for bouncy castle, food and prizes |
| Chili Fest | $\$ 625.00$ for a band, bouncy castle, food, and prizes |
| Ice Cream Social | $\$ 150$ for bouncy castle and ice cream |
| Newsletter | $\$ 450.00$ for delivery |
|  | $\$ 675.00$ for printing |

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

C: If this request is a fundralser, please detall how the proceeds will be spent:

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:
$\checkmark$ 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):
$\checkmark$ Attach a copy of invoices and/or receipts to provide proof of purchase of activities assoclated with the work plan identified in this application.
$\checkmark$ 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.

## Page 5

## 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:

Volunteers from The Wilder Park Association work to build relationships that foster a cohesive, safe, and friendly environment by providing pertinent and timely information regarding programs and services as well as contact information. Approximately nine hundred newsletters are printed and distributed by mail, e-mail, and home delivery eight to ten times per year to keep members of the neighborhood informed and to encourage membership and participation. The newsletters keep local, state, and federal representatives informed of the events and programs being sponsored by the Association. In sponsoring events such as the Easter Egg Hunt, Chili Cook-off, and Christmas party, The Wilder Park Association is demonstrating how proud we are of our community, city, and of the efforts of volunteers, police, and civic leaders. Community involvement and civic responsibility leads to safer, cleaner cleaner lliving conditions, which benefits the city as a whole. Keeping the Wilder Park Community Center open is vital to supporting the mission and activities of the Wilder Park Association and this grant will help maintain and operate the Center.

## F: Briefly describe any exlsting collaborative relationships the organization has with other community organizations. Describe what those partners are bringing to the relationship in general and to this program/project specifically.

The Wilder Park Association is affiliated with the South Louisville Neighborhood Connection in partnership with the neighborhood associations of Beechmont, Oakdale, and Iroquois. Metro Police have an open invitation to all Wilder Park Association meetings and events to show support for their efforts to keep our community safe. The Association |maintains a close working relationship with local, state, and federal representatives to assist the community with any questions or issues.

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

| Pragranim/Projecs Expemses | column $1$ | Coluswin $2$ | Column $(1+2)=3$ |
| :---: | :---: | :---: | :---: |
|  | Proposed shetro Fundis | Hento <br> Metro <br> Frunds | Tosial <br> Fueds |
| A: Personnel Costs Including Benefits |  |  |  |
| B: Rent/Utilities |  | 2,700.00 | 2,700,00 |
| 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) | 1,125.00 |  | 1,125.00 |
| J: Machinery \& Equipment |  |  |  |
| K: Capltal Project |  |  |  |
| L: Other Expenses (See Detailed List on Page 8) | 1,125.00 | 2,050.00 | 3,175.00 |
| *TOTAL PROGRAM/PROJECT FUNDS | 2,250.00 | 4,750.00 | 7,000.00 |
| \%\% of Program Budget | 32 \% | 68 \% | 100\% |

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

| Other State, Federal or Local Government | 0 |
| :--- | :---: |
| United Way | 0 |
| Private Contributions (do not include individual donor names) | $4,750.00$ |
| Fees Collected from Program Participants | 0 |
| Other (please specify) |  |
|  | $4,750.00$ |

*Total of Column 1 MUST match "Total Request on Page 1, Section 2"
**Must equal or exceed total in column 2.

Page 7
Effective May 2016
Applicant's initials, \&\%

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

$\left.\left.\begin{array}{|l|c|c|c|}\hline \begin{array}{c}\text { Detail for Client Assistance, Community Events \& } \\ \text { Festivals or Other Expenses shown on Page 7 } \\ \text { (circle one and use multiple sheets if necessary) }\end{array} & \begin{array}{c}\text { Column } \\ 1\end{array} & \begin{array}{c}\text { Column } \\ 2\end{array} & \begin{array}{c}\text { Column } \\ (1+2)=3\end{array} \\ \hline \text { Mroposed } \\ \text { Funds }\end{array} \quad \begin{array}{c}\text { Non- } \\ \text { Metro } \\ \text { Funds }\end{array}\right] \begin{array}{c}\text { Total Funds }\end{array}\right]$

Page 8
Effective May 2016
Applicant's Initials s/m

## 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).

| Donar*/Tvpe of Contribution | Value of Contribution | Miethod of Valuation |
| :---: | :---: | :---: |
| Wilder Park members - time | 2,700 | Estimated |
|  |  |  |
|  |  |  |
|  |  |  |
| Total Value of In-Kind <br> (to match Program Budget Line Item. Volunteer Contribution \&Other In Kind) | 2,700 |  |

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

Agency Fiscal Year Start Date: July 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 $\square$ YES $\square$

If YES, please explaln:

## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

## SECTION 7-CERTUFUCATHONS \& 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 bellef the following Assurances and Cert'fications. If there is any reason why one or more of the assurances or certfications listed cannot be certified or assured, please explain in writing and attach to this application.

