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

Applicant/Program: Neighborhood House Improvements Applicant Requested Amount: \$50,000 Appropriation Request Amount: \$13,000					
Executive Summary of Request Request to appropriate \$13,000 towards the Neighborhood House (201 N. 25th Street) for roof and gutter repairs					
Is this program/project a fundraiser? Is this applicant a faith based organization? Does this application include funding for sub-grantee(s)? Yes No Yes No					
I have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I have read the organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required.					
District # Sponsor Signature \$10,000 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:					

Department/Project:	Neighborhood	House.	Inc.	Improvements

Additional Signatures
I have reviewed this request for an expenditure of city tax dollars, and have determined the funds will be used for a public purpose.

Council Member Signature and Amount

District 1	\$
District 2	\$
District 3/hour shoules	\$ 2,000 00 Man
District 4	\$
District 5	\$
District 6	\$
District 7	\$\$
District 8	\$
District 9	_ \$
District 10	\$
District 11	\$\$
District 12	\$
District 13	\$
District 14	\$
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Legal Name of Applicant Organization Neighborhood House, Inc.

Program Name and Request Amount Neighborhood House, Inc.; \$50,000 Improvements Yes/No/NA Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding? Yes Is the funding proposed by Council Member(s) iess than or equal to the request amount? Yes 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 the application properly signed and dated by authorized signatory? Is proof of Tax Exempt status of \$01(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? Is the entity in good standing with: **Exempt Status Metro Revenue Commission?** **Louisville Metro Government?** **Louisville Metro Government?** **Louisville Metro Government?** **Louisville Metro Gevernment?** **Louisville Metro Government?** **Louisville Metro Government?** **Louisville Metro Government?** **Internal Revenue Service?** **Internal Revenue Servic	Legal Name of Applicant Organization Neighborhood House, Inc.	
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Prepared by: Chase Sanders Date: 09/21/2018		Yes
	Prepared by: Chase Sanders Date: 09/21/2018	

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Legal Name of Applicant Organization: Neighborhood	House			
(as listed on: http://www.sos.ky.gov/business/records	House			
Main Office Street & Mailing Address: 201 North 25th Str	eet, Louisville, KY 40212			
Website: www.nhky.org				
Applicant Contact: Martha Fuson or Cindy Frazier	Title: Director of Operations/Assistant			
Phone: 502-774-2322	Email: mfuson@nhky.org/cfrazier@nhky			
Financial Contact: Beverly Jones	Title: Director of Finance			
Phone: 502-774-2322 ext. 229	Email: bjones@nhky.org			
Organization's Representative who attended NDF Training	g: Yvette Livers			
GEOGRAPHICAL AREA(S) WHERE PROGRA	M ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s): 201 North 25th Street				
Council District(s): 5, 1,3, 4,6,7,10, 12, 15	Zip Code(s): 40212, 03, 04, 08,10, 12, 15			
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PROGRAM/PROJECT NAME:Neighborhood House Improve	ments			
Total Request: (\$) 50,000 Total Metro Awa	rd (this program) in previous year: (\$) 50,000			
Purpose of Request (check all that apply):				
 Operating Funds (generally cannot exceed 33% of 	f agency's total operating budget)			
Programming/services/events for direct benefit t	o community or qualified individuals			
Capital Project of the organization (equipment, function)	ırnishing, building, etc)			
The Following are Required Attachments:				
■ IRS Exempt Status Determination Letter Adderdum A	Signed lease if rent costs are being requested			
■ Current year projected budget Adderdum B	IRS Form W9 Addendyn C			
■ Current financial statement Addamum C	Evaluation forms if used in the proposed program			
■ Most recent IRS Form 990 or 1120-H Addendum D	Annual audit (If required by organization)			
M Articles of Incorporation (current & signed) Adje roly	Faith Based Organization Certification Form, if applicable			
Cost estimates from proposed vendor if request is for				
capital expense Adderdum F				
For the current fiscal year ending June 30, list all funds app	-			
Government for this or any other program or expense, including from any department or Metro Council Appropriation (Neighborn and Appropriation (Neighborn 2014)).				
sheet if necessary.	inbornood bevelopment runds). Attach additional			
	mount (\$): 9,000			
	mount (\$) 20,000			
7. Canada da 19. Canada da	mount (\$) 13,000			
Has the applicant contacted the BBB Charity Review for par	- 14s. (Section), 14s. (Section), 14s. (15)			
Has the applicant met the BBB Charity Review Standards?	Yes No			

Page 1 Effective May 2016

SECTION 3 – AGENCY DETAILS Describe Agency's Vision, Mission and Services: Neighborhood House Vision: Our vision is to break the cycle of poverty for our children and families. Mission: Our mission is to provide individuals with opportunities to enhance the quality of their lives. Neighborhood House has provided vital services to families since 1896. Today, we serve infants through senior adults in Portland and surrounding communities. The communities we serve are some of the most impoverished areas in Louisville. The core programs are: -Child Development Center cares for children 6 weeks to 12 years old and prepares preschoolers to enter kindergarten ready to succeed. -Youth Development Program prepares children and teens for success in college, work, and life by providing academic support, life skills training, social and cultural enrichment. -Family Services operates an emergency food bank, provides financial coaching, advocacy, family engagement, and wellness activities. -Four Seasons Program (Seniors) improves the quality of life for senior adults by supporting health, socialization, and independence.

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SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Celia Manlove (President)	Dec 31, 2020
Ted Nixon (Vice President)	Dec 31, 2018
Debbie Held (Treasurer)	Dec 31, 2018
Vicki Hines-Martin (Secretary)	Dec 31, 2020
Kelly Bryant (at large)	Dec 31, 2018*
Jim Rogers (at large)	Dec 31, 2018*
Wendy Dowd	Dec 31, 2019
Kathi Stearman	Dec 31, 2019
Kevin Fuqua	Dec 31, 2018
Christi Lanier-Robinson	Dec 31, 2020
Carol Coldiron	Dec 31, 2018
Tom Kokai	Dec 31, 2020
Kate Ward	Dec 31, 2020
Celia Catlett	Dec 31, 2020
Keisha Deonarine	Dec 31, 2020
Dustin Bell	Dec 31, 2020

Describe the Board term limit policy:

The terms of office for each Director shall be three (3) years beginning in January of the calendar year in which he or she is elected. No Director shall serve more than three (3) consecutive terms (nine years). Currently, two members-at-large with the asterisks by their name have served 3 consecutive terms. All other board members are eligible for another term.

Three Highest Paid Staff Names	Annual Salary	
Yvette Livers - Executive Director	87,000	
Beverly Jones - Finance Director	55,000	
Jeff Alston - Program Director	55,000	

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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.):

Capital needs for Neighborhood House. Our building in now 15 years old. The services since opening the new building have expanded and we now average being open 6 days a week for the community. AS building ages and we experience more "wear and tear, we need help to cover the cost of the building repair and updates to be able to continue to provide these vital services for the community.

Projects to started as soon as funding is approved. We will plan to complete the projects by June 1, 2019.

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

Funding will be spent on capital project for the organization. There are no subgrantees, but we will be paying various contractors or vendors to assist with the various capital projects.

Capital projects include (by priority)

Gutters and roof repairs to stop leakage in several areas of the building especially the leaks in Child Development Center.

Energy efficient lighting

Replace Computers

HVAC Repairs

Boiler Repairs

Install plumbing, sink and drainage in senior activity room for sanitary reasons

Painters to update teen, senior and child development areas

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Page 5 Effective May 2016

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: Neighborhood House's vision is to provide individuals with the opportunities to enhance the quality of their lives. We do this through are core programs of Child Development Center, Youth Development, Family Services, and our Four Seasons Seniors Program.

The Child Development Children provides children from ages six weeks through twelve years old with a safe, nuturing learning environment. We utilize Reggio Amelia Curriculum in the classroom. This curriculum along with age's and stages questionnaires let us know it children are meeting their developmental milestones at the appropriate time.

Our Youth Development Program provides children and teens with a positive alternative to risky situations and environments prevalent in low-income neighborhoods. Our educationally focused program is preparing youth for success in college, work and life. We track our progress through a variety of tools including internal assessments to gage their emotional well-being and their academic performance. Also, we utilize the Jefferson County Public School Cascades system that monitors grades, attendance and test scores.

Through Family Services, we provide a variety of resources and activities to support adults and families in our neighborhood. Our Family Services Manager works with individuals to help the develop and achieve goals to improve the quality of their lives. The program provides family engagement opportunities and wellness activities.

The Four Seasons Senior Program improves the quality of life for some of our neighborhood's most vulnerable citizens-senior adults. Our program supports physical and emotional health as well as independence for our senior adults. We monitor this process through the use of self reporting, reduction in hospitalizations and quality of life

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.

Metro Government Senior Nutrition Program-This partnership feeds our seniors adults a hot meal daily.

Excellence Academy-Partnership for training and resources for our Child Development Center

Metro United Way-Partners in support of our Child Development Center, Seniors Program and our Youth Development Program.

Portland NOW-Neighborhood Association meets at Neighborhood House every month.

Dare to Care-Provides food for our Emergency Food Band and meals for our youth 6 days a week.

BLOCS (Metro Gov/MUW) Our Youth Development Program is a "BLOC STAR" through our partnership our workers receive training and support.

