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

Applicant/Program: OUDLOMISVILE NEIGHBORNOOD COUNCIL HOUDAY HOM Applicant Requested Amount: \$1,000 Appropriation Request Amount: \$1,000
Executive Summary of Request Primary Endraising event for old Lou Neighborhood Council that Show cases old Louisville Common one Viltoman mansions & Townhomes. Funds will be used top printed material to publicite the event.
Is this program/project a fundraiser? Is this applicant a faith based organization? Does this application include funding for sub-grantee(s)? Yes No 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.
District # Primary Sponsor Signature Amount Date
Primary Sponsor Disclosure List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.
Approved by:
Appropriations Committee Chairman Date Final Appropriations Amount:

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

		SECTION 1 - APPLIC	ANTINFORMATION		
Legal Name of Applic	ant Orgar	nization:	le Neighborhood Co	upoil	
(as listed on: http://www.s		usiness/records			
		ddress: 1340 S.4th Stre	et, Louisville, KY 40	208	
Website: oldlouisville	e.org				
Applicant Contact:	Shawn	Fields Williams	Title:	Executive Director	
Phone:	502-33	8-2893	Email:	shawn.williams@oldlouisville.or	
Financial Contact:	Michae	l Meador	Title:	Treasurer	
Phone:	917-92	9-9609	Email:	michaelsmeador@gmail.com	
Organization's Repres	entative	who attended NDF Traini	ng: Shawn	Williams	
GEOG	RAPHICA	L AREA(S) WHERE PROGR		WILL BE) PROVIDED	
Program Facility Loca	tion(s):	1340 S.4th Street, Lou	isville KY 40208		
Council District(s):		6th District	Zip Code(s):	40203, 40208	
		ON 2-PROGRAM REQUE	the same of the sa	RMATION	
	NAME: O	d Louisville Holiday Ho	ne Tour		
Total Request: (\$)	1000	Total Metro Av	ard (this program) in	previous year: (\$) 1000	
Purpose of Request (c					
		erally cannot exceed 33%			
Programmin	g/service:	s/events for direct benefit	to community or qua	lified individuals	
Capital Proje	ct of the	organization (equipment,	furnishing, building, e	tc)	
The Following are Req	uired Att	achments:	<u> </u>		
IRS Exempt Status Det	erminatio	n Letter	Signed lease if rent o	osts are being requested	
Current year projected	d budget		IRS Form W9		
Current financial state	ment		Evaluation forms if u	valuation forms if used in the proposed program	
Most recent IRS Form	990 or 112	:0-Н	Annual audit (if required by organization)		
Articles of Incorporati	on (curren	t & signed)	Faith Based Organization Certification Form, if applicable		
Cost estimates from p capital expense	roposed ve	endor if request is for		•	
Government for this or	any othe	r program or expense, inc	luding funds received	eived from Louisville Metro through Metro Federal Grants, ent Funds). Attach additional	
Source:			Amount: (\$)		
Source:		·	Amount: (\$)	. ,	
Source:	··· <u>-</u>		Amount: (\$)		
		BBB Charity Review for pa	rticipation? Yes	■ No	

SECTION 3 – AGENCY DETAILS
Describe Agency's Vision, Mission and Services: Old Louisville Neighborhood Council Vision Statement Historic Old Louisville seeks to be a vibrant and diverse community that welcomes all who call this place home or visit us to enjoy our rich architectural and arts heritage.
Mission Statement To advocate, promote, and protect Old Louisville's historic architecture and streetscapes within a diverse neighborhood of residents and businesses while advancing artistic and cultural events to build community.
Goals To be the official voice of Old Louisville, serving as a strong advocate for a safe, clean, healthy community where all can flourish. To preserve and protect one of the nation's oldest historic preservation districts of Victorian mansions, as well as its distinctive 19th and early 20th century homes and landscapes. To encourage heritage tourism for enrichment and educational purposes. To promote artistic and educational events within this culturally diverse neighborhood, thereby building community and fostering cooperation. To promote neighborhood revitalization and business development.

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Brent Logsdon, Chairman	December 31, 2019
Leah Stewart, Vice Chair	December 31, 2019
Michael Meador, Treasurer	December 31, 2019
Chuck Anderson, Secretary	December 31, 2019
Darlene Metts, Belgravia Court Association	December 31, 2019
Jonathan Klunk, Central Park West Association	December 31, 2019
Kevin Carman, Garvin Gate Neighborhood Association	December 31, 2019
Stephen Peterson, Limerick Association for Neighborhood Advancement	December 31, 2019
Lira Johnson, Ouerbacker Court Association	December 31, 2019
Janice Theriot, St. James Court Association	December 31, 2019
Nick Kilby, Second Street Neighborhood Association	December 31, 2019
Bruce Cohen, Seventh Street Edge Association	December 31, 2019
Jim Brooks, South Fourth Street Associaton	December 31, 2019
Sharon Dills, South Third Street Association	December 31, 2019
Becky Medley, The 1300 Association	December 31, 2019
Ray Robinson, Toonerville Trolley Neighborhood Association	December 31, 2019
Brian McMahon, West St. Catherine Neighborhood Association	December 31, 2019

Describe the Board term limit policy:

The Old Louisville Neighborhood Council Board of Directors are Representatives of the 14 neighborhood associations and the elected executive committee. Board members are chosen by their neighborhood associations and then serve a two year term. The executive committee is elected by the Board of Directors and serves a two year term. Currently, the Board of Directors are serving from January 1, 2018-December 31, 2019.

Page 3 Addendum

Continuation of Board of Directors

Term End Date

43

Irene Spicer, Treyton Oak Towers Neighborhood Association

December 31, 2019

Stal

SECTION 5 - PROGRAM/PROJECT NARRATIVE A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.): The Old Louisville Holiday Home Tour is the primary fundraising event for the Old Louisville Neighborhood Council. Now entering its 42nd year, this annual event showcases the Historic Old Louisville community and the Victorian mansions and townhomes of Old Louisville. In 2018, the event will be held December 1-2, noon-6 pm. The headquarters for the Holiday Home Tour is the Historic Old Louisville Visitors Center in Central Park. Ten townhomes, mansions and a bed & breakfast inn will be open for tour. This ticketed holiday evnet is organized as an educational and enrichment tour of these historic homes. It is open to the entire Metro Louisville population and beyond. The Holiday Home Tour uses volunteers from Old Louisville who serve as docents, van drivers, van ambassadors, ticket sellers, and will call assistants, and setup and take-down volunteers for signage. The volunteers receive a ticket for the tour, thus allowing those who cannot afford a ticket an opportunity to participate in this special holiday event and tour these historic homes. Attached is a brochure from a previous year's tour. B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s): The requested funds will be used for printed material (i.e. the ticket/brochure) and for publicizing the event. The cost of printing the brochure and marketing materials will exceed the requested Metro funds.

C: If this request is a fundraiser, please detail how the proceeds will be spent:
The proceeds from this fundraiser will support the work of the Old Louisville Neighborhood Council. The OLNC serves as the primary advocate for the residents of Old Louisville. The OLNC's Property improvement Committee does tree plantings on many streets in Old Louisville, serves as a steward for Central Park and does two "cleanups" a year in the spring and the fall, addresses run-down property issues, and graffiti abatement efforts. The OLNC operates arts programming, such as Old Louisville LIVE, oringing free concerts to Central Park. We offer educational seminars on historic home restoration, arts classes, safety workshops, etc The OLNC spearheaded the Old Louisville Business Alliance and the Old Louisville Arts Council to work more collaboratively with businesses, arts organizations, universities, and nuseums on issues of common concern. A small part of the funds are also used as seed money for the narketing of the Holiday Home Tour for next year.
D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:
The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:
✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.
The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.
Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):
✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan
 identified in this application. ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.

E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served: The Old Louisville Neighborhood Council produces the Old Louisville Holiday Home Tour in part as a way to showcase this historic preservation district. One of the primary benefits of bringing 2500 attendees and many volunteers to the tour is to promote Old Louisville as a safe, beautiful place to live, work and play. Attendees of the tour are provided historical details about each home they visit. The van ambassadors also share information about the Old Louisville community with guests choosing the shuttle service. Data is collected primarily through speaking to the attendees directly about their experiences, the value of the ticket, what improvements could be made. Ticket sales are tracked through Square-Up merchant services. Over the past several years, the Holiday Home Tour sales have steadily increased by about 10 percent a year. We also track the Facebook analytics, responses to posts, and ask where people are coming from to attend the tour, which informs the FB ad spending the next year.

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

Generally, the Old Louisville Neighborhood Council is always expanding its community partnerships. The OLNC spearheaded the Old Louisville Arts Council with area arts organizations to collaborate and cross promote events. The OLAC includes: OLNC, Kentucky Shakespeare, U of L, Ky College of Art and Design, St. James Court Art Show, Garvin Gate Blues Festival, The Conrad Caldwell House Museum, The Filson Historical Society, Asia Institute Crane House, and the Louisville Free Public Library. In addition, the OLNC has spearheaded an Old Louisville Business Alliance of area businesses in Old Louisville to work more collaboratively and proactively to solve problems. The organizations participating to date include: Luckett-Farley; SOBRO district businesses; Dan Borsch restaurants Tavern, Burger Boy, Old Louisville Pizza, and Toonerville Deli; Bridgehaven; McCulloch Architects; Craig Machinery and Design; Grover Enterprises; Christian Care Communities; Hyland Insurance; Family and Children's Place; Barrister Hall Attorneys; Community Coordinated Child Care; Westerfield-Barre Co; Synergy Rehabilitation; Aztec Flooring; Old Louisville Brewery; Mary Martin Semonin Realtor; Old Louisville Fleur de Lis Bed and Breakfast; Louisville Bourbon Inn; Virtue; Gallery 133; Amici Cafe; Sabor Latino; Seafood Lady, St. James Court Art Show.

In this program specifically we work collaboratively with the Louisville Bourbon Inn to host a bourbon tasting by Heaven Hill. We work with Councilman David James in the promotion of the HHT and who personally drives a van during the tour. His support through an NDF grant helps with the marketing expenses. Ten neighbor residents and/or businesses offer their homes and inns for tour each year. The Conrad Caldwell House Museum collaborates with the OLNC in cross promotion of its Victorian Tea held during the tour.

SECTION 6-PROGRAM/PROJECT BUDGET SUMMARY

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

	Column 1	Column 2	Column (1+2)=3
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits			
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			
1: Community Events & Festivals (See Detailed List on Page 8)	1,000.00	9,000.00	10,000.00
J: Machinery & Equipment			
K: Capital Project			
L: Other Expenses (See Detailed List on Page 8)			
*TOTAL PROGRAM/PROJECT FUNDS	1,000	9,000	10,000
The of Pringings Budget	10 %	90 %	100%

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

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	9,000.00
Fees Collected from Program Participants	42,000.00
Other (please specify)	18,700.00
istai he vetur tor Columns 2 kapenses 🤲	\$69,700.00

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

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

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7	Column 1	Column 2	Column (1 + 2)=3
(circle one and use multiple sheets if necessary)	Proposed Metro Funds	Non- Metro Funds	Total Funds
Old Louisville Holiday Home Tour Funds Will be used for printing Materials Such as the Holiday Tour booklets Inckets	1,000	9,000	10,000
Total	1,000	9,000	10,000

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

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Volunteers (300@3 hours)	15,300	900*17
Volunteer Committee (2hrs each)	3400	10*2*10*17
Total Value of In-Kind	18,700	
(to match Program Budget Line Item. Volunteer Contribution & Other In Kind)		
regency Fiscal Year Start Date: January 1, 2018 Does your Agency anticipate a significant increase and get projected for next fiscal year? NO	e or decrease in your budget f	rom the current fiscal year to tl
oudget projected for next fiscal year? NO	TES [_]	

SECTION 7 - CERTIFICATIONS & ASSURANCES

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

Standard Assurances

- Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of
 expenditure is subject to Kentucky's open records law.
- Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the approval is automatically revoked and the funds will not be disbursed to our organization.
- 3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
- 4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
- 5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
- Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
- 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.
- 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. Date: August 14, 2018 **Signature of Legal Signatory:** Title: **Executive Director** Legal Signatory: (please print): Shawn Fields Williams Email: shawn,williams@oldlouisville.org **Extension:** Phone: 502-338-2893/ 635-5244

THE OLD LOUISVILLE NEIGHBORHOOD COUNCIL, INC.

General Information

Organization Number

0177929

Name

THE OLD LOUISVILLE NEIGHBORHOOD COUNCIL, INC.

Profit or Non-Profit

N - Non-profit

Company Type

KCO - Kentucky Corporation

Status Standing A - Active G - Good

State

KY

File Date

5/16/1983

Organization Date

5/16/1983

Last Annual Report

2/15/2018

Principal Office

1340 S. 4TH ST.(IN CENTRAL PARK)

LOUISVILLE, KY 40208

Registered Agent

OLD LOUISVILLE NEIGHBORHOOD COUNCIL INC.