## Staindard 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. Appilcant understands if the grant agreement is not returned to Loulsville 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. Appilcant and any sub grantee will give Loulsville 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, Louisvilie Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Loulisville Metro Human Relations Commission.
6. Appiticant 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 Loulsville Metro any unexpended funds by fuly 31 foilowing the Metro Louisville's fiscal year end.
8. Appliciant 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 Afflrmative Action/Equal Opportunlty 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, fratemal or like activities in order to recelve services/benefits provided with Louisville Metro Government funds.
5. The Agency understands the Americans with Disabilities Act (ADA) and makes reasonable accommodations.

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

## SECTION 8 - CERTIFICATIONS 品 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 ellgible for funding if investigatlon at any time shows fatsification. If falsfification Is shown after funding has been approved, any allocatlons 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 appilication.

| Signature of Legal Signatory: |  | den didtuverat |  | Date: | celat |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Legal Signatory: (please print): |  | Sean McNamara |  | Title: | Treasurer |
| Phone: | 502-361-1764 | Extension: | Email: | smenamara | @yahoo.com |

## Internal Revanue Service

P.O. Box 250:

Cincinnati, OH 45201

## date: MAY I 52007

WILDER PARK ASSOCIATION INC 120 W FAIRMONT AVE
LOUISVILE KY 40214-1728

Person to Contact:
Mr. R, Molloy
ID\# 31-04023
Toll Free Telephone Number:
877-829-5500
Enoloser ldentincation Number"

Dear Sir or Madam:
This is in response to your request of Febnuary 27, 2007, regarding your tax-exempt status.
Our records indicate that a determination letter was issued in January 1978 that recogrized you as exempt from Federal income tex. Our records firther indicate that you are currently exempt under section 501(c)(3) of the Internal Revenue Code.
Our records also indicate you arb not a private foundation within tha meaning of section $509(\mathrm{t})$ of the Code because you are described in sections $509(a)(1)$ and $170(b)(1)(A)\left({ }^{\prime}\right)$.
Donors may deduct contributions to you as provided in section 170 of the Code. Eequests, legaclas, devtses, transfers, or gitts to you or for your use are doductible for federal estate and gitt tax puposes if froy meet the applicable provisions of sections 2055; 2106, and 2522 of the Code.
If you have aryy questions, ploase call us tat the telephone number shown in the heading of this letter.
Sincerely,


TOTAL P. 83

## Wilder Park Neighborhood Association Revenue and Expense Budget for FY19 <br> 7/1/2018-6/30/2019

Income
Rental of Center
Donations
Metro Grants
Memberships
Other
Total

Expense
Building Renovation
Building Maintenance
Chill fest
Corn Roast
Easter egg hunt
Ice Cream Social
Exterminator
Newsletter
Misc
Insurance
Gas \& Electric
Water
Total

Budget
3,000.00
1,500.00
2,250.00
200.00
50.00
$7,000.00$

| Budget |
| ---: |
| 0.00 |
| 100.00 |
| 625.00 |
| 200.00 |
| 150.00 |
| 150.00 |
| 150.00 |
| $1,125.00$ |
| 100.00 |
| $1,700.00$ |
| $2,000.00$ |
| 700.00 |
| $7,000.00$ |

100.00
625.00
200.00
150.00
150.00
150.00

1,125.00
100.00

1,700.00
2,000.00
$7,000.00$

# Wilder Park Income Statement 7/1/2018-7/31/2018 

Income

| Rentals \& Deposits | 75.00 |
| :--- | ---: |
| Memberships | 100.00 |

Interest
Subtotal Income $\quad 175.00$
Expense
LG\&E
187.88

Water Company
123.20

Robin Miller - Supplies
138.55

Bounce N Round
99.00

SuperTech - carpet cleaning
79.50
628.13

Net for monthly activities
$-453.13$

| Assets | Prior Month | Change | Current |
| :--- | ---: | ---: | ---: |
| Building Fund | $4,139.42$ | $-2,000.00$ | $2,139.42$ |
| Checking Account | $1,079.26$ | $1,546.87$ | $2,626.13$ |
| Savings Account | 686.38 |  | 686.38 |
| Total assets | $5,905.06$ | -453.13 | $5,451.93$ |

A For the 2017 Calendar year, or tax year beginning 2017-01-01 and ending 2017-12-31

B Check if available
Terminated for Busingess
Croes recelpts are normaly $\$ 50,000$ or leas

## E Websife:

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization Is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Dooks or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules goveming the confldentiality of the Form 990 -N is covered in code section $\mathbf{6 1 0 4}$.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times is 15 minutes.

Hote: Thit image it provided for your records only. Do Not matil this page to the IRS. The IRS witi not accept this filing via paper. You mutt fite your Form 980 -N (e-Poatcardi) electronically.

Multi-page document. Select page: 1234567

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Multi-page document. Select page: $1 \geqslant 3 \$ 567$

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## Axticle I. Meme

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## Brthele II. Duythen

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## Ixticle III. Yurposen

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## Article IV. non-profit/Tar-3nampt Btatuq





 and diatributions in turthernnct of the purpopen met torth in incticle III hereof. Wo mbstantial part of the netivitiof of willer

 poctiation Inc. whil pot pertederpate ing of intexven in fin-



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Artic) b
Page 3 Of 5 Pagea
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## AELIcic VItI. Anendmant.