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SECTION 6 - PROGRAM/PROJECT BUDGET SUMMARY

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

Program/Project Expanses	Column 1 Proposed Metro Pands	Column 2 Nosi Metro Funds	Column (1+2)=3 Total Funds
A: Personnel Costs Including Benefits			a to design and a to
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			**************************************
F: Client Assistance (See Detailed List on Page 8)			~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (See Detailed List on Page 8)			
J: Machinery & Equipment			
K: Capital Project	50,000	49,374	99,374
L: Other Expenses (See Detailed List on Page 8)			
*TOTAL PROGRAM/PROJECT FUNDS	50,000	49,374	99,374
The Manager of Manager (50 %	50 %	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)	**************************************
Fees Collected from Program Participants	4 .
Other (please specify) Donations	49.374
Easter De Grander Fall (Sea) was est it for factoristics	849.374

Page 7 Effective May 2016

^{*}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
	:		
Total	50,000		

Page 8 Effective May 2016

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-Building and Grounds Committee	\$6,000	12 mtgs-8 volunteers/\$62.50mtg
Volunteers for various daily projects	\$28,800	3v daily @ \$200/day x48wks
Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution &Other In Kind)	\$34,000	

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

Agency Fiscal Year Start Date: July 1, 2018 thru June 30, 2019
Does your Agency anticipate a significant increase or decrease in your budget from the current fiscal year to the budget projected for next fiscal year? NO YES
If YES, please explain:

Page 9 Effective May 2016

SECTION 7 - CERTIFICATIONS & ASSURANCES

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

Standard Assurances

- Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
- Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the approval is automatically revoked and the funds will not be disbursed to our organization.
- 3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
- 4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
- 5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
- Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
- Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end.
- 8. Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
- 9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
- 10. Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
- 11. Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

Standard Certifications

- 1. The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
- The Agency has a written Affirmative Action/Equal Opportunity Policy.
- 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.
- 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 staff or any Louisville Metro Government employee.

SECTION 8 - CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:

Legal Signatory: (please print):

Phone: (502) 774-2322

Extension: 222

Email: ylivers@nhky.org

Page 10

in and around Portland, one of the most Neighborhood Hause has provided vital impoverished communities in Louisville. we serve infants through senior adults services to families since 1896. Today

cycle of poverty for our children Our VISION is to break the and families.

enhance the quality of their lives. individuals with opportunities to Our MISSION is to provide







201 North 25th Street, Louisville, KY 40212 502.774.2322

Education is the key to breaking the

focused programs are providing our eycle of poverty. Our educationally

brighter future.

www.nhky.org

Neighborhood House is a 501 (c) non-profit agency.





Inspiring Life Dreams Teaching Life Skills Meeting Life Needs



Neighborhood House is breaking the cycle of poverty for children and families in the Portland community and surrounding neighborhoods in West Louisville.

By meeting Life Needs, teaching Life Skills and inspiring Life Dreams, we are changing lives and the future of our community!



for children 6 weeks to 12 years old and prepares preschoolers to enter kindergarten ready to succeed. We work with our families to engage them in their child's learning and development.

THE YOUTH DEVELOPMENT PROGRAM

prepares our children and teens for success in college, work and life by providing academic support, life skills training, and social and cultural enrichment.

THE FOUR SEASONS PROGRAM improves quality of life for senior adults by supporting health, socialization and independence.

OUR FAMILY SERVICES operates an emergency food bank and provides life and financial coaching, advocacy, family engagement and wellness activities.

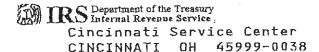


DUR COMMUNITY NEEDS US

- 55% of our children live below the federal
- 46% of adults in Portland do not have a high school degree
- 48% of our families make less than \$15,000 per year

FOGETHER WE CAN MAKE A DIFFERENCE

- 100% of our preschoolers are graduating ready to succeed in kindergarten.
- Our youth are improving academically, gaining a broader view of the world and developing college or career goals.
- Parents are strangthening their families and building greater stability at home.
- Senior adults are experiencing improved health and enhanced quality of life.



In reply refer to: 0752161033 Feb. 11, 2013 LTR 4168C 0 000000 00

> 00014734 BODC: TE

NEIGHBORHOOD HOUSE 201 N 25TH ST LOUISVILLE KY 40212

46127

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

Dear Taxpayer:

This is in response to your Jan. 31, 2013, 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 Ocotber 1972.

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.

NEIGHBORHOOD HOUSE 201 N 25TH ST LOUISVILLE KY 40212

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

Sincerely yours,

Stephen E. Paxton

Saghen E. Patton

Operations Manager, AM Operations 3

IRS Exempt
status
petermination
Letter





Organization Budget Summary

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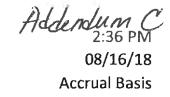
Contributions	\$ 430,160
Special Events	\$ 150,000
Grants	\$ 281,000
MUW	\$ 200,143
Memberships	\$ 18,220
Childcare Tuition	\$ 479,211
"STARS" Funding	\$ 8,246
Nutrition Reimbursement	\$ 63,617
Miscellaneous Income	\$ 2,370
Rental Income	\$ 70,308
TOTAL INCOME	\$ 1,703,275

EXPENSE

Program Salaries & Benefits	\$ 1,235,929
Administrative Salaries & Benefits	\$ 97,159
Program Activities & Supplies	\$ 73,105
Staff Hiring & Development	\$ 13,350
Professional Fees	\$ 16,410
Office Expense	\$ 11,140
Board Training & Meetings	\$ 400
Food & Nutrition Supplies	\$ 78,780
Facilities Maintenance	\$ 120,382
Development Support	\$ 17,060
Taxes & Fees	\$ 1,500
Legal & Accounting	\$ 12,600
Association Fees	\$ 2,500
IT Support	\$ 22,960
TOTAL EXPENSES	\$ 1,703,275



Neighborhood House Income Statement July 1, 2017-June 30, 2018



Ordinary Income/Expense

I	n	C	O	n	ì	e

4000 · Contributions	\$ 228,802
4001 · Fundraising Activity Other	\$ 9,382
4002 · Special Events	\$ 139,911
4003 Grants	\$ 427,500
4004 · Child / Family Support	\$ 2,020
4007 · Staff Support	\$ 1,855
4010 · Metro United Way	\$ 185,673
4015 · Memberships / Fees	\$ 11,059
4025 · Childcare Tuition	\$ 379,257
4026 · "STARS" Funding	\$ 8,246
4030 · Nutrition Reimbursement	\$ 59,337
4055 · Investment Income	\$ 27
4065 · Vending	\$ 561
4110 · Miscellaneous Income	\$ 10
4111 · Rental Income	\$ 70,483
Total Income	\$ 1,524,122
Gross Profit	\$ 1,524,122





Neighborhood House Income Statement July 1, 2017-June 30, 2018

2:36 PM 08/16/18 Accrual Basis

Expense

.	
6000 · Gross Wages	\$ 822,259
6005 · Contract Labor (Programs)	\$ 19,634
6007 · Contract Labor (Non-Program)	\$ 54,488
6010 · Program Events/Activities	\$ 14,675
6011 · Program Special Events	\$ 11,694
6015 · Health Insurance	\$ 40,913
6016 · Retirement Plan	\$ 12,709
6018 · Unemployment Cost	\$ 2,874
6025 · FICA & Medicare	\$ 60,711
6026 · Workers Comp Insurance	\$ 9,467
6027 · Payroll Fees	\$ 5,484
6029 · Professional Development	\$ 3,679
6030 · Recruitment/Hiring	\$ 9,850
6040 · Professional Fees	\$ 11,211
6045 · Miscellaneous	\$ 1,725
6055 · Office Expenses	\$ 3,913
6056 · Printing	\$ 1,198
6057 · Postage	\$ 1,538
6058 · IT Support & Maintenance	\$ 6,583
6059 · Business Exp	\$ 666
6060 · Program Supplies	\$ 13,129
6061 · Food	\$ 64,145
6062 · Cheers for Careers	\$ 4,924
6063 · Board Training/Mtgs	\$ 649
6064 · Nutrition Supplies	\$ 5,886
6066 · Program Incentives	\$ 202
6080 · Building & Ground Supplies	\$ 13,103
6085 · Telephone	\$ 8,134
6095 · Small Equipment Purchases	\$ 4,110
6100 · Utilities	\$ 46,816
6105 · Property Repairs & Maintenance	\$ 22,312
6110 · Property & Casualty Insurance	\$ 27,292



Neighborhood House Income Statement July 1, 2017-June 30, 2018

2:36 PM 08/16/18 Accrual Basis

6120 · Licensing Expense	\$	265
6121 · Vehicle/Transportation	\$	5,665
6122 Mileage Reimbursement	\$	138
6130 · Staff Support Expense	\$	1,936
6140 · Association Fees	\$	430
6150 · Management Fee Expense	\$	99,338
6155 · Legal and Accounting Fees	\$	12,600
6160 · Donor Development	\$	4,238
6176 · Marketing	\$	1,537
6180 - Bank Charges	\$	886
6185 · Interest Expense	\$	638
6189 · Amortization Expense	\$	(2)
6300 · Child/Family Support	\$	1,519
6500 · Taxes and Fees	\$	
Total Expense	•	
	\$	1,435,163
Net Ordinary Income	\$	1,435,163
·		-
Net Ordinary Income	\$	-
Net Ordinary Income Other Income/Expense	\$	-
Net Ordinary Income Other Income/Expense Other Income	\$	88,958
Net Ordinary Income Other Income/Expense Other Income 4607 · Other Incomes	\$ 3 \$	88,958 53,181
Net Ordinary Income Other Income/Expense Other Income 4607 · Other Incomes Total Other Income	\$ 3 \$	88,958 53,181
Net Ordinary Income Other Income/Expense Other Income 4607 · Other Incomes Total Other Income Other Expense	\$ \$ \$	53,181 53,181
Net Ordinary Income Other Income/Expense Other Income 4607 · Other Incomes Total Other Income Other Expense 6607 · Other Expenses	\$ \$ \$	53,181 53,181 (83)
Net Ordinary Income Other Income/Expense Other Income 4607 · Other Incomes Total Other Income Other Expense 6607 · Other Expenses 6999 · Capital Expenditure	\$ \$ \$	53,181 53,181 (83) 41,708
Net Ordinary Income Other Income/Expense Other Income 4607 · Other Incomes Total Other Income Other Expense 6607 · Other Expenses 6999 · Capital Expenditure Total Other Expense	\$ \$ \$ \$	53,181 53,181 (83) 41,708 41,624

Addendum 1)

Form

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

► Information about Form 990 and its instructions is at www.irs.gov/form990.