1340 S. 4TH. ST. IN CENTRAL PARK LOUISVILLE, KY 40208

Current Officers

PresidentDeborah StewartVice PresidentBrent LogsdonSecretaryChuck AndersonTreasurerMichael Meador

Director Shawn Fields Williams

DirectorLeah StewartDirectorBecky MedleyDirectorJames Brooks

Individuals / Entities listed at time of formation

Director

RICHARD L JANES

Director

COROLYN BEALL

Director

ROSE GREENOUGH NETT

Incorporator

RICHARD L JANES

Images available online

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

<u>Annual Report</u>	2/15/2018	1 page	<u>PDF</u>
<u>Annual Report</u>	6/13/2017	1 page	<u>PDF</u>
<u>Annual Report</u>	6/28/2016	1 page	<u>PDF</u>
<u>Annual Report</u>	6/30/2015	1 page	<u>PDF</u>
<u>Amendment</u>	8/19/2014	1 page	<u>tiff</u>

PDF

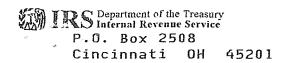
	Welcome to Fasttrack	Organization Search		
Annual Report	1/24/2014	1 page	<u>PDF</u>	
Annual Report	1/10/2013	1 page	<u>PDF</u>	
Annual Report	1/3/2012	1 page	<u>PDF</u>	
Annual Report	1/13/2011	1 page	<u>PDF</u>	
Annual Report	1/26/2010	1 page	<u>PDF</u>	
Annual Report	1/21/2009	1 page	<u>PDF</u>	
Annual Report	8/5/2008	1 page	<u>PDF</u>	
Annual Report	6/14/2007	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	6/16/2006	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	4/21/2005	1 page	<u>tiff</u>	<u>PDF</u>
Statement of Change	7/12/2004	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	6/10/2003	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/2/2002	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	11/29/2001	1 page	<u>tiff</u>	<u>PDF</u>
Statement of Change	10/1/2001	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	10/30/2000	1 page	<u>tiff</u>	<u>PDF</u>
Sixty Day Notice Return	9/1/2000	1 page	<u>tiff</u>	<u>PDF</u>
Statement of Change	8/31/1999	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	8/3/1999	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	5/14/1998	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1997	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1996	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1995	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1994	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	3/22/1993	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	3/27/1992	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1991	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1991	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1990	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1989	1 page	<u>tiff</u>	<u>PDF</u>
Articles of Incorporation	5/16/1983	7 pages	<u>tiff</u>	<u>PDF</u>

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	2/15/2018 2:46:52 PM	2/15/2018 2:46:52 PM	
Annual report	6/13/2017 11:33:07 AM	6/13/2017 11:33:07 AM	
Annual report	6/28/2016 3:54:17 PM	6/28/2016 3:54:17 PM	
Annual report	6/30/2015 11:30:17 AM	6/30/2015 11:30:17 AM	
Amendment - Change name	8/19/2014 11:15:23 AM	8/19/2014	THE OLD LOUISVILLE INFORMATION CENTER, INC.

Microfilmed Images



In reply refer to: 0248153327 Jan. 27, 2015 LTR 4168C 0 000000 00 00021940

BODC: TE

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

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030796

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

Dear Taxpayer:

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

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

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

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

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

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

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

Sincerely yours,

Doris Kenwright, Operation Mgr. Accounts Management Operations 1

Dois P. Kenwright

Subset. OLNC

Accrual Basis

9:03 AM 11/17/17

Old Louisville Neighborhood Council INC Profit & Loss Budget Overview

January through December 2018

Central Park Improvement	(Programs)	Jan - Dec 18
Tours	(Programs)	Jan - Dec 18
Old Louisville Live	(Programs)	Jan - Dec 18
	OLNC Operations	Jan - Dec 18

2,000.00 3,300.00 5,300.00 8,700.00 300.00 4,000.00 4,600.00 6,500.00 6,500.00 8,600.00 8,000.00 2,500.00 2,500.00 8,750.00 14,000.00 5,000.00 250.00 30,750.00 7,525.00 350.00 43404 · Neighborhood Assoc Contribution 43401 · Corporate/Business Contribution 43415 · Walking Tour Booklet Revenue 48251 · Food/Alcohol/Beverage Sales 43400 · Direct Public Support - Other 43403 · Individual Contributions Total 46400 · Other Types of Income 48253 · Vendor Revenue Share Total 43400 · Direct Public Support 43406 · Star Sponsorships 47502 · Ticket Sales - Door 46400 · Other Types of Income 46415 · Membership Dues 43400 · Direct Public Support 48250 · Concessions Income 47501 · Pre-Sale Tickets 47505 · VIP Ticket Sales 48252 · Vendor Sit Fee Total 44000 · Grant Income Total 47500 · Ticket Sales 44102 · Cultural Pass 44001 · NDF Grants 44101 · EAF Grants 46000 · Rental Income 44000 · Grant Income 47122 · Ad Sales 47500 · Ticket Sales Ordinary Income/Expense

9:03 AM 11/17/17 Accrual Basis

i		Old Louisville Live	Tours	Central Park Improvement
	OLNC Operations	(Programs)	(Programs)	(Programs)
	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
48250 · Concessions Income - Other		6,500.00		
Total 48250 · Concessions Income		6,750.00		
Total Income	7,875.00	42,500.00	24,100.00	5,300.00
Cost of Goods Sold				
65217 · Food/Alcohol/Bev. Costs-Program		2,650.00		
65117 · Food/Alcohol/Bev. Costs-Events				
Total COGS		2,650.00		
Gross Profit	7,875.00	39,850.00	24,100.00	5,300.00
Expense				
65000 · Operations				
66001 · Payroll Expenses				
62110 · Payroll Accounting Fees	00.09			
66010 · Admin Payroll Expenses	11,000.00			
67000 · Payroll Tax Expense	1,650.00			
Total 66001 · Payroll Expenses	12,710.00			
62100 · Contract Services				
62130 · Commissions	8,000.00			
62135 · ExDirector Contract	10,500.00			
62160 · Outside Contract/Labor Services	2,000.00			
Total 62100 · Contract Services	20,500.00			
65200 · Insurance Expenses				
65224 · Liability on Premises	1,500.00			
65220 · Insurance - Liability, D and O	950.00			
Total 65200 · Insurance Expenses	2,450.00			
65300 · Marketing				
65400 · Web Design and Maintenance	2,300.00			
Total 65300 · Marketing	2,300.00			
65010 · Books, Subscriptions, Reference	350.00			
65011 · Cleaning & Maintenance	720.00			
65019 · Membership Dues	525.00			
65030 · Printing and Copying	360.00			

Old Louisville Neighborhood Council INC Profit & Loss Budget Overview January through December 2018 Old Louisville Live

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		Old Louisville Live	Tours	Central Park Improvement
	OLNC Operations	(Programs)	(Programs)	(Programs)
	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
50000 · Support of Other Organization				
65032 · Professional Fees				
65032.2 · Accounting Fees	1,620.00			
Total 65032 · Professional Fees	1,620.00			
65035 · Refreshments				
65040 · Office Supplies	720.00			
65060 · Telephone, Telecommunications	1,454.00			
65090 · Utilities				
Total 65000 · Operations	43,709.00			
60000 · Program Expenses				
64002 · Ex Director Contract- Program				
63000 · Payroll Expense -Program			3,000.00	
63001 · Payroll Tax Expense- Program			400.00	
64001 · Payroll Accounting Fees-Program				
64000 · Accounting Fees- Program				
62105 · Security- Program		980.00		280.00
62000 · Insurance- Program		1,400.00		
62103 · Artist/Talent/Performer Fees-P		20,350.00		
61400 · Refreshments- Program				200.00
61901 · Permit Fees- Program		1,957.00		
61800 · Tools,Materials,&Equipment- P				
61803 · Equipment Maintenance- Program				750.00
61801 · Equipment and Vehicle Rental	!	300.00	!	2,000.00
Total 61800 · Tools, Materials, & Equipment-P		300.00		2,750.00
61900 · Marketing- Program				
61900.1 · Print		1,000.00		
61900.4 · PR/Promotion Services		400.00		
61900.5 · Graphic Design		1,500.00	300.00	
61900.6 · Print Media		1,000.00	4,336.00	
61900.7 · Online/Web Related		240.00	00.009	
61900.9 · Other Marketing				

Accrual Basis 9:03 AM 11/17/17

Old Louisville Neighborhood Council INC Profit & Loss Budget Overview

January through December 2018

Central Park Improvement Jan - Dec 18 (Programs) (Programs) Tours Old Louisville Live (Programs) **OLNC Operations** Jan - Dec 18

Jan - Dec 18 Jan - Dec 18

3,530.00	8,636.00	29,127.00
	5,236.00	4,140.00

70400 · Postage & Mail Processing-Event 74001 · Payroll Accounting Fees-Events 70600 · Artist/Talent/Performer Fees- E 75000 · Ex Director Contract- Events 65101 · PR/Promotion Services 71000 · Contract Services- Events 71200 · Equipment Rental- Events Total 61900 · Marketing- Program 74000 · Accounting Fees- Events 65104 · Online/Web Related Total 60000 · Program Expenses 70800 · Permit Fees- Events 65102 · Graphic Design 65100 · Marketing- Events 70900 · Insurance- Events 70700 · Supplies- Events 71100 · Security- Events 65103 · Print Media 65100.6 · Radio 70000 · Event Expenses

1,770.00	15,464.00	10,723.00	-35,834.00
1,770.00	15,464.00	10,723.00	-35,834.00
3,530.00	8,636.00	29,127.00	43,709.00

Total 65100 · Marketing- Events 70000 · Event Expenses - Other

Total 70000 · Event Expenses

Total Expense

Net Ordinary Income

Old Louisville Neighborhood Council INC Profit & Loss Budget Overview January through December 2018

9:03 AM 11/17/17 Accrual Basis

Old Louisville Neighborhood Council 2018 Budget

	Total Community Garden	Q	Description of the second		:
	(Programs)	olgoria (Programa)	Total Description	Spring HI	Old Lou Brew
	(Singlema)	(Flograms)	lotal Programs	(Events)	(Events)
Ordinary Income/Expense	Jail - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
Income					
43400 · Direct Public Support					
43401 · Corporate/Business Contribution			8.750.00		
43403 · Individual Contributions			2.000.00	1 000 00	
43404 · Neighborhood Assoc Contribution			17 300 00		
43406 · Star Sponsorships					
43400 · Direct Public Support - Other			8,000.00		
Total 43400 · Direct Public Support		•	36.050.00	2 000 00	
44000 · Grant Income				Î	
44001 · NDF Grants			6.500.00		
44101 · EAF Grants			2 500 00		
44102 · Cultural Pass			4.600.00		
Total 44000 · Grant Income			13 600 00		
46000 · Rental Income	575.00		00'525'5		
46400 · Other Types of Income					
43415 · Walking Tour Booklet Revenue			300.00		
46415 · Membership Dues					
47122 · Ad Sales			8.700.00		
Total 46400 · Other Types of Income			00.000.6		
47500 · Ticket Sales					
47501 · Pre-Sale Tickets				00 000 6	1 200 00
47502 · Ticket Sales - Door			6 500 00	7 000 00	8,000,00
47505 · VIP Ticket Sales					00 000 6
Total 47500 · Ticket Sales			6 500 00	00 000 6	44 300 00
48250 · Concessions Income				5	00.005,11
48251 · Food/Alcohol/Beverage Sales				1 000 00	
48252 · Vendor Sit Fee				50.000	4
48253 · Vendor Revenue Share			250.00		1,300.00
			20.00		00.000,1

Old Louisville Neighborhood Council INC Profit & Loss Budget Overview

Accrual Basis 9:03 AM 11/17/17

January through December 2018

	Total Community Garden	Progra	Programs - Other	Spring HT	Old Lou Brew
	(Programs)	(Programs)	(Programs) Total Programs	(Events)	(Events)
	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18 Jan - Dec 18
48250 · Concessions Income - Other			6,500.00		
Total 48250 · Concessions Income			6,750.00	1,000.00	2,500.00
Total Income	575.00		72,475.00	12,000.00	13,700.00
Cost of Goods Sold					
65217 · Food/Alcohol/Bev. Costs-Program			2,650.00		
65117 · Food/Alcohol/Bev. Costs-Events					
Total COGS			2,650.00		
oss Profit	575.00		69,825.00	12,000.00	13,700.00
Expense					

62160 · Outside Contract/Labor Services

Total 62100 · Contract Services

65200 · Insurance Expenses

62135 · ExDirector Contract

62130 · Commissions 62100 · Contract Services

62110 · Payroll Accounting Fees 66010 · Admin Payroll Expenses

66001 · Payroll Expenses

65000 · Operations

Expense **Gross Profit**

67000 · Payroll Tax Expense

Total 66001 · Payroll Expenses

65400 · Web Design and Maintenance

65010 · Books, Subscriptions, Reference

Total 65300 · Marketing

65011 · Cleaning & Maintenance

65030 · Printing and Copying

65019 · Membership Dues

65220 · Insurance - Liability, D and O

65224 · Liability on Premises

Total 65200 · Insurance Expenses

65300 · Marketing

Old Louisville Neighborhood Council INC Profit & Loss Budget Overview January through December 2018