2the Articlen of Theorporation of Milder Paris Asmociation, Inc.. may bananouk by elther wititen conaent of a majority of itit Memm merss or by a vote of a majority of thowe momber: who are proment ond woting at a meeting duly culled upon notice for the spacific


Article IX. Liabilities
Hembere of Hilder Park Apsociation, Inc., Bluall not be pormonaliy liable for amy Gebt or othex itnancial obingation solely


Article X. Powtrs of Boazd of Directors
 nary to effectuate the puypores of Wilder Park hasociaticn, Inc.
 at anly ly the righte and tomers vatten in the Mombere by these Articlot, and the lawt of the gtate of kenturky -anc the limita-


## Artlele XI. Initial Board of Directors/Bxecutive Comaittet

The initiat Hoard of Dicectors bhali to wleven in mamire, ond of whix blanil be the Chairman, to otit:

Jostoh M- Castlen. IIX
Chairman
131 Wat Collini Couzt
zouseviske. Ky - 40214
Gernidine clatary


John CxHmford
3102 Grinnt Avennue
Eominyinia, KY: 40214

Alenael M. Dempery
It\&3 south Third iftremt.
Loushoilize. Ky, H02L4
Jomp Douglas Rayburs
332 What Garrett street

Tedid.t teyturn
132 West Gerrett stretet

The initial Executive Compittee mhal consist of president,


2eqdie Reyburn
Exatident
John D. 央ayburn


in 3 Wett Gerrett street
Lovigville. Ky. 40214
A. B. Noman

4213 gouth Firgt struet
Louifville: Ky = 40214
Lepe Stevans
3221 Grint invenue
Loul tvizle. KY . $\$ 0214$

4212 Bouth Brook Etreet
Loutivilte. Ky . 40214
Verient D, Bydrox
-4306 Bouth Flyet gtredt
Lowispiller ry. 40234
i Verlene Dr By世nor Eecrettiry
A. A. Roman



## Article XII. Dy-Iave



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Article XIEI. Díscolution
Upon the diseolotion of wilder Park Ampociption, Tnc. the Boprd of Directore oheil. 急iter paying or making provinion tor tha
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The registered offlce of Wilder Perk Artoplation. Inc.. in the

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Article xty. Incorporiftor:
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 1977.



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## COURTY OF FEFTETEOM

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A Check appropriafe box for federal tax classification of the person whose name is entered on line 1. Check onfy one of the following seven boxes.Indifildual/sole proprietor orC CorporationSCorporationPartnershlpTrust/estate singlo-menber LLCLimited liability company. Enter the tax classification ( $\mathrm{C}=\mathrm{C}$ corporation, $\mathrm{S}=\mathrm{S}$ corporation, $\mathrm{P}=\mathrm{Pa}$ artnershlp)
Noter Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC ls classffied as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is nof dilisregarded from the owner tor U.S. feceral tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should chack the appropriate box for the tax classification of tos owner.

* Other (see Instructions)

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

Exempt payee code (fif ary)

Exemption from FATCA reporting code (fif any)

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

Requester's name and address (optional)


7 List accolint number(s) here (optional)

## Part I Taxpayer Identification Number (TIN)

Enter your TN 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 identiflcation number (EIN). If you do not have a number, see How to get a $7 N$, 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 guldelines on whose number to enter.


## 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 waliting 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 notifled 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.

Cortifleation 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 certfication, but you must provide your correct TIN. See the instructions for Part II, later.

| Sign <br> Here | Stgnature of U.S. person | $f_{x}^{\prime}$ | $3,7180 n 20$ |
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## General Instructions

Section references are to the Intemal Revenue Code unjess otherwise noted.
Future developments. For the ratest 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 individuai 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 ident|fication number (ATiN), or employer identification number ( $E \| \mathbb{N}$ ), to report on an information return the amount paid to you, or other amount reportable on an infomation return. Examples of information retums include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

Date:

- 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 mitual 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 (tultion)
- 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 7 N .
If you do not retum Fom W-9 to the requester with a 7 N, you might be subject to backup withholding. See What is backup withholding, later.

August 9th, 2018
Councilwoman Marianne Butler
15th District, Metro Council
City Hall
601 West Jefferson Street
Louisville, KY 40202

Dear Councilwoman Butler:
Enclosed please find an NDF grant application for the Wilder Park Association. This application requests funds to cover the newsletter expense and four community events for the period August 1, 2018 through June 30, 2019.

Thank you for considering this request. Please let me know if there is any further information that you need regarding this. I can be reached at

Sincerely,


Sean McNamara, Treasurer
Wilder Park Association


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Registered Agent name／address

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 Documents filed with the Office of the Secretary of State on September 15， 2004 or thereafter are available as scanned images or PDF
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