2016 Open to Public Inspection

OMB No. 1545-0047

4	For the	e 2016 c		ar, or tax year beginningO	I/01/16 , and endin	g 06/30/	1/			_
В	Check if ap	pplicable:	C Name of org					D Employer	identification number	
A	Address cl	hange		Neighborh	ood House, Inc.					
Ξ,	Name cha	nne	Doing busine							
=				street (or P.O. box if mail is not delive	ered to street address)		Room/suite	502-	774-2322	
	Initial retur			. 25th St., state or province, country, and ZIP or	r foreign postal code			302	114-2322	_
	Final retur terminated		1000						. 1 621 72	2
	Amended	return	Louis		KY 40212			G Gross rece	eipts\$ 1,631,72	_
=				ddress of principal officer:			H(a) Is this a gr	oup return for s	ubordinates Yes X	No
	Application	n pending	Pam I						uded? Yes N	No
				N. 25th St.			H(b) Are all sut		utied:	•0
			7,501-05	sville	KY 40212		IT "No,	attach a list.	(see instructions)	
1	Tax-exen	npt status:	X 501((c)(3) 501(c) () ◀	(insert no.) 4947(a)(1) or	527				
J	Website:	: > W	ww.nhk	y.org			H(c) Group exe			_
K	Form of o	organization	: X Corpora	ation Trust Association	Other >	L	Year of formation: 1	896	M State of legal domicile: K	<u>Y</u>
P	art I	Sı	ımmary							
	T			organization's mission or mos	st significant activities:					
9		The	mission	organization's mission or mos n of Neighborhood	House is to pro	vide indi	viduals w	rith		
ano		oppo	rtuniti	es to enhance the	e quality of the	ir lives.				
Activities & Governance										
ò	20	heck th	is hox	if the organization discontinu	ued its operations or dispo-	sed of more tha	n 25% of its net	assets.		
O				embers of the governing body	Page 1 to 1 t			1 - 1	16	
S	1			ent voting members of the go					16	
itie				viduals employed in calendar					75	
÷								···	425	
Ā				nteers (estimate if necessary						0
	1			ness revenue from Part VIII,				1		Ö
	b l	Net unre	lated busine	ess taxable income from Forn	n 990-1, line 34		Prior Ye		Current Year	<u> </u>
	0 0	Contribu	tions and ar	ants (Part VIII, line 1h)				1,876	986,70	6
Revenue				enue (Part VIII, line 2g)				4,143	447,65	
ver	1	9770			4 and 7d)			1,448		6
Re				Part VIII, column (A), lines 3,				9,173	158,01	_
	1			VIII, column (A), lines 5, 6d,				6,640	1,592,43	
	+			lines 8 through 11 (must equ			1,02	0,040	1,002,40	<u>_</u>
	1			mounts paid (Part IX, column						ň
				or members (Part IX, column			0.7	5,603	1,084,50	0
es	15 3	Salaries	, other comp	pensation, employee benefits sing fees (Part IX, column (A penses (Part IX, column (D),	(Part IX, column (A), lines	5–10)	97.	5,603	1,004,30	<u> </u>
sus	16aF	Professi	onal fundrais	sing fees (Part IX, column (A), line 11e)					U
Expenses	b T	Total fur	ndraising exp	penses (Part IX, column (D),	line 25) ▶ 1./5	,825	0.4	7 010	000 44	_
ш	17 (Other ex	(Pai	rt IX, column (A), lines 11a-1	11a, 11f–24e)			7,910	802,44	
	18	Total ex	penses. Add	l lines 13-17 (must equal Pa	rt IX, column (A), line 25)			3,513	1,886,95	4
	19 F	Revenue	e less expen	ises. Subtract line 18 from lin	e 12			6,873	-294,52	0
Net Assets or Fund Balances	2		10 Magas 1000000				Beginning of Cu		End of Year	2
Sset	20		sets (Part X,					9,672	2,244,70	
A	21		bilities (Part					5,456	75,00	
				alances. Subtract line 21 from	m line 20		2,46	4,216	2,169,69	0
	art II		ignature l							
U	Inder pe	enalties o	f perjury, I ded	clare that I have examined this re	eturn, including accompanying	schedules and s	tatements, and to	the best of	my knowledge and belief	, it is
tr	ue, corr	ect, and	complete. De	claration of preparer (other than	officer) is based on all informa	ation of which pre	parer nas any kno	wieage.		
Sig	gn		Signature of office	ber				Date		
He	_	1	Pam R	ice		Exec	utive Di	recto	r	
			Type or print nar							
		Print/Ty	pe preparer's na	me	Preparer's signature		Date	Check	if PTIN	
Pai	id	Barba	ra Lasky		Barbara Lasky		01/26	18 self-em	ployed P00015280	
Pre	eparer	Firm's n		Baldwin CPAs,	PLLC			Firm's EIN	20-1416603	3
	e Only		u.110 /	943 S 1st Str						
		Firm's a	ddress b	Louisville, K				Phone no.	502-584-979	93
Ma	v the IF			rn with the preparer shown al						0
1710	y 010 H	0.301	-55 4110 10101	properor onound	()					

m 990 (2016) Neighborhood House, Inc.	Page 2
Part III Statement of Program Service Accomplishments	E27
Check if Schedule O contains a response or note to any line in this Part III	<u>X</u>
Briefly describe the organization's mission:	
See Schedule O	
Did the organization undertake any significant program services during the year which were not listed on the	□ , , , , , , , , , , , , , , , , , , ,
prior Form 990 or 990-EZ?	Yes X No
If "Yes," describe these new services on Schedule O.	
Did the organization cease conducting, or make significant changes in how it conducts, any program	Yes X No
services?	Tes A NO
If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measure	ed by
expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o	of by
the total expenses, and revenue, if any, for each program service reported.	11013,
the total expenses, and revenue, if any, for each program service reported.	
a (Code:)(Expenses \$ 780,956 including grants of \$) (Revenue \$ Our Child Development Center makes a lifelong difference by children the first five years of their lives as well as engagements. Our children can continue with us through age 12 is school-time class or they can transition to our Youth Development our focus is to ensure children meet their developmental mile ready to succeed when they start kindergarten, and develop a for learning. We strengthen the impact for our children by parents in the learning process, recognizing parents are the for their children. Our Center is a part of the elite Excel and Stars for Kids Now program.	impacting aging their in an out-of- opment Program lestones, are a lifelong love engaging their e first teache

the (Code:) (Expenses \$ 427,332 including grants of \$) (Revenue \$ Our Youth Development Program provides activities to 1st - 1 help them succeed in school and life. We provide academic scharacter development and life skills training, cultural and activities, and college and career readiness services. Pare leadership and support for our program through their Council them support their children and provide additional family er activities. We provide nutritious meals 6 days/ week and a learning focused environment to help our youth learn to dreat and to develop the skills and confidence to achieve their dreat and to develop the skills and confidence to achieve their dreat strength of the skills and confidence to achieve their dreat strength of the skills and confidence to achieve their dreat strength of the skills and confidence to achieve their dreat strength of the skills and confidence to achieve their dreat strength of the skills and confidence to achieve their dreat strength of the skills and confidence to achieve their dreat strength of the skills and confidence to achieve their dreat strength of the skills and confidence to achieve their dreat strength of the skills and confidence to achieve their dreat strength of the skills and confidence to achieve their dreat strength of the skills and the skills and the skills and the skills are strength of the skills and the skills are skills.	support, i recreational ents provide l, which helps ngagement safe, nurturinam, to set goal
*	, . , ,
(C) D) (E) C) C) C) C) C) C) C)	1
Our Family Services Department engages with many other commuto provide a variety of services to our community including college students, parents and senior citizens. We know that the entire family and community is key to having a great implication of their children. Four Seasons provides senior adult supports, workshops, physical and recreational activities, address their physical, social and emotional well-being and quality of their lives. Our Emergency Food Bank provides for basic needs as well as providing referrals for other services agencies help provide health services, workshops and basic and young adults can participate in financial workshops, lives	young adults, t strengthening pact on the lts with and meals to improve the or immediate, es. Partner needs. Parent
ld Other program services (Describe in Schedule O.)	
(Expenses \$ 16,636 including grants of\$) (Revenue \$)
le Total program service expenses ► 1,447,806	
	Form 990 (2016)

Form 990 (2016) Neighborhood House, Inc.