9:03 AM 11/17/17 Ąccrual Basis

	Total Community Garden	Progra	Programs - Other	Spring HT	Old Lou Brew
	(Programs)	(Programs)	Total Programs	(Events)	(Events)
	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18	Jan - Dec 18
50000 · Support of Other Organization				4,975.00	
65032 · Professional Fees					
65032.2 · Accounting Fees					
Total 65032 · Professional Fees					
65035 · Refreshments					
65040 · Office Supplies					
65060 · Telephone, Telecommunications					
65090 · Utilities	180.00		180.00		
Total 65000 · Operations	180.00		180.00	4,975.00	
60000 · Program Expenses					
64002 · Ex Director Contract- Program		17,500.00	17,500.00		
63000 · Payroll Expense -Program			3,000.00		
63001 · Payroll Tax Expense- Program			400.00		
64001 · Payroll Accounting Fees-Program		1,000.00	1,000.00		
64000 · Accounting Fees- Program		2,700.00	2,700.00		
62105 · Security- Program			1,260.00		
62000 · Insurance- Program	120.00		1,520.00		
62103 · Artist/Talent/Performer Fees-P			20,350.00		
61400 · Refreshments- Program			500.00		
61901 · Permit Fees- Program			1,957.00		
61800 · Tools,Materials,&Equipment- P					
61803 · Equipment Maintenance- Program			750.00		
61801 · Equipment and Vehicle Rental			2,300.00		
Total 61800 · Tools, Materials, & Equipment-P		•	3,050.00		
61900 · Marketing- Program					
61900.1 · Print			1,000.00	400.00	
61900.4 · PR/Promotion Services			400.00	300.00	
61900.5 · Graphic Design			1,800.00	500.00	
61900.6 · Print Media			5,336.00	400.00	
61900.7 · Online/Web Related			840.00	300.00	
61900.9 · Other Marketing				150.00	

Old Louisville Neighborhood Council INC Profit & Loss Budget Overview

Accrual Basis

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Jan - Dec 18 Spring HT (Events) (Programs) Total Programs Jan - Dec 18 Programs - Other Jan - Dec 18 Total Community Garden Jan - Dec 18 (Programs)

Old Lou Brew

Jan - Dec 18 (Events)

> 2,050.00 2,050.00

> > 21,200.00

120.00

9,376.00 62,613.00

70400 · Postage & Mail Processing-Event 74001 · Payroll Accounting Fees-Events 70600 · Artist/Talent/Performer Fees- E 75000 · Ex Director Contract- Events 65101 · PR/Promotion Services 71200 · Equipment Rental- Events 71000 · Contract Services- Events Total 61900 · Marketing- Program 74000 · Accounting Fees- Events 65104 · Online/Web Related Total 65100 · Marketing- Events 70000 · Event Expenses - Other Total 60000 · Program Expenses 70800 · Permit Fees- Events 65102 · Graphic Design 65100 · Marketing- Events 70900 · Insurance- Events 70700 · Supplies- Events 71100 · Security- Events 65103 · Print Media 65100.6 · Radio 70000 · Event Expenses

280.00 476.00 1,200.00 300.00 500.00 1,211.00 300.00

2,000.00

Total 70000 · Event Expenses

Total Expense

Net Income

come	
rdinary Inc	
Net O	

7,433.00	4,975.00	7,032.00	-21,200.00	275.00
7,433.00	4,975.00	7,032.00	275.00 -21,200.00	275.00
6,267.00	7,025.00	62,793.00	21,200.00	300.00
6,267.00				
4,311.00				

Old Louisville Neighborhood Council INC Profit & Loss Budget Overview January through December 2018

9:03 AM 11/17/17 Accrual Basis

	(Evente)	į	į	Total Property	TOTAL
	(mina)	(Events)	(Events)	lotal Events	CIAL
	Jan - Dec 18	Jan - Dec 18			
Ordinary Income/Expense					
Income					
43400 · Direct Public Support					
43401 · Corporate/Business Contribution	1,000.00			1,000.00	9,750.00
43403 · Individual Contributions	3,500.00			4,500.00	6,500.00
43404 · Neighborhood Assoc Contribution	2,750.00			3,250.00	28,075.00
43406 · Star Sponsorships	2,000.00			2,500.00	2,500.00
43400 · Direct Public Support - Other	2,750.00			2,750.00	10,750.00
Total 43400 · Direct Public Support	12,000.00			14,000.00	57,575.00
44000 · Grant Income					
44001 · NDF Grants					6,500.00
44101 · EAF Grants					2,500.00
44102 · Cultural Pass					4,600.00
Total 44000 · Grant Income					13,600.00
46000 · Rental Income					575.00
46400 · Other Types of Income					
43415 · Walking Tour Booklet Revenue					300.00
46415 · Membership Dues					350.00
47122 · Ad Sales					8,700.00
Total 46400 · Other Types of Income				•	9,350.00
47500 · Ticket Sales					
47501 · Pre-Sale Tickets	33,750.00			36,950.00	36,950.00
47502 · Ticket Sales - Door	11,250.00			26,250.00	32,750.00
47505 · VIP Ticket Sales		7,500.00		9,500.00	9,500.00
Total 47500 · Ticket Sales	45,000.00	7,500.00	•	72,700.00	79,200.00
48250 · Concessions Income					
48251 · Food/Alcohol/Beverage Sales		00.009		1,600.00	1,600.00
48252 · Vendor Sit Fee				1,500.00	1,500.00
48253 · Vendor Revenue Share				1,000.00	1,250.00

Old Louisville Neighborhood Council INC Profit & Loss Budget Overview

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January through December 2018 HT HIT VIP Event

Events		(Events) (Events) Jan - Dec 18 Jan - Dec 18 600.00 8,100.00 1,425.00 6,675.00	Total Events Jan - Dec 18 1,500.00 5,600.00 92,300.00 1,425.00 90,875.00	TOTAL Jan - Dec 18 8,000.00 12,350.00 172,650.00 1,425.00 4,075.00 168,575.00 11,000.00 1,650.00
48250 · Concessions Income - Other Jan - Dec 18 48250 · Concessions Income - Other 1,500.00 50 code 58,500.00 6210 code 58,500.00 <th></th> <th></th> <th>Jan - Dec 18 1,500.00 5,600.00 92,300.00 1,425.00 90,875.00</th> <th>Jan - Dec 18 8,000.00 12,350.00 172,650.00 1,425.00 4,075.00 168,575.00 11,000.00 11,650.00</th>			Jan - Dec 18 1,500.00 5,600.00 92,300.00 1,425.00 90,875.00	Jan - Dec 18 8,000.00 12,350.00 172,650.00 1,425.00 4,075.00 168,575.00 11,000.00 11,650.00
48250 · Concessions Income - Other 148250 · Concessions Income 2006 Goods Sold 17 · Food/Alcohol/Bev. Costs-Program 17 · Food/Alcohol/Bev. Costs-Events 66001 · Payroll Expenses 66010 · Admin Payroll Expenses 66010 · Payroll Expenses 67000 · Payroll Tax Expense 67000 · Payroll Expenses 62110 · Contract Services 62130 · Commissions 62130 · Contract Services 62130 · Contract Services 6220 · Insurance Expenses 65220 · Insurance Expenses 65220 · Insurance Expenses 65200 · Insurance Expenses 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing	1,500.00 1,500.00 58,500.00	600.00 8,100.00 1,425.00 6,675.00	1,500.00 5,600.00 92,300.00 1,425.00 90,875.00	8,000.00 12,350.00 172,650.00 1,425.00 4,075.00 11,000.00 1,650.00
Sonde Sold 17 · Food/Alcohol/Bev. Costs-Program 17 · Food/Alcohol/Bev. Costs-Program 17 · Food/Alcohol/Bev. Costs-Program 17 · Food/Alcohol/Bev. Costs-Events Sold Sold O · Operations 66001 · Payroll Expenses 66010 · Admin Payroll Expenses 66010 · Payroll Expenses 66010 · Payroll Expenses 62110 · Payroll Expenses 62110 · Payroll Expenses 62110 · Contract Services 62130 · Commissions 62135 · ExDirector Contract 62135 · ExDirector Contract 62160 · Outside Contract/Labor Services 6220 · Insurance Expenses 65220 · Insurance Expenses 65220 · Insurance Expenses 65200 · Marketing 65400 · Web Design and Maintenance	58,500.00	600.00 8,100.00 1,425.00 6,675.00	5,600.00 92,300.00 1,425.00 90,875.00	12,350.00 172,650.00 1,425.00 4,075.00 168,575.00 11,000.00 1,650.00
Goods Sold 17 · Food/Alcohol/Bev. Costs-Program 17 · Food/Alcohol/Bev. Costs-Program 17 · Food/Alcohol/Bev. Costs-Events 18 · Food/Alcohol/Bev. Costs-Events 19 · Food/Alcohol/Bev. Costs-Events 10 · Operations 10 · Operations 11 · Food/Alcohol/Bev. Costs-Events 12 · Food/Alcohol/Bev. Costs-Events 13 · Food/Alcohol/Bev. Costs-Events 14 · Food/Alcohol/Bev. Costs-Events 15 · Food/Alcohol/Bev. Costs-Events 16 · Contract Services 16 · Contract Services 17 · Food/Alcohol/Bev. Contract 18 · Contract Services 19 · Contract Services 19 · Contract Services 10 · Contra	58,500.00	8,100.00 1,425.00 1,425.00 6,675.00	92,300.00 1,425.00 90,875.00	2,650.00 2,650.00 1,425.00 4,075.00 168,575.00 11,000.00 1,650.00
Goods Sold 17 · Food/Alcohol/Bev. Costs-Program 17 · Food/Alcohol/Bev. Costs-Program 17 · Food/Alcohol/Bev. Costs-Events 18 · Food/Alcohol/Bev. Costs-Events 19 · Operations 66001 · Payroll Expenses 66010 · Payroll Expenses 66010 · Payroll Expenses 67000 · Payroll Expenses 62100 · Contract Services 62130 · Commissions 62135 · ExDirector Contract 62136 · Contract Services 62136 · Contract Services 6220 · Insurance Expenses 65224 · Liability on Premises 65220 · Insurance Expenses 65220 · Insurance Expenses 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance	58,500.00	1,425.00 1,425.00 6,675.00	1,425.00 1,425.00 90,875.00	2,650.00 1,425.00 4,075.00 168,575.00 60.00 11,000.00
17 · Food/Alcohol/Bev. Costs-Program 17 · Food/Alcohol/Bev. Costs-Program 17 · Food/Alcohol/Bev. Costs-Events 0GS 6001 · Payroll Expenses 62110 · Payroll Expenses 66010 · Admin Payroll Expenses 66010 · Payroll Expenses 62130 · Commissions 62135 · ExDirector Contract 62135 · ExDirector Contract 62200 · Insurance Expenses 65220 · Insurance Expenses 65220 · Insurance Expenses 65200 · Marketing 65400 · Web Design and Maintenance	58,500.00	1,425.00 1,425.00 6,675.00	1,425.00 1,425.00 90,875.00	2,650.00 1,425.00 4,075.00 168,575.00 60.00 11,650.00
17 · Food/Alcohol/Bev. Costs-Events 9GS 60 · Operations 66001 · Payroll Expenses 62110 · Payroll Expenses 66010 · Admin Payroll Expenses 66010 · Payroll Expenses 67000 · Payroll Expenses 62130 · Commissions 62135 · ExDirector Contract 62160 · Outside Contract/Labor Services 7otal 62100 · Contract Services 65200 · Insurance Expenses 65220 · Insurance Expenses 65200 · Marketing 65400 · Web Design and Maintenance	58,500.00	1,425.00 1,425.00 6,675.00	1,425.00 90,875.00	1,425.00 4,075.00 168,575.00 60.00 11,000.00
66001 · Payroll Expenses 66010 · Admin Payroll Expenses 66010 · Admin Payroll Expenses 66010 · Payroll Expenses 66010 · Payroll Expenses 67000 · Payroll Tax Expense 62100 · Contract Services 62130 · Commissions 62135 · ExDirector Contract 62140 · Contract Services 62140 · Contract Services 62200 · Insurance Expenses 65220 · Insurance Expenses 65220 · Insurance Expenses 65200 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing	58,500.00	1,425.00 6,675.00	1,425.00	4,075.00 168,575.00 60.00 11,000.00 1,650.00
66001 · Payroll Expenses 66010 · Admin Payroll Expenses 66010 · Admin Payroll Expenses 67000 · Payroll Expenses 67000 · Payroll Expenses 62130 · Commissions 62130 · Commissions 62135 · ExDirector Contract 62160 · Outside Contract/Labor Services 62200 · Insurance Expenses 65220 · Insurance - Liability, D and O Total 65200 · Insurance Expenses 65220 · Insurance Expenses 65200 · Insurance Expenses 65200 · Insurance Expenses 65200 · Insurance Expenses 65200 · Marketing 65400 · Web Design and Maintenance	58,500.00	6,675.00	90,875.00	168,575.00 60.00 11,000.00 1,650.00
6600 6600 70ta 6520 6520 6530			•	60.00 11,000.00 1,650.00
66000 · Operations 66001 · Payroll Expenses 62110 · Payroll Accounting Fees 66010 · Admin Payroll Expenses 67000 · Payroll Tax Expense Total 66001 · Payroll Expenses 62130 · Commissions 62135 · ExDirector Contract 62135 · ExDirector Contract 62160 · Outside Contract/Labor Services 70tal 62100 · Contract Services 65200 · Insurance Expenses 65224 · Liability on Premises 65220 · Insurance Expenses 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing			ı	60.00 11,000.00 1,650.00
66001 · Payroll Expenses 62110 · Payroll Accounting Fees 66010 · Admin Payroll Expenses 67000 · Payroll Tax Expense Total 66001 · Payroll Expenses 62130 · Commissions 62135 · ExDirector Contract 62136 · Outside Contract/Labor Services Total 62100 · Contract Services 65200 · Insurance Expenses 65220 · Insurance - Liability, D and O Total 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing			ı	60.00 11,000.00 1,650.00
62110 · Payroll Accounting Fees 66010 · Admin Payroll Expenses 67000 · Payroll Tax Expense Total 66001 · Payroll Expenses 62100 · Contract Services 62130 · Commissions 62135 · ExDirector Contract 62160 · Outside Contract/Labor Services Total 62100 · Contract Services 65200 · Insurance Expenses 65220 · Insurance Expenses 65220 · Insurance Expenses 65200 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing			ı	60.00 11,000.00 1,650.00
66010 · Admin Payroll Expenses 67000 · Payroll Tax Expense Total 66001 · Payroll Expenses 62100 · Contract Services 62130 · Commissions 62135 · ExDirector Contract 62160 · Outside Contract/Labor Services Total 62100 · Contract Services 65200 · Insurance Expenses 65224 · Liability on Premises 65220 · Insurance Expenses 65200 · Insurance Expenses 65200 · Insurance Expenses 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing			ı	11,000.00 1,650.00
67000 · Payroll Tax Expense Total 66001 · Payroll Expenses 62100 · Contract Services 62130 · Commissions 62135 · ExDirector Contract 62160 · Outside Contract/Labor Services Total 62100 · Contract Services 65200 · Insurance Expenses 65224 · Liability on Premises 65220 · Insurance Expenses 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing			ı	1,650.00
Total 66001 · Payroll Expenses 62100 · Contract Services 62130 · Commissions 62135 · ExDirector Contract 62160 · Outside Contract/Labor Services Total 62100 · Contract Services 65200 · Insurance Expenses 65224 · Liability on Premises 65220 · Insurance - Liability, D and O Total 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing				
62100 · Contract Services 62130 · Commissions 62135 · ExDirector Contract 62160 · Outside Contract/Labor Services Total 62100 · Contract Services 65200 · Insurance Expenses 65224 · Liability on Premises 65220 · Insurance Expenses 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing				12,710.00
62130 · Commissions 62135 · ExDirector Contract 62160 · Outside Contract/Labor Services Total 62100 · Contract Services 65200 · Insurance Expenses 65224 · Liability on Premises 65220 · Insurance - Liability, D and O Total 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing				
62135 - ExDirector Contract 62160 · Outside Contract/Labor Services Total 62100 · Contract Services 65200 · Insurance Expenses 65224 · Liability on Premises 65220 · Insurance - Liability, D and O Total 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing				8,000.00
62160 · Outside Contract/Labor Services Total 62100 · Contract Services 65200 · Insurance Expenses 65224 · Liability on Premises 65220 · Insurance - Liability, D and O Total 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing				10,500.00
Total 62100 · Contract Services 65200 · Insurance Expenses 65224 · Liability on Premises 65220 · Insurance - Liability, D and O Total 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing				2,000.00
65200 · Insurance Expenses 65224 · Liability on Premises 65220 · Insurance - Liability, D and O Total 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing				20,500.00
65224 · Liability on Premises 65220 · Insurance - Liability, D and O Total 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing				
65220 · Insurance - Liability, D and O Total 65200 · Insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing				1,500.00
Total 65200 · insurance Expenses 65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing				950.00
65300 · Marketing 65400 · Web Design and Maintenance Total 65300 · Marketing				2,450.00
65400 · Web Design and Maintenance Total 65300 · Marketing				
Total 65300 · Marketing				2,300.00
				2,300.00
65010 · Books, Subscriptions, Reference				350.00
65011 · Cleaning & Maintenance				720.00
65019 · Membership Dues				525.00
65030 · Printing and Copying				360.00