Part IV Checklist of Required Schedules

Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
U	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
_	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
7		7		Х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	-		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			v
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	-		
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
8	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
ъ	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	The state of the s	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	170		
'	the organization's separate of consolidated limit following the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	ĺ
125	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
!Za		12a	x	
	Schedule D, Parts XI and XII	120	-41	\vdash
D		12b	[X
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		-	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	4		v
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or		1	3.5
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	-	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			1
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
		-	00/	100161

	n 990 (2016) Neighborhood House, Inc. ert IV Checklist of Required Schedules (continued)			age 4
	are 14 Official of 100 and of 100		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		_	
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than]		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or	l		.,
	disqualified persons? If "Yes," complete Schedule L, Part II	26	-	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	ł		
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			,,
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			17
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			J.
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	₹.	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	ļ. —
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		-
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	24		
22	Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		X
32	· · · · · · · · · · · · · · · · · · ·	32		x
22	complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	"	33		Х
34	was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	33		A.
34	NA 15 11/1/ A	34		Х
35a	or IV, and Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ooa b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	334		-
U	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	335		
36		36		X
37	related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-50		<u> </u>
3 1	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
		37		х
38	Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		-	<u> </u>
	192 Note: All Form 990 filers are required to complete Schedule O	20	v	

19? Note. All Form 990 filers are required to complete Schedule O.

Form 990 (2016) Neighborhood House, Inc.

Pa	ort V Statements Regarding Other IRS Filings and Tax Compliance	t \ /				
	Check if Schedule O contains a response or note to any line in this Pr	an v		<u>-</u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Enter -0- if not applicable	1a	12		res	NO
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	-		
c	Did the organization comply with backup withholding rules for reportable payments to vendors as					
Ī	reportable gaming (gambling) winnings to prize winners?	IU		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	 I i	***************************************	10		
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	75			ĺ
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax			2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruc		· · · · · · · · · · · · · · · · · · ·		-	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	жопо,		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schere	dule Ω		3b		
4a			thority	3.2		
	over, a financial account in a foreign country (such as a bank account, securities account, or other		•		li	
	account)?		,	4a		Х
b	If "Yes," enter the name of the foreign country: ▶		*******************			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financian	cial Acc	counts			
	(FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	ar?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra		n?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5¢		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and of	id the				
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contri	butions	or			
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	for god	ods			
	and services provided to the payor?		******	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Х	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which	it was				
	required to file Form 8282?	yy	***************************************	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal bene			7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file			7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization approximation of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes,			7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund main sponsoring organization have excess business holdings at any time during the year?	tained i	by the			
9	Sponsoring organizations maintaining donor advised funds.	• • • • • • •		8		-
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	•	•••••	9b		
0	Section 501(c)(7) organizations. Enter:		• • • • • • • • • • • • • • • • • • • •			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		7		
1	Section 501(c)(12) organizations. Enter:			7 1		
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources			7 1		
	against amounts due or received from them.)	11b				
2a		Form 1	041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
3	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which					
	the organization is licensed to issue qualified health plans	13b		_		
C	Enter the amount of reserves on hand	13c				
4a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sche	dule 0		14b		

Form	n 990 (2016) Neighborhood House, Inc.		D	age 6
	ort VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and f		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O			
	Charle if Cabadula O anatoine a secondary annota to assetting in this Book 37		เมอแน	X
Sec	tion A. Governing Body and Management			_A
	MONTAL OUTCINING DOGY WING INGININGSCINETE		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 16		162	NO
7 60.	If there are material differences in voting rights among members of the governing body, or	-		
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b				
2	· · · · · · · · · · · · · · · · · · ·	4		
~	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			v
3	any other officer, director, trustee, or key employee?	2		<u>X</u>
J	Did the organization delegate control over management duties customarily performed by or under the direct			tr
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
6	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		
о 7а	Did the organization have members or stockholders?	6		<u>X</u>
1 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_ '		77
_	one or more members of the governing body?	7a		<u>X</u>
Þ	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow	/ing		
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u>
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	<u>ue Co</u>	ode.)	
		$\overline{}$	Yes	
	Did the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
_	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
i2a		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
Ç	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	Х	
3	Did the organization have a written whistleblower policy?	13	Х	
4	Did the organization have a written document retention and destruction policy?	14	X	
5	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	٠	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filed ▶ KY			
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain in Schedule O)			
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
	financial statements available to the public during the tax year.			
0	State the name, address, and telephone number of the person who possesses the organization's books and records:			
Ne	eighborhood House, Inc. 201 N. 25th St.			
Lo	ouisville KY 40212 502	-77	4-2	322

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and
	Independent Contractors
	Check if Schedule O contains a response or note to any line in this Part VII
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
1a Complete	this table for all persons required to be listed. Report compensation for the calendar year ending with or within the

- organization's tax year.

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."

compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)			(0	-			(D)	(E)	(F)
Name and Title	hours per (do week box (list any offi		Position (do not check more than one box, unless person is both an officer and a director/trustee)				an	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Kevin Fuqua	4 00									
President	1.00	x		X				0	0	0
(2) Kelly Bryant	1 00									
At Large	1.00 0.00	x		X				o	0	0
(3) Celia Manlove	0.00									. .
	1.00							_		_
Vice President	0.00	X	_	X				0	0	0
(4) Vicki Hines-Mar										
Secretary	1.00 0.00	х		x				0	0	0
(5) Debbie Held	1 00				ŀ					
Treasurer	1.00	x		х				0	0	0
(6) Jim Rogers	1 00									
Past President	1.00	х		x				0	0	0
(7) Peter Thurman,	Jr.									
Board Member	1.00 0.00	x						0	0	0
(8) Hollis Smith										
	1.00								0	0
Board Member (9) Mike LaVera	0.00	X	\vdash					0	0	0
(a) WIKE MUACIA	1.00									
Board Member	0.00	X						0	0	0
(10)Nancy Johnson										
Board Member	1.00 0.00	x						0	0	0
(11)Wendy Dowd										
Board Member	1.00	x						o	0	0

Form 990 (2016) Neighborhood House, Inc.

Part VII Section A. Officer (A) Name and title	(B) Average hours per week (list any hours for	(did box	o not o x, unk	Pos check ess pe	C) intion more rson lirecto	than o	one nan nee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estima amoun othe compens from the	ted t of r sation he	
	related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		-	organiza and rela organiza	eted	
(12) Kathi Stearm	an 1.00												
Board Member (13) Rob Givens	0.00	Х		_				0	0				0
Board Member	1.00	X						0	0				0
(14) Ted Nixon													
Board Member	0.00	х						0	0				0
(15) Christi Lani		s	n										
Board Member	0.00	х						0	0				0
(16) Carol Coldin													
Board Member	1.00	x						0	0				0
(17) Pam Rice													
Executive Director	0.00			X				86,068	0				0
												•	
1b Sub-total				<u></u>				86,068					
c Total from continuation sh	eets to Part VII	, Se	ctio	n A									
d Total (add lines 1b and 1c) Total number of individuals (including but no	t lim	ited	to th	ose	liste	<u>▶</u> d ab	86,068 pove) who received more		<u> </u>			
reportable compensation fro	m the organizati	ion I	<u>0</u>									Yes	No
3 Did the organization list any employee on line 1a? If "Yes											3		X
4 For any individual listed on li organization and related org	ine 1a, is the sui anizations great	m of er th	repo an \$	ortab 3150	le c ,000	ompe ? <i> f</i>	ensa "Yes	ation and other compensa s," complete Schedule J fo	tion from the or such				
individual	1a receive or a	ccru	e co	 mpe	nsa	lion f	rom	any unrelated organization	on or individual		4		X
for services rendered to the Section B. Independent Contract		"Ye	s," c	omp	lete	Sche	edul	e J for such person			5	-	Х
1 Complete this table for your	five highest con												
compensation from the orga	nization. Report (A) d business address	con	npen	satio	on to	r the	cal		(B) tion of services	tax year		(C) mperisa	tion
Name an	u pusilicos adulcos							Descrip	NOTION SERVICES		00	пропав	3011
								· · · -					
								<u> </u>					
2 Total number of independen													
received more than \$100,00	υ οτ compensati	on f	om	rue (лgа	nızat	ıon	<u> </u>	0			000	

Form 990 (2016) Neighborhood House, Inc.