Old Louisville Neighborhood Council INC Profit & Loss Budget Overview

Accrual Basis

9:03 AM 11/17/17 January through December 2018

HHT VIP Event

Total 60000 · Program Expenses

70000 · Event Expenses

Events - Other

)	
	(Events)	(Events)	(Events)	Total Events	TOTAL
	Jan - Dec 18				
Total 61900 · Marketing- Program				2,050.00	11,426.00
tal 60000 · Program Expenses			•	2,050.00	64,663.00
300 · Event Expenses					
75000 · Ex Director Contract· Events			7,000.00	7,000.00	7,000.00
74001 · Payroll Accounting Fees-Events			400.00	400.00	400.00
74000 · Accounting Fees- Events			6,480.00	6,480.00	6,480.00
71200 · Equipment Rental- Events	1,050.00	400.00		1,450.00	1,450.00
71000 · Contract Services- Events	2,000.00			2,000.00	2,000.00
71100 · Security- Events				280.00	280.00
70900 · Insurance- Events		300.00		776.00	776.00
70600 · Artist/Talent/Performer Fees- E				1,200.00	1,200.00
70400 · Postage & Mail Processing-Event	250.00			250.00	250.00
70700 · Supplies- Events	100.00			100.00	100.00
70800 · Permit Fees- Events	140.00	366.00		506.00	506.00
65100 · Marketing- Events					
65100.6 · Radio				2,000.00	2,000.00
65101 · PR/Promotion Services	1,350.00			1,650.00	1,650.00
65102 · Graphic Design				500.00	500.00
65103 · Print Media	2,350.00			3,561.00	3,561.00
65104 · Online/Web Related	2,250.00		,	2,550.00	2,550.00
Total 65100 · Marketing- Events	5,950.00			10,261.00	10,261.00
70000 · Event Expenses - Other	650.00			650.00	650.00
al 70000 · Event Expenses	10,140.00	1,066.00	13,880.00	31,353.00	31,353.00
Kpense	10,590.00	1,066.00	13,880.00	38,828.00	145,330.00
ome	47,910.00	5,609.00	-13,880.00	52,047.00	23,245.00
	47,910.00	5,609.00	-13,880.00	52,047.00	23,245.00

Total 70000 · Event Expenses

Total Expense

Net Ordinary Income

Net Income

June 2018 P&L

		June 2018 P&I	P&L		
Category	Revenue	Expenses	Net	YTD Net	Budget (FY)
Operations	\$0	\$5,953	-\$5,953	-\$25,075	-\$70,914
Old Louisville Live	\$8,300(2)	\$1,550	\$6,750	\$7,476	\$10,723
Tours	\$5,791	\$1,528	\$4,263	\$7,567	\$15,464
Property Improvement Committee	\$500	-\$3,031	\$3,531	\$3,735	\$1,770
Community Garden	\$50	\$276	-\$226	-\$328	\$275
Mansion Tour	\$500	\$0	\$500	\$15,364	\$12,958
Old Lou Brew	\$500	\$0	\$500	\$4,000	\$7,433
Holiday Home Tour	\$0	\$505	-\$505	-\$3,011	\$47,085
Total	\$15,641	\$6,781	\$8,860	\$9,728	\$24,794

Higher than normal due to three bi-weekly payrolls (occurs twice per year)
 Includes \$2.5k NDF grant, \$5k Paradise Tomato Kitchens
 Includes \$4k NDF grant for printing booklets - already incurred

May 2018 P&L

Category Revenue Expenses Operations \$2,153 \$4,507 Old Louisville Live \$1,548 \$4,398 Tours \$1,031 \$1,723 Property Improvement Committee \$0 -\$963 Community Garden \$0 \$29 Mansion Tour \$0 \$1,498 Old Lou Brew \$0 \$1,498		May 2018 P&I	8 P&L		
ions \$2,153 uisville Live \$1,548 \$1,031 ty Improvement Committee \$0 unity Garden \$0 un Tour \$0			Net	YTD Net	Budget (FY)
ty Improvement Committee \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0		•	-\$2,354	-\$19,122	-\$70,914
ty Improvement Committee \$0 \$0 an Tour \$0 \$0 \$0 an Brew		•	52,850	\$726	\$10,723
mmittee \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0			\$692	\$3,303	\$15,464
\$ \$\$	mmittee \$0		\$963	\$204	\$1,770
0\$ 	0\$		-\$29	-\$102	\$275
0\$		·	\$1,498	\$14,864	\$12,958
			\$0	\$3,500	\$7,433
	0\$		-\$83	-\$2,506	\$47,085
Total \$4,731 \$11,275		•	6,543	\$868	\$24,794

Forms 990 / 990-EZ Return Summary

For calendar year 2017, or tax year beginning

, and ending

OLD LO	UISVILLE	NEIGHBORHOOD	COUNCIL
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т.			

	59,923 63,806 1 412	124,142	-11,929
	63,806		-11,929
	63,806		-11,929
	1		-11,929
			-11,929
	412		-11,929
	412		-11,929
	412		-11,929
	412		-11,929
	412		-11,929
			-11,929
			-11,929
		136,071	-11,929
		136,071	-11,929
		136,071	-11,929
		136,071	-11,929
			-11,929
			275
Balance at End of Year			117,004
_			
.S		expenses per financial stateme	ents
		1 C F	
	Oir		**
		i otal expenses per return	
	Balance She	et	
Beginning	Ending	Differences	
<u>128,658</u>	117,	004 -11,6	554
Miscellaneous	Information		
Amended return			
Return / extended due da	te <u>11/15</u>	18	
	Beginning 139,237 10,579 128,658 Miscellaneous Amended return	Total et	Total expenses per financial statement Less: Donated services Prior year adjustments Losses Other Plus: Investment expenses Other Total expenses per return Balance Sheet Beginning Ending Differences 139,237 10,579 4,565 128,658 Differences 117,004 -11,6

Form **8879-EO**

IRS *e-file* Signature Authorization for an Exempt Organization

OMB No.	1545-1878
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Department of the Treasury Internal Revenue Service

2017

Name of exempt organization

▶ Go to www.irs.gov/Form8879EO for the latest information.

OLD LOUISVILLE NEIGHBORHOOD COUNCIL

Name and title of officer	
Ded I Tour CD (
Part I Type of Return and Return Information (Whole Dollars Only)	
Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the re	tum. If you
check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blooms line 1b, 2b, 3b, 4b, as 5b, which was a line and the amount on that line for the return being filed with this form was blooms.	ank, then
leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter applicable line below. Do not execute more than any line in B. H. I. B. H.	nter -0- on
the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here Total revenue, if any (Form 990, Part Vill, column (A) line 12)	
	1b
	2b 124,142
	3b
b rax based on investment income (Form 990-PF, Part VI, line 5)	4b
5a Form 8868 check here ▶ 🔲 b Balance Due (Form 8868, line 3c)	5b
Part II Declaration and Signature Authorization of Officer	
Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the	
organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and be	lief, they
are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the	
organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originato to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejections.	r (ERO)
the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable,	CION OF
authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry tr	n the
financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on	this
return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury	Financial
Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial involved in the presenting of the observations are settlement.	institutions
involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries	s and
resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organizelectronic return and, if applicable, the organization's consent to electronic funds withdrawal.	ation's
Officer's PIN: check one box only	
X authorize Mary Morrow & Associates to enter my PIN 3111	LO as my signature
	numbers, but
	ter all zeros
on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the re	eturn is
being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the afc ERO to enter my PIN on the return's disclosure consent screen.	rementioned
End to once my the or the returns disclosure consent screen.	
As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronicall	v filed return
If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities	as part of
the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.	,
Officer's signature ▶ Date ▶ 08/C	7/18
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.	(1010450505
terms (at my followed by your mac digit som-solicoted i file.	61213452535
	Do not enter all zeros
certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization	ion
ndicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163. Modernized e-F	ile (MeF)
nformation for Authorized IRS e-file Providers for Business Returns.	(
ERO's signature	7/18
Date Date Date	- /
ERO Must Retain This Form — See Instructions	
Do Not Submit This Form to the IRS Unless Requested To Do So	

For Paperwork Reduction Act Notice, see back of form.