	t VI	II Statement of Revenue Check if Schedule	O contair	ns a response	or note to any line	in this Part VIII		
		CHOOK II CONGGGIO	O DOMAN		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Program Service Revenue Contributions, Giffs, Grants and Other Similar Amounts	1a	Federated campaigns	1a	201,842		Teveride		012 011
S non		Membership dues	1b					
Am.		Fundraising events	1c	31,914				
E E		Related organizations	1d					
ωE		Government grants (contributions)	1e					
PS.		All other contributions, gifts, grants,						
		and similar amounts not included above	1f	752,950				
들임	q	Noncash contributions included in lines 1	la-1f: \$	118,633				
O E		Total. Add lines 1a-1f			986,706			
2		•		Busn, Code				
6	2a	Day Care Client Fe	es		380,900	380,900		
ar a	b	Food Program Fees			55,398	55,398		
3	C	Other program fees			11,357	11,357		
Se	d	= ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
E	е							
60	f	All other program service rev	enue					
مَ		Total. Add lines 2a-2f			447,655			
	3	Investment income (including	g dividends,	interest,				
		and other similar amounts)			56			56
	4	Income from investment of ta	ax-exempt be	ond proceed				
- 1	5	Royalties						
		(i) Real		(ii) Personal				
	6a	Gross rents 70,	, 459					
	b	Less: rental exps.						
	C	Rental inc. or (loss 70,	, 459					
		Net rental income or (loss) Gross amount from	· · · · · · · · · · · · · · · · · · ·		70,459			70,459
l l		sales of assets (i) Securities	5	(ii) Other				
		other than inventory						
	b	Less: cost or other						
		basis & sales exps						
		Gain or (loss)		-				
		Net gain or (loss)						
enne		Gross income from fundraising ev						
/en		(not including \$ 31,						
Re Re		of contributions reported on line 1		106 276				
Other Rev		See Part IV, line 18		126,376				
8		Less: direct expenses		39,288	07 000			87,088
		Net income or (loss) from fur		ents	87,088			07,000
- 1		Gross income from gaming activit						
		See Part IV, line 19						
		Less: direct expenses		es				
- ∤.		Net income or (loss) from ga		es				
	IVa	Gross sales of inventory, less returns and allowances	_	ĺ				
	L		a					
		Less: cost of goods sold Net income or (loss) from sal	L	OD/				
H	C	Miscellaneous Revenue		Busn. Code				
	112	Other Income			470	470		
	b			.	***			
1		*						
	q	All other revenue			+			
		Total. Add lines 11a-11d			470			
},		Total revenue. See instructi			1,592,434	448,125	0	157,603

Statement of Functional Expenses Part IX

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses (D) Fundraising (A) Total expenses (B) Program service Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 121,030 70,138 771,103 962,271 Other salaries and wages Pension plan accruals and contributions (include 14,992 34,309 1,886 1,093 12,013 section 401(k) and 403(b) employer contributions) 21,795 12,187 327 Other employee benefits 5,438 11,473 56,026 72,937 Payroll taxes 10 Fees for services (non-employees): 35,997 35,996 30,855 102,848 Management Legal 11,500 11,500 Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, column 3,501 31,207 34,708 (A) amount, list line 11g expenses on Schedule O.) Advertising and promotion 12 2,090 5,182 9,831 2,559 Office expenses 13 117 6,957 5,090 12,164 Information technology 14 15 Royalties 5,544 60,952 9,568 76,064 Occupancy 16 1,563 127 2,716 4,406 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 90 3,785 3.116 6,991 Conferences, conventions, and meetings 19 22 245 38 305 20 Interest Payments to affiliates 21 11,547 126,949 19,925 158,421 Depreciation, depletion, and amortization 22 3,935 2,281 31,288 25,072 23 Insurance 24 Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 269,969 269,969 Program Expenses 2,767 38,355 14,219 55,341 Contract Labor 2,646 7,980 18,301 7.675 Other Expenses C 560 6,159 967 Telephone 7,686 1,924 550 2,622 148 e All other expenses 175,825 1,886,954 1,447,806 263,323 25 Total functional expenses. Add lines 1 through 24e . . Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2016) Neighborhood House, Inc.

Part 2						····
	Check if Schedule O contains a response or no	ote to any	line in this Part X			
			į	(A) Beginning of year		(B) End of year
				135,185	1	106,323
1	Cash—non-interest bearing			133,163		100,323
2	Savings and temporary cash investments			355,561	2	176,918
3	Pledges and grants receivable, net				3	27,648
4	Accounts receivable, net		·:····	39,878	4	21,040
5	Loans and other receivables from current and forme					
ĺ	trustees, key employees, and highest compensated				-	
	Complete Part II of Schedule L				5	
6	Loans and other receivables from other disqualified				1	
	4958(f)(1)), persons described in section 4958(c)(3)					
	sponsoring organizations of section 501(c)(9) volunt					
216	organizations (see instructions). Complete Part II of		6			
7 7	Notes and loans receivable, net				7	
₹ 8	Inventories for sale or use		8			
9	Prepaid expenses and deferred charges				9	
10a	a Land, buildings, and equipment: cost or		4 7 50 200			
	other basis. Complete Part VI of Schedule D	10a	4,152,300	1 007 007		1 001 760
b	other basis. Complete Part VI of Schedule D Less: accumulated depreciation	10b	2,250,540	1,987,297		1,901,760
11	Investments—publicly traded securities	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		11		
12	Investments—other securities. See Part IV, line 11			12		
13	Investments—program-related. See Part IV, line 11			13		
14	Intangible assets	,		44 951	14	22 052
15	Other assets. See Part IV, line 11	,,,,,,,	41,751	15	32,053	
16	Total assets. Add lines 1 through 15 (must equal lin			2,559,672 82,152	16	2,244,702
17	Accounts payable and accrued expenses		82,152	17	75,006	
18	Grants payable			18		
19	Deferred revenue		,,		19	
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Complete Part			· · · · · ·	21	
<u>ဖွ</u> 22	, ,					
Liabilities 22	trustees, key employees, highest compensated emp		nd			
g	disqualified persons, Complete Part II of Schedule L			12 204	22	
23	Secured mortgages and notes payable to unrelated			13,304		
24	Unsecured notes and loans payable to unrelated thi				24	
25						
ĺ	parties, and other liabilities not included on lines 17-					
	of Schedule D			OF 456	25	75 000
26				95,456	26	75,006
so.	Organizations that follow SFAS 117 (ASC 958), o		and X and			
Fund Balances 82 83 84 85 86 87 88	complete lines 27 through 29, and lines 33 and 3	34.		5 040 700		1 074 706
[27				1,948,799		1,874,726
뜨 28				515,417	28	294,970
Ē 29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC				29	
<u>ام</u>		958), che	eck here 🔪 and			
	complete lines 30 through 34.					
ğ 30		,		30		
¥ 31					31	
Net Assets 30 31 32	•			0 464 016	32	2 160 600
33		2,464,216		2,169,696		
34	Total liabilities and net assets/fund balances			2,559,672	34	2,244,702

Forn	990 (2016) Neighborhood House, Inc.				Pa	ge 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,59		
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,88	36,	954
3	Revenue less expenses. Subtract line 2 from line 1	I -		-29)4,	520
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,46	54,	216
5	Net unrealized gains (losses) on investments	5	L			
6	Donated services and use of facilities	6				
7	Investment expenses					
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		2,16	59,	696
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			· · · · · · · · ·		. Ш.
		_			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			į į		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O,					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O.					
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
	the Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		<u> </u>
				Form	990	(2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 5D1(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2016

ame	of th	e organization					- Photo	ber	
		_	Neighborhood	d House, Inc.					
Pa	ert I	Reas		/ Status (All organizatio	ns must	comple	ete this part.) See instr	uctions.	
he	orga	nization is no	t a private foundation beca	use it is: (For lines 1 through	12, check	only one I	oox.)		
1		A church, co	nvention of churches, or as	sociation of churches describ	ed in sect	ion 170(o)(1)(A)(i).		
2		A school des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E (F	Form 990 o	or 990-E2	().)		
3		A hospital or	a cooperative hospital sen	vice organization described in	section 1	70(b)(1)	A)(iii).		
4		A medical re	search organization operat	ed in conjunction with a hospi	tal describ	ed in sec	tion 170(b)(1)(A)(iii). Enter	the hospital's name,	
		city, and stat	e:		<i></i>				<i>.</i>
5		An organizat	ion operated for the benefit	t of a college or university owr	ned or ope	rated by	a governmental unit describe	ed in	
			(b)(1)(A)(iv). (Complete Pa						
6				governmental unit described i					
7	X		tion that normally receives a section 170(b)(1)(A)(vi). (a substantial part of its suppor Complete Part II.)	t from a g	overnmer	ntal unit or from the general	public	
8				170(b)(1)(A)(vi). (Complete					
9				escribed in section 170(b)(1)					
			or a non-land grant college	of agriculture (see instruction	ns). Enter t	the name	, city, and state of the colleg	е ог	
		university:							
10	Ш	An organizat	tion that normally receives:	(1) more than 33 1/3% of its s mpt functions—subject to cer	support iro tain evcen	m contrib tions and	utions, membership rees, ar 1 (2) no more than 33 1/3% :	na gross of its	
				and unrelated business taxable					
				30, 1975. See section 509(a					
11				d exclusively to test for public					
12				d exclusively for the benefit of					
				nizations described in section					
			_	that describes the type of sur					
	a			perated, supervised, or contro ower to regularly appoint or el				y giving	
				complete Part IV, Sections		any or me	directors or trustees or the		
	b			supervised or controlled in cor		ith its sur	ported organization(s), by h	aving	
		control o	r management of the supp	orting organization vested in the	he same p	ersons th	at control or manage the su	pported	
				te Part IV, Sections A and C			ū		
	С	Type III	functionally integrated. A	supporting organization oper	ated in co	nnection	with, and functionally integra	ited with,	
				structions). You must comp					
	d			ed. A supporting organization					
				ne organization generally mus must complete Part IV, Sec				liveness	
	e			eceived a written determination				III	
	-			on-functionally integrated sup					
	f	Enter the nu	mber of supported organiza	ations					
	g	Provide the I	following information about	the supported organization(s)					
(i)		ne of supported	(ii) EiN	(iii) Type of organization	(iv) Is the o		(v) Amount of monetary	(vi) Amount of	
	OF	ganization		(described on lines 110 above (see instructions))	listed in you docur		support (see instructions)	other support (see instructions)	
					Yes	No	,		
(A)									_
V V									
(B)									
					ļ		-		
(C)									
(D)									
(E)									_
					-				