Form 8879-EO (2017)

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

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

OMB No. 1545-1150 **2017**

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

A	For the	2017 calend	iar year, or tax year beginning , and ending	T		* * ***
	Check if a		C Name of organization	DE	mploy	er identification number
	Address c	1	ALL CAMPAGETTE METAUDODUOOD COMMOTT			
_	Name cha	1	OLD LOUISVILLE NEIGHBORHOOD COUNCIL Number and street for B.O. have if mail is not delivered to street address). Room/suite			
	Initial retu	1	Notifice and street (or P.C. box, if their is not delivered to shoot address)			ne number -635-5244
		m/terminated	1340 SOUTH FOURTH ST-IN CENTRAL PAR			
_	Amended	1	City or town, state or province, country, and ZIP or foreign postal code	ı	310up Vumbe	Exemption
	Application		LOUISVILLE KY 40208 Cash X Acqual Other (specify) H Che		-	the organization is not
			Casit [22] /tooldat Calci (openity)		-	h Schedule B
l	Website	е: ▶_ОшО	10045 4 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			EZ, or 990-PF).
			reck dilly dite) — 22 30 f(c)(c) 30 f(c) () / (interior ties)	111 330	<i>J</i> , 000	LLC, OF OOD (1).
K	Form of	f organization	i. 25 Corporation			
L	Add lines	s 5b, 6c, and 7	b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets		▶ \$	124,142
		nn (B) below)	ue, Expenses, and Changes in Net Assets or Fund Balances (see the instru	ictions	s for F	
P	art I	Reven	if the organization used Schedule O to respond to any question in this Part I	10010110	3 101 1	X
	т.				1	59,923
	1		gifts, grants, and similar amounts received vice revenue including government fees and contracts		2	63,806
	2	-			3	
	3		dues and assessments income	F	4	1
	4		int from sale of assets other than inventory 5a 5a			
	5a		r other basis and sales expenses 5b			
	b	Coin or /loss)	from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	C		I fundraising events	… Г		
	6		ne from gaming (attach Schedule G if greater than			
ø.	а		6a			
Revenue	b		ne from fundraising events (not including \$ of contributions		1	
eve			sing events reported on line 1) (attach Schedule G if the		1	
œ			n gross income and contributions exceeds \$15,000) 6b			
	6		expenses from gaming and fundraising events 6c			
	d	Net income	or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract			
					6d	
	7a		of inventory, less returns and allowances 7a			
	b		of goods sold 7b		1	
	C	Gross profit	or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	
	8	•	ue (describe in Schedule O)		8	412
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	124,142
	10	Grants and	similar amounts paid (list in Schedule O)	}	10	
	11		d to or for members	}	11	33,720
ın	12		her compensation, and employee benefits	····	12	33,720
JSe	13	Professiona	I fees and other payments to independent contractors	···· }	13	2,677
Expenses	14	Occupancy	rent, utilities, and maintenance	···· }	14	3,169
ũ	15		blications, postage, and shipping		15	64,137
	16		nses (describe in Schedule O)		16	136,071
	17		nses. Add lines 10 through 16		17	-11,929
,.	18		deficit) for the year (Subtract line 17 from line 9)	}	18	<u>-11,323</u>
sets	19		or fund balances at beginning of year (from line 27, column (A)) (must agree with		40	128,658
AS			figure reported on prior year's return)	}	19 20	275
Net Assets	20	Other chan	ges in net assets or fund balances (explain in Schedule O)	··· <u>·</u>	21	117,004
	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	.	41	Form 990-EZ (2017)
Fo	r Paper	work Reduc	tion Act Notice, see the separate instructions.			FORTH OUGH (2017)

DAA

	HBORHOOD (COINCTT.			Page 2
Part II Balance Sheets (see the instructions for	Part II)		****		, age as
Check if the organization used Schedule O		v guestion in this Pa	rt II		X
	io coponia to an		Beginning of year	T'''	(B) End of year
22 Cash, savings, and investments		- 6.4	73,979	22	63,320
25 Land and buildings		į.	,,,,,		03,320
24 Other assets (describe in Schedule O) 25 Total assets	• • • • • • • • • • • • • • • • • • • •		65,258		58,249
20 Iolai assets			139,237	25	121,569
26 Total liabilities (describe in Schedule O)			10,579		4,565
27 Net assets or fund balances (line 27 of column (B) must ag	ree with line 21)		128,658		117,004
Part III Statement of Program Service Accor	nplishments (s	ee the instructions for	or Part III)	† - -	1 227/002
Check if the organization used Schedule O	to respond to any	question in this Pa	t III X		Expenses
What is the organization's primary exempt purpose?				l (R	lequired for section
See Schedule O				1	01(c)(3) and 501(c)(4)
Describe the organization's program service accomplishments for	each of its three le	argest program service	5,	1	ganizations, optional for
as measured by expenses. In a clear and concise manner, descri	be the services pro	vided, the number of		1 .	hers.)
persons benefited, and other relevant information for each progra					
28 VARIOUS NEIGHBORHOOD EVENTS TO ENHANCE QUALI	TY OF LIFE AND	SHOWCASE THE			
NEIGHBORHOODS UNIQUE HISTORY AND ARCHITECTUR	E INCUDING LOU	JISVILLE LIVE,			
HOLIDAY HOUSE TOUR, OLD LOU BREW, TOURS AND	EDUCATIONAL SE	MINARS	****************		
(Grants \$ 7,500) If this amount includes	foreign grants, che	eck here		28a	75,870
29 OPERATION OF OLD LOUISVILLE INFORMATION CENT	ER AND GENERAL	SUPPORT OF			
NEIGHBORHOOD ORGANIZATIONS AND EVENTS					
(Grants \$ 2,000) If this amount includes		····			
7 7 the different fillinges	foreign grants, che	eck here		29a	25,496
30 CENTRAL PARK IMPROVEMENTS, COMMUNIY GARDEN,	AND NEIGHBORHO	OD MAINTENANCE.			
(Grants \$) If this amount includes			· · · · · · · · · · · · · · · · · · ·		
21 Other program continue (describe in Out and to O)				30a	3,007
			·····		
(Grants \$) If this amount includes Total program service expenses (add lines 28a through 31a	toreign grants, che	ck here	10m 1 1		
	\		·	31a	2,395
Part IV List of Officers, Directors, Trustees, and Key F	mployees (list eac	h one even if not com	•	32	106 768
	mployees (list eac	h one even if not comp n in this Part IV	•	32	106 768
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp	mployees (list each cond to any question (b) Average	h one even if not comp n in this Part IV (c) Reportable	ensated — see the	32 e instru	106,768 Juctions for Part IV)
Part IV List of Officers, Directors, Trustees, and Key F	imployees (list eac ond to any question	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISO	ensated — see the	32 e instru nefits, mployed and	106 768
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title	imployees (list each cond to any question (b) Average hours per week	h one even if not comp n in this Part IV (c) Reportable compensation	ensated — see the	32 e instru nefits, mployed and	106,768 uctions for Part IV)
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp	mployees (list eac cond to any question (b) Average hours per week devoted to position	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISO (if not paid, enter -0-)	ensated — see the (d) Health ber contributions to e benefit plans, deferred compet	32 e instru nefits, mployed and nsation	106,768 uctions for Part IV) e (e) Estimated amount of other compensation
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG	imployees (list each cond to any question (b) Average hours per week	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISO (if not paid, enter -0-)	ensated — see the	32 e instru nefits, mployed and nsation	106,768 uctions for Part IV)
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Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG CHAIRMAN LEAH STEWART TREASURER JAMES BROOKS VICE - CHAIR	mployees (list eacond to any question (b) Average hours per week devoted to position 0.00	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	ensated — see the (d) Health ber contributions to e benefit plans, deferred competed.	age instructions and insation	106,768 actions for Part IV) e (e) Estimated amount of other compensation 0 0 0 0 0
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG CHAIRMAN LEAH STEWART TREASURER JAMES BROOKS VICE - CHAIR CHUCK ANDERSON	mployees (list eacond to any question (b) Average hours per week devoted to position 0.00	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health ber contributions to e benefit plans, deferred competitions to the contribution of the contribu	32 e instru- nefits, mployer and nsation	106,768 actions for Part IV) e (e) Estimated amount of other compensation 0 0 0 0 0
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Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG CHAIRMAN LEAH STEWART TREASURER JAMES BROOKS VICE - CHAIR CHUCK ANDERSON	mployees (list eacond to any question (b) Average hours per week devoted to position 0.00	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health ber contributions to e benefit plans, deferred competitions to the contribution of the contribu	age instructions and insation	106,768 actions for Part IV) e (e) Estimated amount of other compensation 0 0 0 0 0
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG CHAIRMAN LEAH STEWART TREASURER JAMES BROOKS VICE - CHAIR CHUCK ANDERSON	mployees (list eacond to any question (b) Average hours per week devoted to position 0.00	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health ber contributions to e benefit plans, deferred competitions to the contribution of the contribu	age instructions and insation	106,768 actions for Part IV) e (e) Estimated amount of other compensation 0 0 0 0 0
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG CHAIRMAN LEAH STEWART TREASURER JAMES BROOKS VICE - CHAIR CHUCK ANDERSON	mployees (list eacond to any question (b) Average hours per week devoted to position 0.00	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health ber contributions to e benefit plans, deferred competitions to e the contribution of the competition of the competit	age instructions and insation	106,768 actions for Part IV) e (e) Estimated amount of other compensation 0 0 0 0 0
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG CHAIRMAN LEAH STEWART TREASURER JAMES BROOKS VICE - CHAIR CHUCK ANDERSON	mployees (list eacond to any question (b) Average hours per week devoted to position 0.00	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health ber contributions to e benefit plans, deferred competitions to e the contribution of the competition of the competit	age instructions and insation	106,768 actions for Part IV) e (e) Estimated amount of other compensation 0 0 0 0 0
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG CHAIRMAN LEAH STEWART TREASURER JAMES BROOKS VICE - CHAIR CHUCK ANDERSON	mployees (list eacond to any question (b) Average hours per week devoted to position 0.00	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health ber contributions to e benefit plans, deferred competitions to e the contribution of the competition of the competit	age instructions and insation	106,768 actions for Part IV) e (e) Estimated amount of other compensation 0 0 0 0 0
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG CHAIRMAN LEAH STEWART TREASURER JAMES BROOKS VICE - CHAIR CHUCK ANDERSON	mployees (list eacond to any question (b) Average hours per week devoted to position 0.00	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health ber contributions to e benefit plans, deferred competitions to e the contribution of the competition of the competit	age instructions and insation	106,768 actions for Part IV) e (e) Estimated amount of other compensation 0 0 0 0 0
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG CHAIRMAN LEAH STEWART TREASURER JAMES BROOKS VICE - CHAIR CHUCK ANDERSON	mployees (list eacond to any question (b) Average hours per week devoted to position 0.00	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health ber contributions to e benefit plans, deferred competitions to e the contribution of the competition of the competit	age instructions and insation	106,768 actions for Part IV) e (e) Estimated amount of other compensation 0 0 0 0 0
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG CHAIRMAN LEAH STEWART TREASURER JAMES BROOKS VICE - CHAIR CHUCK ANDERSON	mployees (list eacond to any question (b) Average hours per week devoted to position 0.00	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health ber contributions to e benefit plans, deferred competitions to e the contribution of the competition of the competit	age instructions and insation	106,768 actions for Part IV) e (e) Estimated amount of other compensation 0 0 0 0 0
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG CHAIRMAN LEAH STEWART TREASURER JAMES BROOKS VICE - CHAIR CHUCK ANDERSON	mployees (list eacond to any question (b) Average hours per week devoted to position 0.00	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health ber contributions to e benefit plans, deferred competitions to e the contribution of the competition of the competit	age instructions and insation	106,768 actions for Part IV) e (e) Estimated amount of other compensation 0 0 0 0 0
Part IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to resp (a) Name and title HOWARD ROSENBERG CHAIRMAN LEAH STEWART TREASURER JAMES BROOKS VICE - CHAIR CHUCK ANDERSON	mployees (list eacond to any question (b) Average hours per week devoted to position 0.00	h one even if not comp n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health ber contributions to e benefit plans, deferred competitions to e the contribution of the competition of the competit	age instructions and insation	106,768 actions for Part IV) e (e) Estimated amount of other compensation 0 0 0 0 0