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

	is regularly cutties of						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	77,085	60,817	72,977	127,814	126,376	465,069 5,978,150
2	Gross receipts from related activities, etc	(see instructions	<u> </u>	<u> </u>		12	2,215,487
3	First five years. If the Form 990 is for th			ourth or fifth tax ve			2,213,467
•	organization, check this box and stop he						▶ □
Sec	tion C. Computation of Public S	upport Perce	ntage				
4	Public support percentage for 2016 (line			mn (f))		14	81.98%
5	Public support percentage from 2015 Sci		no 14			15	85.08%
6a	33 1/3% support test-2016. If the orga		*********			, check this	•
	box and stop here. The organization qua	alifies as a publicly	supported organiz	ation			▶ X
b	33 1/3% support test—2015. If the orga	nization did not ch	neck a box on line 1	3 or 16a, and line	15 is 33 1/3% or i	more, check	
	this box and stop here. The organization						>
7a	10%-facts-and-circumstances test—20)16. If the organiz	ation did not check	a box on line 13,	16a, or 16b, and li	ne 14 is	
	10% or more, and if the organization mee	ets the "facts-and-	circumstances" test	t, check this box a	nd stop here. Ex	plain in	
	Part VI how the organization meets the "I	facts-and-circums	tances" test, The or	rganization qualifie	s as a publicly su	pported	
							▶ [
b	10%-facts-and-circumstances test20	115. If the organiz	ation did not check	a box on line 13, 1	16a, 16b, or 17a, a	and line	
	15 is 10% or more, and if the organization	n meets the "facts	-and-circumstances	s" test, check this l	box and stop her	e.	
	Explain in Part VI how the organization m	eets the "facts-ar	d-circumstances" to	est. The organizat	ion qualifies as a p	publicly	
							▶ _
8	Private foundation. If the organization d	id not check a box	k on line 13, 16a, 16	6b, 17a, or 17b, ch	eck this box and	see	
	instructions						
					Sche	dule A (Form 990	or 990-EZ) 2016
						-	,

Ρ	aq	e	3

Schedule A (Form 990 or 990-EZ) 2016 Neighborhood House, Inc.

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.)

~	if the organization rails to	o quality unde	i trie tests liste	u below, plea	se complete r	art II.)	
	tion A. Public Support		1 0200	4) 5544	1 40 0045	4 > 0040	
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		_				
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	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				1		
500	line 6.) tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(4) 2015	/a\ 2016	(D Total
		(a) 2012	(D) 2013	(6) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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,						
14	First five years. If the Form 990 is for th	le organization's f	first, second third	fourth, or fifth tax	vear as a section	n 501(c)(3)	
	organization, check this box and stop he	•		•	•		▶ □
Sec	tion C. Computation of Public S		entage	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-
15	Public support percentage for 2016 (line	8, column (f) divi	ded by line 13, col	umn (f))		15	%
16	Public support percentage from 2015 Sc	hedule A, Part III,	, line 15			16	%
Sec	tion D. Computation of Investm	<u>ient Income F</u>	Percentage				
17	Investment income percentage for 2016	(line 10c, column	(f) divided by line	13, column (f))	-	17	%
18	Investment income percentage from 201	5 Schedule A, Pa	art III, line 17			18	%
19a	33 1/3% support tests—2016. If the org	ganization did not	check the box on	line 14, and line	15 is more than 33	3 1/3%, and line	r—1
	17 is not more than 33 1/3%, check this			-		=	▶ □
b	33 1/3% support tests—2015. If the org						
	line 18 is not more than 33 1/3%, check		_			-	
20	Private foundation. If the organization of	did not check a bo	ox on line 14, 19a,	or 19b, check thi	s box and see ins	tructions	▶ □

Schedule A (Form 990 or 990-EZ) 2016

Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in 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).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in 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) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in 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?
- 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).
- 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.
- 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		
	J.		
	3b	:	
	3с		
	4a		
	4b		
	4с		
	5a		
	5b		
	5с		
		1	
	6		
	7		
	8		
	9a		
	9b		
	9с		
	4.0=		
	10a		
(Fo	10b m 990	or 990-l	EZ) 2016
	_		,

	ule A (Form 990 or 990-EZ) 2016 Neighborhood House, Inc.			Page 5
Pa	rt IV Supporting Organizations (continued)			·
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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?	11a		
	A family member of a person described in (a) above?	11b		<u> </u>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		<u> </u>
3601	ion B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		res	ND
	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			
2	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sect	supervised, or controlled the supporting organization. ion C. Type II Supporting Organizations	2		<u> </u>
Geci	ion o. Type it supporting organizations		Yes	Na
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		162	No
90	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).	1		
Sect	ion D. All Type III Supporting Organizations			
000.	ion b. An Type in dupporting digunizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	140
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			1
	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.	3		
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	uctions).		
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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (se	e instructio	ons).	
			,	
2 /	Activities Test, Answer (a) and (b) below.		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,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations, Answer (a) and (b) below.			
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 details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2016 Neighborhood House, Inc.			Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O		•	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on			
instructions. All other Type III non-functionally integrated supporting organizations	must c	complete Sections A throu	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 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			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			_
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount, Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally integra	ted Ty	pe III supporting organiza	tion (see
instructions).			

	nle A (Form 990 or 990-EZ) 2016 Neighborhood Hous			Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	izations (conunueu)	
Sect	ion D - Distributions			Current Year
_ 1	Amounts paid to supported organizations to accomplish exempt pur			
2	Amounts paid to perform activity that directly furthers exempt purpo	ses of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizations	nization is responsive		
	(provide details in Part VI). See instructions.	****		
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
	From 2013			
	From 2014			
	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
<u>i</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from			
	Section D, line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c.			
8_	Breakdown of line 7:			
a				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
e	Excess from 2016		0-1	(Farma 000 as 000 EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016

Part VI	Supplemental Information. Pr III, line 12; Part IV, Section A, li B, lines 1 and 2: Part IV, Section	ines 1, 2, 3b, 3c, 4b, 4 on C, line 1; Part IV, So /, Section B, line 1e; F	s required by Part II, lin c, 5a, 6, 9a, 9b, 9c, 11a ection D, lines 2 and 3; Part V, Section D, lines	rage 8 le 10; Part II, line 17a or 17b; Part la, 11b, and 11c; Part IV, Section Part IV, Section E, lines 1c, 2a, 2l 5, 6, and 8; and Part V, Section E instructions.)
Part	II, Line 10 - Other I	Income Detail		
Specia	al events revenue	\$	465,069	
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer Identification number

N	eighborhood House, Inc.		
Pa	rt I Organizations Maintaining Donor Advised	Funds or Other Similar Funds	s or Accounts.
	Complete if the organization answered "Yes"		(b) Funds and other accounts
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)	l .	
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year Did the organization inform all donors and donor advisors in writing	that the accets hold in depar advised	
5			Yes No
	funds are the organization's property, subject to the organization's Did the organization inform all grantees, donors, and donor adviso		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
6	only for charitable purposes and not for the benefit of the donor or		
	conferring impermissible private benefit?		
D-	rt II Conservation Easements.		
Г	Complete if the organization answered "Yes"	on Form 990, Part IV, line 7.	
3042	Purpose(s) of conservation easements held by the organization (c		
	Preservation of land for public use (e.g., recreation or education		important land area
	Protection of natural habitat	Preservation of a certified his	-
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified or	onservation contribution in the form of a	a conservation
_	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		I == I
	Number of conservation easements on a certified historic structure		
	Number of conservation easements included in (c) acquired after		
	And the second s		2d
3	Number of conservation easements modified, transferred, release	d, extinguished, or terminated by the or	ganization during the
	tax year ▶		
4	Number of states where property subject to conservation easemen	nt is located ▶	
5	Does the organization have a written policy regarding the periodic		
	violations, and enforcement of the conservation easements it hold	s?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handl	ling of violations, and enforcing conserv	ation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, handling of	of violations, and enforcing conservation	n easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above sa	tisfy the requirements of section 170(h)	(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation ea	asements in its revenue and expense st	tatement, and
	balance sheet, and include, if applicable, the text of the footnote to	o the organization's financial statements	s that describes the
	organization's accounting for conservation easements.	A. I U. A. San I Turner and Co.	Shor Cimilar Appata
Pa	ort III Organizations Maintaining Collections of Complete if the organization answered "Yes"	on Form 000 Part IV line 8	itner Similar Assets.
			· · · · · · · · · · · · · · · · · · ·
1a	If the organization elected, as permitted under SFAS 116 (ASC 95	58), not to report in its revenue stateme	nt and balance sheet
	works of art, historical treasures, or other similar assets held for pr		
	public service, provide, in Part XIII, the text of the footnote to its fire	nanciai statements that describes these	nd belongs shoot
Ь	If the organization elected, as permitted under SFAS 116 (ASC 95)	ob), to report in its revenue statement a	in furtherance of
	works of art, historical treasures, or other similar assets held for p		III IGITHEISHOE OI
	public service, provide the following amounts relating to these item		▶ \$
	(i) Revenue included on Form 990, Part VIII, line 1		
_	(ii) Assets included in Form 990, Part X	or other similar assets for financial of	
2	If the organization received or held works of art, historical treasure		gain, provide the
-	following amounts required to be reported under SFAS 116 (ASC		▶ \$
a	Revenue included on Form 990, Part VIII, line 1		► \$
0	Assets included in Form 990, Part X		Schodule D /Form 990) 2015

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) and interest of the collection items (check all that apply):	Schedule D (Form 990) 2016 Neighbor	chood House	e, Inc.			Page 2	
a Public exhibition d Loan or exchange programs b Scholarly research e Other	Part III Organizations Maintaini	ing Collections	of Art, Historica	I Treasures,	or Other Similar	r Assets (continued)	
b	3 Using the organization's acquisition, acce	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its					
b	a Public exhibition	d 🗍	Loan or exchange p	rograms			
Preservation for future generations	} 						
Amount Part V Excreve and Exemption of the organization is collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar year No Part IV Escrow and Custodial Arrangements Complete If the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990 Part IV Inc. 21. 1a is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIII No Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table: □ Distributions during the year 1e 1e 1e 1e 1e 1e 1e 1	-	لــا	***************************************		*******		
SUII. Source So		s collections and exc	plain how they further	the organization	n's exempt purpose in	Part	
5 During the year, did the organization solicit or receive donellons of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization's collection? Part IV			•	•			
Sessets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No		it or receive donatio	ns of art. historical tre	easures, or other	r similar		
Part V Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?						Yes No	
990, Part X, line 21. 1a Is the organization an agent, tustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? □ Ves □ No □ Additions during the year □ Distributions during the year □ D							
1a Is the organization an agent, fusitee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? □ Beginning balance □ Distributions during the year □ Distributions include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? □ Yes □ No If Yes; "explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII □ Part V □ Endowment Funds. □ Complete if the organization answered "Yes" on Form 990, Part IV, line 10. □ Contributions		ion answered "Y	es" on Form 990	, Part IV, line	9, or reported an	amount on Form	
included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: □ Beginning balance □ Additions during the year □ Distributions during the year □ Distribution du		todian or other intern	nediary for contribution	ons or other asse	ets not		
b if "Yes," explain the arrangement in Part XIII and complete the following table: C			-			Yes No	
c Beginning balance d Additions during the year e Distributions during the year 1 te 1 1 to 1 te 1 2 did additions during the year 1 te 1 to 1 te 1 2 did additions during the year 2 did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2 did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 3 did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 3 did the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1 a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships C The expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quesi-endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3 As there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (iii) related organizations b if "Yes" on line 3a(ii), are the related organization's endowment funds. Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Coast or other besis (b) Coast or other besis (c) Accumulatied (d) Book value (minestment) (minestment) (minestment) (minestment) (minestment) (minestment) (other) 412,827, 323,897,88,930		XIII and complete the	following table:				
d Additions during the year Distributions during the year 18	,		-			Amount	
d Additions during the year E Distributions during the year 1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Beginning of year balance Contributions C Net investment earnings, gains, and losses G Grantist or scholarships O Cher expenditures for facilities and programs F Administrative expenses g End of year balance P Formanent endowment P P Formane	c Beginning balance				1c		
e Distributions during the year 1e 1f 1f 1f 1f 1f 1f 1f							
f Ending balance							
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?							
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years (e) Fou	2a Did the organization include an amount o	n Form 990, Part X,	line 21, for escrow or	custodial accou	nt liability?	Yes No	
Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Caseshold improvements (a) Caseshold improvements (b) Coulon other basis (c) Accumulated depreciation (d) Book value (b If "Yes," explain the arrangement in Part 3	XIII. Check here if the	e explanation has be	en provided on F	Part XIII		
1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back	Part V Endowment Funds.			•			
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organization's listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation depreciation (direstment) Description of property (a) Cost or other basis (c) Cost or other basis (c) Accumulated depreciation (direstment) Description of property (a) Soct or other basis (c) Accumulated (d) Book value depreciation 1a Land 525,193 525,193 525,193 525,193 525,193 6 Equipment Caesachold improvements d Equipment 412,827 323,897 88,930	Complete if the organizat	ion answered "Y	es" on Form 990	, Part IV, line	10.		
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (investment) (investment) 4 Describe in Part XIII the intended uses of the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation depreciation depreciation 4 Describe in Part XIII the intended uses of the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Book value depreciation 4 Describe in Part XIII the intended uses of the organization answered "Yes" on Form 990, Part X, line 10. Description of property (b) Cost or other basis (c) Accumulated depreciation		(a) Current year	(b) Prior year	(c) Two years b	eack (d) Three years I	back (e) Four years back	
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations 3a(ii) 3a(1a Beginning of year balance		<u> </u>				
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations 3a(ii) 3a(b Contributions						
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations Fart VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (c) Accumulated (d) Book value depreciation (investment) 1a Land 525,193 525,193 525,193 525,193 525,193 525,193 6 Equipment 6 Equipment 6 Equipment 7 Equipment 7 Equipment 8 Equipment 9 Equ							
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (c) Accumulated (d) Book value depreciation (investment) (b) Cost or other basis (c) Accumulated depreciation (d) Book value depreciation 1a Land 525, 193 525, 193 525, 193 525, 193 6 Buildings 3, 214, 280 1, 926, 643 1, 287, 637 c Leasehold improvements d Equipment 6 Other	losses						
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations (iii) related organizations b if Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (c) Accumulated depreciation (d) Book value depreciation 1a Land 525,193 525,193 525,193 525,193 525,193 6 Buildings 3,214,280 1,926,643 1,287,637 c Leasehold improvements d Equipment 412,827 323,897 88,930 e Other	d Grants or scholarships						
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c Temporarily restricted endowment ► % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations	a Board designated or quasi-endowment	·%					
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organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (ii) related organizations (iii) related	The percentages on lines 2a, 2b, and 2c	should equal 100%.					
(ii) unrelated organizations (iii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation 1a Land 525,193 525,193 b Buildings 1 Leasehold improvements 4 Equipment 4 Equipment 4 12,827 3 23,897 88,930 e Other	•	ssession of the orgai	nization that are held	and administere	ed for the	(
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4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (c) Accumulated depreciation 1a Land 525,193 525,193 525,193 b Buildings 1 Leasehold improvements 4 Equipment 4 12,827 323,897 88,930 e Other				<u></u>	, ,		
Part VI Land, Buildings, and Equipment.				R?		3b	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property			ndowment funds.				
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (c) Accumulated depreciation (d) Book value			'"	Deat IV line	11a Caa Farm 0	100 Dad V II 40	
(investment) (other) depreciation 1a Land 525,193 525,193 b Buildings 3,214,280 1,926,643 1,287,637 c Leasehold improvements 412,827 323,897 88,930 e Other 412,827 323,897 88,930						T · · · · · · · · · · · · · · · · · · ·	
1a Land 525,193 525,193 b Buildings 3,214,280 1,926,643 1,287,637 c Leasehold improvements 412,827 323,897 88,930 e Other 412,827 323,897 88,930	Description of property	1 ''	1 ''		• •	(a) Book value	
b Buildings 3,214,280 1,926,643 1,287,637 c Leasehold improvements d Equipment 412,827 323,897 88,930 e Other		<u> </u>	,		aspisolation	E0E 100	
c Leasehold improvements 412,827 323,897 88,930 e Other 412,827 323,897 88,930	1a Land				1 026 642		
d Equipment 412,827 323,897 88,930 e Other	D Dulidings		3,2	14,200	1,340,043	1,201,031	
e Other			A	12 927	222 007	99 020	
			4	14,041	343,031	00,330	
			Part X column (B) li	ne 10c)		1 901 760	

	Form 990) 2016 Neighborhood House,	Inc.		Page 3
Part VII	Investments—Other Securities.			
	Complete if the organization answered "Yes"			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-year	
(1) Financial			3031 07 0110-01-901	SI IIIBIROL VAIOC
(2) Closely-he	derivatives eld equity interests			
(3) Other	Sa oquiy interests			-
(A)				·
(D)				
(E)				_
(F)				
(G)				
(H)	40 4 45 000 5 48 4 4015 4015			
Part VIII	In (b) must equal Form 990, Part X, col. (B) line 12.) ► Investments—Program Related.	<u> </u>		
Fatt VIII	Complete if the organization answered "Yes"	on Form 990 Part IV	line 11c See Form 9	00 Part Y line 13
	(a) Description of investment	(b) Book value	(c) Method of	
	(a) Description of Misselfield	(5) 550% 74.25	Cost or end-of-yea	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
(8)				
(9)	// word and form 000 Bart V and /Di Vina 401 h			
Part IX	nn (b) must equal Form 990, Part X, col. (B) line 13.) ► Other Assets.	1		
rait ix	Complete if the organization answered "Yes"	on Form 990 Part IV	line 11d See Form 9	00 Part X line 15
	(a) Description	on 1 0 m 000, 1 are 14	, iiiio Tra. Occ Form o	(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
_(6)				<u></u>
(7)				
(8)				
(9)	(b) mark and form 000 Dark V and (D) line 45 \			
Part X	in (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities,		>	
Turk	Complete if the organization answered "Yes"	on Form 990. Part IV	line 11e or 11f. See F	orm 990 Part X
	line 25.	on 1 on 1 ooo, 1 and 14	, 11110 1 10 01 1 11. 000 1	oim ooo, r aren,
1.	(a) Description of liability	(b) Book value		
(1) Federal	income taxes			
(2)				
(3)				
(4)		ļ		
(5)	_			
(6)				
(7)				
(8)		1		
(9)	n (b) must equal Form 990, Part X, col. (B) line 25.) ▶	1		
	uncertain tax positions. In Part XIII, provide the text of the	footnote to the organization	n's financial statements that	reports the