33

34

35a

36

37a b 38a

b 39 а b 40a

43

44a

41 42a

	990-EZ (2017) OLD LOUISVILLE NEIGHBORHOOD COUNCIL		F	Page 3
Pa	Int V Other Information (Note the Schedule A and personal benefit contract the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V			
			Yes	No
3	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		x
4	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		x
5a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		<u> </u>
C	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
6	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	20		x
.	during the year? If "Yes," complete applicable parts of Schedule N	36		<u> </u>
	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	37b		x
b Ba	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	310		
Ja	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
9	Section 501(c)(7) organizations. Enter:	7		
а	Initiation fees and capital contributions included on line 9	L		
b	Gross receipts, included on line 9, for public use of club facilities			
0a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ▶; section 4912 ▶; section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year	404		x
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	-	
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912,			
	1 1000			
d	4955, and 4958			
_	40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e	<u> </u>	X
1	List the states with which a copy of this return is filed None	~ ~~		<i></i>
2a	The organization's books are in care of ▶ MARY MORROW & ASSOCIATES Telephone no. ▶ 50	2-63	8-0	005
	1347 s 3RD ST SUITE 304 Located at ▶ Louisville KY ZIP+4 ▶ 40	208		
L	Located at LOUISVILLE KY ZIP + 4 AU At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
b	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	1.00	X
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States?	42c	<u> </u>	X
_	if "Yes," enter the name of the foreign country:			▶ □
3	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43		·	
		ſ	Yes	No
4a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	44-		x
I -	completed instead of Form 990-EZ	44a	 	<u>^</u>
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	44b		x
_	completed instead of Form 990-EZ Did the organization receive any payments for indoor tanning services during the year?		 	X
c d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	1.0		 ==
•	explanation in Schedule O	44d	<u> </u>	<u> </u>
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	<u> </u>	X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	magning of postion E12/b)/12/2 If "You " Form 000 and Schedule P may need to be completed instead of	I	1	1

meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of

X

Form 990-EZ (see instructions)

Form	990-EZ	(2017) OLD	LOUISVILLE NEIC	GHBORHOOD C	COUNCIL					F	Page 4	
46	Did the	e organization enga	ge, directly or indirectly, in polit	ical campaign activitie	es on behalf o	f or in oppo	osition			Yes	No	
Pa	rt VI	Section 501 All section 50: 50 and 51.	(c)(3) organizations onl 1(c)(3) organizations must a organization used Schedule	y nswer questions 47	7-49b and 5	2, and cor	mplete the t	ables for li	nes	<u> </u>	<u>X</u>	
47	Did the			_					***********	Yes		
47	year? If "Yes," complete Schedule C, Part II						47		X			
48 49a	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E						48		X			
b	o If "Yes," was the related organization a section 527 organization?						49b	+	-			
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key								L			
	employ	ees) who each rec	eived more than \$100,000 of c				none, enter "I	Vone."				
		(a) Name and tit	le of each employee	(b) Average hours per week devoted to position	(c) Repo compen (Forms W-2/	sation	contributions to employee (e			e) Estimated amount of other compensation		
No	ne		•••••									
											Medici Marrier en regional de	
		•••••									-	
		••••									-	
f	Total n	umber of other emi	ployees paid over \$100,000		<u> </u>		L					
51	Comple	ete this table for the	e organization's five highest cor	mpensated independe	nt contractors	who each	received mor	e than				
	\$100,00		from the organization. If there		."							
		(a) Name and busin	ness address of each independent	contractor		(b) Typ	e of service		(c) Compe	ensation	:	
Nor	ne							·				
					· · · · · · · · · · · · · · · · · · ·		2'					
• • • • • • •												
			ependent contractors each recellete Schedule A? Note: All se									
	complet	ted Schedule A	· · · · · · · · · · · · · · · · · · ·	<u> </u>			·	<u>:</u> >	X Yes		No	
true, c	penalties orrect, ar	of perjury, I declare nd complete. Declarat	that I have examined this return, in tion of preparer (other than officer)	ncluding accompanying s is based on all informati	schedules and s ion of which pre	statements, a eparer has ar	nd to the best ny knowledge.	of my knowle	dge and beli	ef, it is		
Sign		Signature of officer	(Muan)				· ·					
Here		Leah S	Stewart To	asurer	-	Oa	8.8.1	8	· · · · · · · · · · · · · · · · · · ·			
		Print/Type preparer's nam		Preparer's signature			Date	Check	PTIN	***************************************		
Paid		Mary C Morrow					08/08					
Prepared Use	Only F	Films EIN P										
UJE '	July		1347 S 3rd St S Louisville, KY	te 304 40208-3300	1			E/	7244.0	-001) =	
May	the IRS		with the preparer shown above				<u> F</u>	none no. 50	D2-419 ▶ X Y		No	

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

OLD LOUISVILLE NEIGHBORHOOD COUNCIL Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (vi) Amount of (iv) Is the organization (v) Amount of monetary (I) Name of supported (iii) Type of organization other support (see (described on lines 1-10 listed in your governing support (see organization document? instructions) instructions) above (see instructions)) No (A) (B) (C) (D) (E)

Total

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

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

Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	14,518	112,149	63,752	64,101	59,923	314,443
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	14,518	112,149	63,752	64,101	59,923	314,443
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.	<u> </u>				<u>l</u>	314,443
	tion B. Total Support	(a) 2042	(F) 2044	(c) 2015	(d) 2016	(e) 2017	(f) Total
	idar year (or fiscal year beginning in)	(a) 2013	(b) 2014			59,923	314,443
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	14,518	112,149	63,752	64,101	59,923	314,443
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		:				
11	Total support. Add lines 7 through 10						314,443
12	Gross receipts from related activities, etc.	(see instructions)				12	64,219
13	First five years. If the Form 990 is for the organization, check this box and stop her tion C. Computation of Public S	e organization's first re	t, second, third, for		r as a section 501	I(c)(3)	
	Public support percentage for 2017 (line 6			np (f))		14	100.00%
14 15	Public support percentage from 2016 Sch					1 1	100.00 %
16a	33 1/3% support test—2017. If the organ						100100 /1
IUa	box and stop here . The organization qua				,		▶ X
b	33 1/3% support test—2016. If the organ				5 is 33 1/3% or m	ore, check	
_	this box and stop here. The organization						▶ □
17a	10%-facts-and-circumstances test—20						
	10% or more, and if the organization mee						
	Part VI how the organization meets the "	facts-and-circumsta	nces" test. The or	ganization qualifies	as a publicly sup	ported	,
	organization		,				▶∐
b	10%-facts-and-circumstances test-20	16. If the organizati	on did not check a	box on line 13, 16	ia, 16b, or 17a, an	d line	
	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization m						
	supported organization	.,				,	▶ ∐
18	Private foundation. If the organization di						▶ □
	instructions						🗀

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.)

	ction A. Public Support						· · · · · · · · · · · · · · · · · · ·
Cale	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership					(7, 23.1.	(i) rotar
	fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities fumished 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							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
¢	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support			·	<u> </u>	<u> </u>	
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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						
С	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	t, second, third, fou	irth, or fifth tax yea	r as a section 501	(c)(3)	
Sec	organization, check this box and stop here		<u> </u>	<u></u>			
	tion C. Computation of Public Su	ppoπ Percent	tage				
15 16	Public support percentage for 2017 (line 8,	column (f) divided	by line 13, columi	n (f))		15	%
16 Sect	Public support percentage from 2016 Sche	dule A, Part III, lin	e 15				<u>%</u>
	ion b. Computation of investmen	nt income Per	centage				
17 18	Investment income percentage for 2017 (lin	ie 10c, column (f)	aivided by line 13,	column (f))		, ,	%_
10 19a	Investment income percentage from 2016				•••••	18	%
ısa	33 1/3% support tests—2017. If the organ	ization did not che	eck the box on line	14, and line 15 is	more than 33 1/39	%, and line	_ [—
b	17 is not more than 33 1/3%, check this bo 33 1/3% support tests—2016. If the organ	x and stop nere. dization did not obs	trie organization q	uaimes as a public	cly supported orga	nization	▶ ∐
-	line 18 is not more than 33 1/3%, check thi	s box and stop he	on a box on line to	n auslifice se c n	which characted	in 33 1/3%, and	▶ □
20	Private foundation. If the organization did	not check a box o	on line 14, 19a, or	19b, check this box	x and see instructi	ons	

Schedule A (Form 990 or 990-EZ) 2017

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? C
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes." answer 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

 	Yes	No
1		
,		
2		
3a		
<u> </u>		
3b		
3c		<u></u>
4a		
4b		
40		
		-
4c		
5a		
5b		
5c		
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6		
7		
8		
0		
9a		
9b		
9¢		
40-		
10a		
10b		
 .44		

Page 4

Schedule A (Form 990 or 990-EZ) 2017

	dule A (Form 990 or 990-EZ) 2017 OLD LOUISVILLE NEIGHBORHOOD COUNCIL art IV Supporting Organizations (continued)			Page
	art IV Supporting Organizations (continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
ŧ	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?	44.		
t	A family member of a person described in (a) above?	11a 11b	 	
	A 35% controlled entity of a person described in (a) or (b) above? If "Ves" to a horse provide detail in Red M	11c		
Sec	tion B. Type I Supporting Organizations			
4			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	1_1_	 	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI now providing such benefit carried out the purposes of the supported organization(s) that operated			
<u> </u>	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations		<u> </u>	<u> </u>
a	Man a mainth of the		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).			
Sect	ion D. All Type III Supporting Organizations	1		
	Thomas a Samuelono			T
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	\Box	Yes	No
	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	1 1		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	vivere 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			
2	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
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.			
Secti	on E. Type III Functionally-Integrated Supporting Organizations	3	l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	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 instruc	tions)		
		ionsj.		
	ctivities Test. Answer (a) and (b) below.	Γ	Yes	No
а	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,		1	
	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 acceptant and its activities.	2a		
	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		1	
	activities but for the organization's involvement.	26		
	Parent of Supported Organizations. Answer (a) and (b) below.	2b		***************************************
а	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 detalls in Part VI.	3a	1	
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 recent	26	-	

Schedu	e A (Form 990 or 990-EZ) 2017 OLD LOUISVILLE NEIGHBORHOOD	CO	UNCIL	Page 6
<u>Par</u>	The state of the s	aniza	ations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on No	v. 20,	1970 (explain in Part VI).See
	instructions. All other Type III non-functionally integrated supporting organizations mus	t com	plete Sections A through	h E.
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year
			(A) Filor rear	(optional)
	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	ection of gross income or for management, conservation, or			
	ntenance of property held for production of income (see instructions)	6		
	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).	8		
Section	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
inst	uctions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
	b Average monthly cash balances	1b		
	c Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
	e Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see	instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Section	n C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	· · · · · · · · · · · · · · · · · · ·	
	Enter greater of line 2 or line 3.	4		
5	ncome tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	gency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integrated I instructions).	Type II	I supporting organization	n (see
	" ION GOLD! O/.			

Schedule A (Form 990 or 990-EZ) 2017

Schedul Part	e A (Form 990 or 990-EZ) 2017 OLD LOUISVILLE NE.			Page 7
		supporting Organiza	uons (conunueu)	
	on D - Distributions		· W	Current Year
	Amounts paid to supported organizations to accomplish exempt purpos		March and the first and the second	
2	Amounts paid to perform activity that directly furthers exempt purposes	or supported		
	organizations, in excess of income from activity	ated essecitations		
3	Administrative expenses paid to accomplish exempt purposes of support			
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. Distributions to attentive supported organizations to which the organiza	tion in responsive	······································	
8	(provide details in Part VI). See instructions.	aon is responsive		
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
10	Life o amount divided by line a amount	(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017			
	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2017:			
<u>a</u>				
	From 2013			
	From 2014			
	From 2015		· · · · · · · · · · · · · · · · · · ·	
	From 2016			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2017 distributable amount			
	Carryover from 2012 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from			
	Section D, line 7: \$		A CONTRACTOR OF THE CONTRACTOR	
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h	At .		
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
8	and 4c. Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			
	5 f 004 <i>f</i>			
	Excess from 2016			
	Excess from 2017			
U	manager next by the second sec			

Schedule A (For Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	•••••••••••••••••••••••••••••••••••••••

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

Inspection Inspection number

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

OLD LOUISVILLE NEIGHBORHOOD COUNCIL

		CONCIL	
Form 990-EZ, Part I, Line 8 -	Other Reve	enue	
Description		Amount	
RENTAL	\$	412	
	Total \$	412	••••••
Form 990-EZ, Part I, Line 16	- Other Exp	enses	
Description	***************************************	Amount	
Expenses	• • • • • • • • • • • • • • • • • • • •		
MARKETING - PROGRAMS	\$	4,074	
SUPPLIES	\$	52	
DUES	\$	625	
SUPPLIES	\$	900	
TELEPHONE	\$	1,537	
REFRESHMENTS	\$	1,209	
PROGRAM SUPPLIES	\$	1,821	
PERMIT FEES	\$	1,307	
TOOLS, MATERIALS EQUIPMENT	\$	2,250	
WEB DESIGN	\$	1,815	
	\$	20	
FINANCE CHARGE	\$	40	
LIABILITY & D&O INS	\$	2,780	
WORKERS COMP	\$	1,449	•••••
PROGRAM INS	\$	274	
OLD LOUISVILLE LIVE	\$	24,300	
TOURS	\$	2	

Schedule O (Form 990 or 990-EZ) (2017) Page 2 Name of the organization Employer identification number OLD LOUISVILLE NEIGHBORHOOD COUNCIL HOLIDAY HOUSE TOUR \$ 6,441 PARK GROUNDS 2,317 COMMUNITY GARDEN 630 OLD LOU BREW 5,311 VICTORIAN TEA 83 APPRECIATION-HHT 415 BANK FEES 463 LICENSE & FEES 340 TOONERVILLE TROLLY 2,500 MIDDLE SCHOOL 200 OTHER 550 Non-investment Depreciation 432 Total \$ 64,137 Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances Description Amount PRIOR YEAR ADJUSTMENT Form 990-EZ, Part II, Line 24 - Other Assets Description Beg. of Year End of Year Grants Receivable 5,550 \$ 600 Prepaid Expenses and Deferred Charges 0 \$ 336 FF&E 62,908 \$ 62,908 Less Accumulated Depreciation 5,135 \$ 6,820 3,556 \$ 3,556 Less Accumulated Amortization 1,621 \$ 2,331 Total \$ 65,258 \$ 58,249 Page 1 of 2

Form 4562

Department of the Treasury Internal Revenue Service Name(s) shown on return

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.
 Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172 2017

Attachment Sequence No. 17

OLD LOUISVILLE NEIGHBORHOOD COUNCIL Business or activity to which this form relates Indirect Depreciation Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) 1 510,000 Total cost of section 179 property placed in service (see instructions) 2 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,030,000 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property 6 (b) Cost (business use only) (c) Elected cost Listed property. Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 Tentative deduction. Enter the smaller of line 5 or line 8 9 9 Carryover of disallowed deduction from line 13 of your 2016 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 12 Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) 16 1,556 MACRS Depreciation (Don't include listed property.) (See instructions.) Section A MACRS deductions for assets placed in service in tax years beginning before 2017 17 17 129 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2017 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (husiness/investment use placed in (e) Convention (f) Method (g) Depreciation deduction period only-see instructions) 19a 3-year property 5-year property 7-year property d 10-year property 15-year property 20-year property 25-year property 25 yrs. Residential rental 27.5 yrs. MM property 27.5 yrs. MM S/L Nonresidential real 39 yrs. MM S/L property MM S/L Section C-Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs. S/L c 40-year 40 yrs. MM S/L Part IV Summary (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 1.685 For assets shown above and placed in service during the current year, enter the

DAA

rm 4562 (2017)	•								
Part V	Listed Property	(Include automob	iles, certain	other vehicles	, certain aircraft	certain	computers.	and	property

used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A all of Section B and Section C if particular

			i) through (c) or												*******	······································
			-Depreciation			tion (C			7							
<u>24a</u>		ve evidence to support	1	ent use claimed?	·		Yes	No	24b	If "Yes.	" is the	<u>evidenc</u>	e written	1?	Yes	No
	(a) e of property vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	Cost or o	•		(e) sis for dep siness/inve use onl	estment	(f) Recover period	· 1	(9) Method/ Convention		(h) Depreciation deduction		(I) Elected section 179 cost	
25		depreciation allow							·							
		ear and used mo				se (see	instruct	ions)	• • • • • • • • • •		2	5			<u></u>	
<u> 26</u>	Property	used more than	50% in a qualifie	d business	use:		· · · · · · · · · · · · · · · · · · ·									
			%	 					 						 	
			0,	,												
27	Property	used 50% or less	in a qualified h	usinass usa					<u> </u>						<u> </u>	
	. , , , , , , ,	0000 0070 01 1000	l d quantes b	donicoo doc	<u> </u>	T			T			<u> </u>		****	T	
			%							S/	L-					
						1						1	***************************************		1	
			%						}	S/						
28	Add amo	ounts in column (h), lines 25 throu	gh 27. Enter	here and	on line	e 21, pag	ge 1			2				1	
29	Add amo	ounts in column (i)	, line 26. Enter h	nere and on	line 7, pa	ige 1				<u>.</u>				. 29		
					tion B—l											
		section for vehicle													es	
to yo	ur employ	ees, first answer i	he questions in	Section C to	see if y			eption to	1				1		T	
30	Total his	siness/investment	miles drives du	rina	Vehic			ide 2	1	c) de 3		d) icle 4		(e) nicle 5		(f) nicle 6
00		(don't include co														
31		mmuting miles driv			 	······					 		 		 	
32		er personal (nonc									 		 			
		ven					1									
33	Total mile	es driven during th	ne year. Add								1					
	lines 30	through 32	*********													
34	Was the	vehicle available	for personal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use durir	ng off-duty hours?						<u> </u>			<u> </u>					
35		vehicle used prim														
20		owner or related p					 	ļ			ļ	ļ	ļ			
36	is anothe	er vehicle available			<u></u>		<u> </u>	<u> </u>	L		<u> </u>	<u> </u>	<u> </u>	<u> L </u>		
Δηςιλ	er these o	uestions to deter	Section C—Que	stions for t	mploye	's Who	Provide	e Vehicle	es for U	se by T	Their En	ployee	S			
more	than 5%	owners or related	persons (see in	i an exceptit istrictions)	II LO CON	ibieiliig	Section	B tot ve	inicies us	sea by e	employee	es wno	aren't			
37		naintain a written			ts all per	sonal II	se of ve	hicles in	cluding (commut	ing by			····	Yes	No
	your emp	oloyees?		and promo	to an pon	Jonal a	00 01 10	moico, n	ioiddii ig	Jonnand	ing, by				162	NO
38	Do you n	naintain a written	policy statement	that prohibi	ts person	al use	of vehicl	es, exce	pt comm	iuting, b	y your					
	employee	es? See the instru	ctions for vehicle	es used by	corporate	officers	s, directo	ors, or 19	% or moi	e owne	ers					
39	Do you to	eat all use of vehi	icles by employe	es as perso	nal use?											
40	Do you p	novide more man	live venicies to	your employ	ees, obta	in infor	mation f	rom you	r employ	ees abo	out the					
	use of th	e vehicles, and re	tain the informat	tion received	?											
11	Notes If	neet the requirem	ents concerning	qualified au	tomobile	demon	stration	use? (Se	ee instru	ctions.)		· · · · · · · · ·				Ĺ
Pa	rt VI	our answer to 37, Amortization	38, 39, 40, or 4	in is "Yes," (ion't com	plete S	ection B	for the	covered	vehicles	<u>. </u>					
1 0	IC AI	AITIOI LIZALIOII				т			T			(e)				
		(a)		(b) Date amo				(C)	. 1	(d)		Amortiza			(f)	
		Description of costs		begir			Amortiza	ble amoun	·	Code se	ection	period percenta		Amoniza	tion for this	s year
12	Amortizat	ion of costs that b	egins during vo	ur 2017 tax	year (see	instru	ctions):			*******			L	······································		
								***********			T					
13	Amortizat	ion of costs that b	egan before you	ır 2017 tax y	ear								43			710
14	Total. Ad	ld amounts in colu	ımn (f). See the	instructions	for where	to rep	ort						44			710

08/08/2018 3:24 PM

Form 990, Page 1

FYE: 12/31/2017

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
<u>Prior</u> 1 3 7	MACRS: COPIER FURNITURE & FIXTURES ADDITIONAL FF&E	5/11/12 9/01/14 1/01/15	825 749 655 2,229		X X X	412 374 327 1,113	5 HY 200DB 7 HY 200DB 7 HY 200DB	801 585 454 1,840	24 47 58 129
Other 2 5 6	Depreciation: LEGACY LEASEHOLD IMP WINDOWS LEGACY ADDITIONAL Total Other Depreciation Total ACRS and Other Depre	9/01/14 9/08/15 1/01/15 - 	48,867 9,900 1,912 60,679			48,867 9,900 1,912 60,679	39 MO S/L 39 MO S/L 39 MO S/L	2,871 328 96 3,295	1,253 254 49 1,556
	<u>ization:</u> PROGRAM START-UP ADDITIONAL START-UP	9/01/14 1/01/15	988 2,568 3,556		-	988 2,568 3,556	5 MOAmort 5 MOAmort	593 1,028 1,621	197 513 710
	Grand Totals Less: Dispositions and Transfers Less: Start-up/Org Expense Net Grand Totals				-	65,348 0 0 65,348		6,756 0 0 6,756	2,395 0 0 2,395

OLNC OLD LOUISVILLE NEIGHBORHOOD COUNCIL KY Asset Report

FYE: 12/31/2017

Form 990, Page 1

<u>Asset</u>	Description	Date In Service	Cost	Basis for Depr	KY Prior	KY Current	Federal Current	Difference Fed - KY
3 F	I <mark>ACRS:</mark> OPIER URNITURE & FIXTURES DDITIONAL FF&E	5/11/12 9/01/14 1/01/15	825 749 655 2,229	825 749 655 2,229	801 585 454 1,840	24 47 58 129	24 47 58 129	0 0 0 0
2 L 5 W	Depreciation: EGACY LEASEHOLD IMP //INDOWS EGACY ADDITIONAL Total Other Depreciation	9/01/14 9/08/15 1/01/15	48,867 9,900 1,912 60,679	48,867 9,900 1,912 60,679	2,871 328 96 3,295	1,253 254 49 1,556	1,253 254 49 1,556	0 0 0 0
	Total ACRS and Other Depre	ciation _	60,679	60,679	3,295	1,556	1,556	0
Amortiza 4 PI 8 A	ntion: ROGRAM START-UP DDITIONAL START-UP	9/01/14 1/01/15	988 2,568 3,556	988 2,568 3,556	593 1,028 1,621	197 513 710	197 513 710	0 0
	Grand Totals Less: Dispositions Less: Start-up/Org Expense Net Grand Totals		66,464 0 0 66,464	66,464 0 0 66,464	6,756 0 0 6,756	2,395 0 0 2,395	2,395 0 0 2,395	0 0 0 0

FYE: 12/31/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
1 (3 F	MACRS: COPIER FURNITURE & FIXTURES ADDITIONAL FF&E	5/11/12 9/01/14 1/01/15	825 749 655 2,229	X X X	412 374 327 1,113	5 HY 200DB 7 HY 200DB 7 HY 200DB	801 585 454 1,840	24 47 58 129
2 I 5 V	Depreciation: LEGACY LEASEHOLD IMP WINDOWS LEGACY ADDITIONAL Total Other Depreciation	9/01/14 9/08/15 1/01/15	0 0 0	- -	0 0 0	0 HY 0 HY 0 HY	0 0 0 0	0 0 0 0
	Total ACRS and Other Depree	ciation	0	=	0		0	0
	Grand Totals Less: Dispositions and Transfe Net Grand Totals	rs	2,229 0 2,229	-	1,113 0 1,113		1,840 0 1,840	129 0 129

OLNC OLD LOUISVILLE NEIGHBORHOOD COUNCIL

Bonus Depreciation Report

08/08/2018 3:24 PM

FYE: 12/31/2017

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

OLNC OLD LOUISVILLE NEIGHBORHOOD COUNCIL

Depreciation Adjustment Report

FYE: 12/31/2017

08/08/2018 3:24 PM

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	Description	Tax	AMT	AMT Adjustments/ Preferences
MACR	S Adju	stments:				
Page 1 Page 1 Page 1	1 1 1	1 3 7	COPIER FURNITURE & FIXTURES ADDITIONAL FF&E	24 47 58 129	24 47 58 129	0 0 0

OLNC OLD LOUISVILLE NEIGHBORHOOD COUNCIL

Future Depreciation Report FYE: 12/31/18 08/08/2018 3:24 PM

FYE: 12/31/2017

Form 990, Page 1

<u>Asset</u>	Description	Date In Service	Cost	Tax	AMT	
Prior 1	MACRS;					
1 3 7	COPIER FURNITURE & FIXTURES ADDITIONAL FF&E	5/11/12 9/01/14 1/01/15	825 749 655 2,229	0 34 41 75	0 33 41 74	
Other	Depreciation:					
2 5 6	LEGACY LEASEHOLD IMP WINDOWS LEGACY ADDITIONAL Total Other Depreciation	9/01/14 9/08/15 1/01/15	48,867 9,900 1,912 60,679	1,253 254 49 1,556	0 0 0	
	Total ACRS and Other Depreciation		60,679	1,556	0	
Amortiz	zation:					
4 8	PROGRAM START-UP ADDITIONAL START-UP	9/01/14 1/01/15	988 2,568 3,556	198 514 712	0 0	
	Grand Totals		66,464	2,343	74	

OLNC OLD LOUISVILLE NEIGHBORHOOD COUNCIL

KY Future Depreciation Report FYE: 12/31/18

08/08/2018 3:24 PM

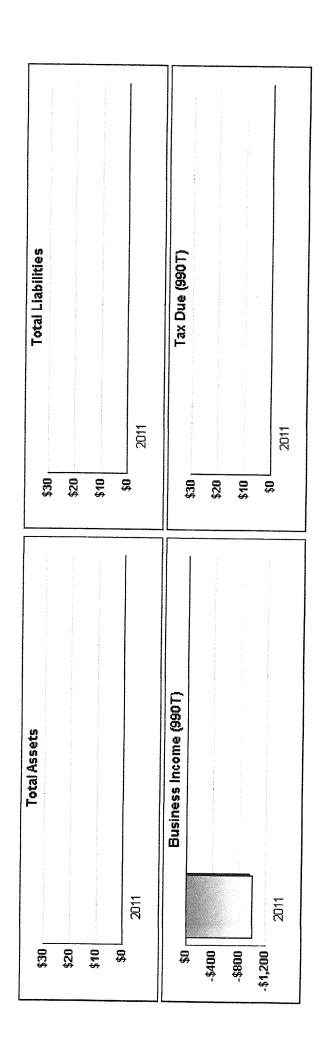
Form 990, Page 1 FYE: 12/31/2017

Asset	Description	Date In Service	Cost	KY
Prior N	MACRS:			
1 3 7	COPIER FURNITURE & FIXTURES ADDITIONAL FF&E	5/11/12 9/01/14 1/01/15	825 749 655 2,229	0 34 41 75
Other	Denreciation:			
2 5 6	LEGACY LEASEHOLD IMP WINDOWS LEGACY ADDITIONAL	9/01/14 9/08/15 1/01/15	48,867 9,900 1,912	1,253 254 49
	Total Other Depreciation		60,679	1,556
	Total ACRS and Other Depreciation		60,679	1,556
Amortiz	ration:			
4 8	PROGRAM START-UP ADDITIONAL START-UP	9/01/14 1/01/15	988 2,568	198 514
			3,556	712
	Grand Totals		66,464	2,343

Form 990T	Tax Return History			2017
Name OLD LOUISVILLE NEIGHBORHOOD COUNCIL	T		Emplo	Employer Identification Number
2013 2014	2015	2016	2017	2018
Business activity profit/loss				
Capital gains/losses				
Partner and S Corp gain/loss				
Rental income*				HE OWNER THE PROPERTY OF THE P
Debt-financed income*	The state of the s			MANAGEMENT CO. T. C.
Controlled organizations incomelinterest*				
Investment income, specific organizations*				
Exploited exempt activity income*				
Other income				
Total trade or business income.			WHICH THE THE PARTY OF THE PART	Severing the several control of the several c
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				
		THE PARTY OF THE P		
Contributions	¢30	TXempt H	Exempt Keyenue (Loss)	
23	\$20	Commission (principle) (1); (b) (1) or one of the about the first and persons competitive.	A Section of the Community of the Commun	
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04	\$			
2011		2011		
Expenses Deductions	300	Net Exe	Net Exempt Revenue	
and determined the contract of		and complete the first or the second property of the second property of	the standard for the standard of the form of the standard standard of the standard of	
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2011	CN	2011		

			The state of the s		
Form 990T	Tax Return History	n History			2017
Name OLD LOUISVILLE NEIGHBORHOOD	OOD COUNCIL				Number
2013	2014	2015	2046	7776	
Other deductions			0107	71.07	2018
Net operating loss deduction					
Specific deduction 1,000					
Income after expense and deductions -1,000					
Income tax (corporate or trust)					
Other taxes					
Total taxes					
General business credit					
Other credits					
Net tax after credits					
Estimated tax payments					
Other payments					
Balance due/Overpayment					

^{*} Income shown net of expenses



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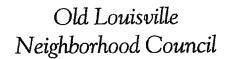
OINC OID LOUISVILLE NEIGHBORHOOD COUNCIL Federal Statements

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8/8/2018 3:24 PM 2,628 446 130 1 412 64,219 Amount ጭ Schedule A. Part II, Line 12 - Current year (continued) OLNG OLD LOUISVILLE NEIGHBORHOOD COUNCIL Federal Statements Description VICTORIAN TEA GIFT SHOP/T-SHIRTS STAINED GLASS WORKSHOP BANK INTEREST RENTAL 12/3/11/2017 Total





The Old Louisville Neighborhood Council, Inc.

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

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

47.2

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

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

Phone: (502) 635-5244

Address: The Old Louisville Neighborhood Council, Inc.

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

Email: olnc@bellsouth.net

Website: www.oldlouisville.org

0075161.09

amcray DIS

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

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

- 1. The name of the Corporation is The Old Louisville Neighborhood Council, Inc.
- 2. The Resolution to Dissolve and the Corporation's Plan of Distribution were adopted at a meeting of the members held on July 22, 2014 at which a quorum was present, and such resolution and plan received at least two-thirds (2/3) of the votes that members present at such meeting or represented by proxy were entitled to cast.
- 3. All debts, obligations and liabilities of the Corporation have been paid and discharged.
- 4. The Corporation's assets have been distributed, in accordance with the Corporation's Articles of Incorporation and its Plan of Distribution, to The Old Louisville Information Center, Inc., an organization described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended.
- 5. All of the Corporation's remaining property and assets have been transferred, conveyed or distributed in accordance with the provisions of KRS 273,161 to KRS 273,390.
 - 6. There are no suits pending against the Corporation in any court.

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

Howard Rosenberg President

Date: July 29, 2014

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Document No.: DM2014184423
Lodged By: WYATT TAKKANT COMBS
Recorded On: 88/28/2014 89:56:11
Total Fees: 11.88
Transfer Tax: 266
County Clerk: BOBBIE HOLSCLAW-JEFF CO KY
Deputy Clerk: EVENAY

0075161.09

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



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Franklon, KY 40602 (502) 564-3490 www.sos.ky.gov

Articles of Amendment (Domestic Nonprofit Corporation) **NPA**

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

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

The Old Louisville Neighborhood Council, Inc.

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

- 2. The text of each amendment adopted: Article IV (4): Upon dissolution of the Council, the Board of Directors shall, after paying or making provision for the payment of all flabilities of the Council, dispose of all the assets of the Council exclusively for the purpose of the Council in such manner, or to such organization or organizations established and operated exclusively for charitable purposes as shall at the time qualify under Sec. 501(c)(3) of the internal Revenue Code of 1986, as amended, as the Board of Directors shall determine.
- 3. The date of adoption of each amendment was July 22, 2014
- 4. Check either a, b or c (whichever is applicable):
 - The amendment(s) was (were) duly adopted by a quorum present at such meeting and that such amendment received at least two-thirds (2/3) of the votes which members present at such meeting or represented by proxy were entitled to cast.

The amendment(s) was (were) duly adopted by consent in writing and was (were) signed by all members entitled to vote with respect thereto.

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

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

spity of perjury under the laws of Kentucky that the forgoing is true and correct.

Howard Rosenberg

President

THE

July 22, 2014

Printed Name

(01/12)

Document No.: DN2014104422 Lodged By: WYATT TARRANT COMES Recorded On: 68/20/2014 09:55:39 11.60 Total Fees: <u> Transfer Taxa</u>

County Clerk: BOBBIE HOLSCLAW-JEFF CO KY Deputy Clerk: EVENAY

END OF DOCUMENT

0177929.09

amcray AMD

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



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Amendment (Domestic Nonprofit Corporation	n)	NPA
oursuant to the provisions of Ki ourpose, submits the following:	RS 14A and KRS Chapter 273, the unde	rsigned applies to amend articles	and, for that
	on record with the Office of the Secretar	y of State is:	
	ormation Center, Inc.		
	ime on moord with the Secretary of State.) Adials I: The same of the compani	on shall be: The Old Louisville Neighbo	chand Council to-
. The text of each emendment	adobted:	THE PART SILVE AND DOCUMENT LEGISLA	inno count, st.
			,
			
The date of adoption of each	emendment was July 22, 2014		
			•
Check either a, b or c (whichev	•		
a The amendment	(s) was (were) duly adopted by a quorui east two-thirds (2/3) of the votes which i	n present at such meeting and th	at such
by proxy were entitled to	cast.	·	•
entitled to vote with resp	(s) was (were) duly adopted by consent ect thereto.	7 77 -	-
c The amendment	(s) was (were) duly adopted by the boar he directors in office since there are no I	d of directors and such amendme	nt(s) received
	a upon filing, unless a delayed effective not be prior to the date the application is		
			iyed effective date and/or time)
eclare under penalty of aeriury	under the laws of Kentucky that the forg	oing is true and correct.	•
1/1/1			
HV	Howard Ro		July 22, 2014
nature of Officer or Chairman of the	Board Printed Name	Title	Date
		National in	DN2014184424
M2)		Lodged By: W	ATT TARRANT COMRS
		Recorded On: Total Fees:	08/20/2014 09: 11.00
		Transfer Tax:	.00
		Denity Clark:	BOBBIE HOLSCLAN-JEFF

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ORIGINAL COPY FILED
SECRETARY OF STATE OF KENTUCKY
FRANKFORT, KENTUCKY

ARTICLES OF INCORPORATION

OF

THE OLD LOUISVILLE INFORMATION CENTER, INC.

MAY 1 6 1983

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

ARTICLE I

The name of the Corporation shall be:

THE OLD LOUISVILLE INFORMATION CENTER, INC.

ARTICLE II

The duration of the Corporation shall be perpetual.

ARTICLE III

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

The name and address of the registered agent for service

of process is:

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

ARTICLE IV

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

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

The purposes of the Corporation shall be more specifically

stated as follows:

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

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

mote community cooperation and pride.

3) To engage in educational and charitable activity designed to combat neighborhood deterioration and to promote community revitalization and development.

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

ARTICLE

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

ARTICLE VI

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

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

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

ARTICLE VII

The names and addresses of the incorporators are:

INCORPORATOR

MAILING ADDRESS

Richard L. Janes

1409 So. Brook Street Louisville, Kentucky 40208

ARTICLE VIII

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

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

Carolyn Beall 1216 So. Floyd Street Louisville, Kentucky 40203

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

ARTICLE IX

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

ARTICLE X

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

ARTICLE XI

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

The remaining assets, if any, shall be disposed of by the Circuit Court of the county in which the principal office for the Corporation is then located, exclusively for such purposes or to such organizations as said Court shall determine are organized and operated exclusively for such purposes.

ARTICLE XII

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

Rosa

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

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

My Commission Expires: 8-16-86

NOTARY PUBLIC, STATE AF-LARGE, KENTUCKY

This Document Prepared By:

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

Form W-9 (Rev. November 2017

(Rev. November 2017) Department of the Treasury Internal Revenue Service

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.

	1 Name (as shown on your income tax return). Name is required on this line; d	o not loavo and and plant		
Print or type. Specific Instructions on page 3,	Old Louisville Neighborhood Council -			
	2 Business name/disregarded entity name, if different from above			
	Check appropriate box for federal tax classification of the person whose nar following seven boxes.			4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation single-member LLC		Trust/estate	Exempt payee code (if any)
	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 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.		Exemption from FATCA reporting code (if any)	
	✓ Other (see instructions) ► Nonprofit organization exempt under IRS Code 501(c)(3)		1(c)(3)	(Applies to accounts maintained outside the U.S.)
	5 Address (number, street, and apt. or suite no.) See instructions. Requester's name and address (optional)		nd address (optional)	
See (1340 S 4th Street			
w	6 City, state, and ZIP code			
	Louisville, KY 40208			
	7 List account number(s) here (optional)			
				
Par	Taxpayer Identification Number (TIN)		e Carial	curity number
Enter your TIN in the appropriate box. The TIN provided must match the traine given on line 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.				
Mote: If the account is in more than one name, see the instructions for line 1. Also see What Walle and				
Numb	er To Give the Requester for guidelines on whose number to enter.			
S. A. P. Contractor of the Con				
Par			4	
Unde	r penalties of perjury, I certify that:	abov for Lom waiting for a	number to be is	sued to me); and
	e number shown on this form is my correct taxpayer identification num m not subject to backup withholding because: (a) I am exempt from b	IDEL OF LOTH MOUNT OF S	I have not been r	-455-4 by the Internal Daysonia
Sei	rvice (IRS) that I am subject to backup withholding as a result of a failt	sekun withholding, of tol	r dividends, or (c)	ionned by the internal nevertue
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Ser no 3. I ar 4. The Certif you ha	rvice (IRS) that I am subject to backup withholding as a result of a failt longer subject to backup withholding; and ma U.S. citizen or other U.S. person (defined below); and a FATCA code(s) entered on this form (if any) indicating that I am exentication instructions. You must cross out item 2 above if you have been ave failed to report all interest and dividends on your tax return. For real estion or abandonment of secured property, cancellation of debt, contributhan interest and dividends, you are not required to align the certification,	npt from FATCA reporting notified by the IRS that you state transactions, item 2 thous to an individual retired but you must provide your	g is correct. u are currently sub- does not apply. Forment arrangemen r correct TIN. See	the IRS has notified me that I am eject to backup withholding because or mortgage interest paid, t (IRA), and generally, payments
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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.

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)