Schedule D	(Form 990) 2016 Neighborhood House, Inc.			Page 4
Part XI	Reconciliation of Revenue per Audited Financial Sta		ue per Retur	n.
	Complete if the organization answered "Yes" on Form 9			
1 Total r	revenue, gains, and other support per audited financial statements		1	1,592,434
	nts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
	realized gains (losses) on investments			
	ed services and use of facilities			
c Recov	reries of prior year grants	2c		
	(Describe in Part XIII.)			
	nes 2a through 2d			1 500 404
	act line 2e from line 1	.,.,,	3	1,592,434
	nts included on Form 990, Part VIII, line 12, but not on line 1:			
	ment expenses not included on Form 990, Part VIII, line 7b			
	(Describe in Part XIII.)			
c Add lir	nes 4a and 4b revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		4c	1 500 404
	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	4	3	1,592,434
Part XII		atements with Expe	enses per Ket	urn.
	Complete if the organization answered "Yes" on Form 9			1 006 054
	expenses and losses per audited financial statements		1	1,886,954
	nts included on line 1 but not on Form 990, Part IX, line 25:	11		
	ed services and use of facilities			
	year adjustments			
	losses			
	(Describe in Part XIII.)			
	nes 2a through 2d			1 006 054
3 Subtra	act line 2e from line 1		3	1,886,954
	nts included on Form 990, Part IX, line 25, but not on line 1:			
	ment expenses not included on Form 990, Part VIII, line 7b			
b Other	(Describe in Part XIII.)	4b		
c Add li	nes 4a and 4b		4c	1 000 054
	expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) <u></u>	5	1,886,954
Part XII	Supplemental Information.			
Provide the	descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	Part IV, lines 1b and 2b; P	art V, line 4; Part	X, line
	ines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pr	rovide any additional inforr	nation.	
Part	X - FIN 48 Footnote			
		111		
Manac	gement has concluded that any tax po	sitions that	Monta no	meet the
	TILL I II I	00 740 10	ld be imm	natorial to
more-	-likely-than-not criterion of FASB A	SC /40-10 Wou	та ре тип	Raterial to
			41	
the i	financial statements taken as a whol	e. Accordingi	y, the ac	companying
<u> </u>		inion for	· wasarta	in the
finar	ncial statements do not include any	broarsion for	uncerta.	LII LAX
	tions, and no related interest or pe	nalties have	heen rece	orded in the
posi	cions, and no related interest or pe	Harttes Have	Deen Lee	
	ement of activities or accrued in th	e statement o	f financ	ial position
State	ement of activities of accided in the	e Statement C	T. T.T.Hanc.	Lat. Post Cion
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Schedule D (F	Form 990) 2016 Neighborhoo Supplemental Information (co	d House,	Inc.		Page 5
1 411 7411	oupplemental information (or	niinaca _j			· · · · · · · · · · · · · · · · · · ·
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SCHEDULE G (Form 990 or 990-EZ

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Neighborhood House	_ T	nc.					Alex-cusher
Part I Fundraising Activities. Complete Form 990-EZ filers are not required	if the	organiza	tion	ans	wered "Yes" on F	orm 990, Part IV,	line 17.
Indicate whether the organization raised funds through					es. Check all that app	ly.	
a Mail solicitations			_		vernment grants		
b Internet and email solicitations				_	ment grants		
$\overline{\Box}$	r	Special fur					
d In-person solicitations	• —	•		Ū			
2a Did the organization have a written or oral agreement or key employees listed in Form 990, Part VII) or entit	y in co	nnection w	ith pro	ofessi	ional fundraising servi	ces?	Yes No
b If "Yes," list the 10 highest paid individuals or entities compensated at least \$5,000 by the organization.	(fundra	isers) purs	uant i		reements under which		
(i) Name and address of individual or entity (fundraiser)	(11)) Activity	raiser custo cont	have dy or rol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to . (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8	-						
9							
10							
Total				, •			
3 List all states in which the organization is registered or registration or licensing.			it con	tribut	ions or has been notif	ied it is exempt from	
				••••			

	than \$15,000	Z) 2016 Neighborhoo Events. Complete if the organism of fundraising event contribution greater than \$5,000.	anization answered "Yes" o		
D. C.		(a) Event #1 Race for Succes (event type)	(b) Event #2 Golf Scramble (event type)	(c) Other events None (total number)	(d) Total events (add col. (a) through col. (e))
	1 Gross receipts	135,612	22,678		158,290
	2 Less: Contributions	20,790	11,124		31,914
	3 Gross income (line 1 minus line 2)		11,554		126,376
	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	4,055	7,146		11,201
-	7 Food and beverages	10,549			10,549
	8 Entertainment				
	9 Other direct expenses	17,148	390		17,538
- 1	10 Olicet expense summa	y. Add lines 4 through 9 in column			
	11 Net income summary. Surt III Gaming. Con	Subtract line 10 from line 3, column nplete if the organization an on Form 990-EZ, line 6a.	(d) swered "Yes" on Form 990		· · · · · · · · · · · · · · · · · · ·
Pa	11 Net income summary. Surt III Gaming. Con	Subtract line 10 from line 3, column nplete if the organization an	(d)		87,088
Pa	11 Net income summary. Surt III Gaming. Con	Subtract line 10 from line 3, column inplete if the organization an on Form 990-EZ, line 6a.	(d) swered "Yes" on Form 990 (b) Pull tabs/instant	D, Part IV, line 19, or re	87,088 eported more (d) Total gaming (add
Pa	11 Net income summary. S Int III Gaming. Con than \$15,000	Subtract line 10 from line 3, column nplete if the organization an on Form 990-EZ, line 6a. (a) Bingo	(d) swered "Yes" on Form 990 (b) Pull tabs/instant	D, Part IV, line 19, or re	87,088 eported more (d) Total gaming (add
Pa	11 Net income summary. Surt III Gaming. Conthan \$15,000	Subtract line 10 from line 3, column nplete if the organization an on Form 990-EZ, line 6a. (a) Bingo	(d) swered "Yes" on Form 990 (b) Pull tabs/instant	D, Part IV, line 19, or re	87,088 eported more (d) Total gaming (add
Pa	11 Net income summary. Surt III Gaming. Con than \$15,000 1 Gross revenue	Subtract line 10 from line 3, column nplete if the organization an on Form 990-EZ, line 6a. (a) Bingo	(d) swered "Yes" on Form 990 (b) Pull tabs/instant	D, Part IV, line 19, or re	eported more (d) Total gaming (add
Pa	11 Net income summary. S Int III Gaming. Con than \$15,000 1 Gross revenue 2 Cash prizes 3 Noncash prizes	Subtract line 10 from line 3, column nplete if the organization an on Form 990-EZ, line 6a. (a) Bingo	(d) Swered "Yes" on Form 990 (b) Pull tabs/instant bingo/progressive bingo), Part IV, line 19, or re	87,088 aported more
Pa	11 Net income summary. Surt III Gaming. Conthan \$15,000 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs	Subtract line 10 from line 3, column nplete if the organization an on Form 990-EZ, line 6a. (a) Bingo	(d) swered "Yes" on Form 990 (b) Pull tabs/instant	D, Part IV, line 19, or re	87,088 aported more
	11 Net income summary. Surt III Gaming. Conthan \$15,000 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor	Subtract line 10 from line 3, column nplete if the organization an on Form 990-EZ, line 6a. (a) Bingo	(d) Swered "Yes" on Form 990 (b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming Yes % No	87,088 aported more
Pa	11 Net income summary. Strt III Gaming. Conthan \$15,000 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summar	Subtract line 10 from line 3, column nplete if the organization an on Form 990-EZ, line 6a. (a) Bingo Yes % No	(d) Swered "Yes" on Form 990 (b) Pull tabs/instant bingo/progressive bingo Yes % No	(c) Other gaming Yes % No	97,088 aported more
Pa	11 Net income summary. Surt III Gaming. Conthan \$15,000 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summar 8 Net gaming income sum Enter the state(s) in which the organization licensed if "No," explain:	Yes	(d) Swered "Yes" on Form 990 (b) Pull tabs/instant bingo/progressive bingo Yes % No (d) column (d) activities: ch of these states?	Yes % No	87,088 eported more (d) Total gaming (add col. (a) through col. (c))

Sche	edule G (Form 990 or 990-EZ) 2016 Neighborhood House, Inc.		Page 3
11	Does the organization conduct gaming activities with nonmembers?	🔟	Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity		
	formed to administer charitable gaming?	📙	Yes No
13	Indicate the percentage of gaming activity conducted in:	1	
a		13a	%
b	The Calculate Indiana,	I3b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ▶		
	Address ▶		
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes No
b	revenue? If "Yes," enter the amount of gaming revenue received by the organization ▶ and the		
~	amount of gaming revenue retained by the third party ▶\$		
С	If "Yes," enter name and address of the third party:		
	Name ▶		
	Address ►		
16	Gaming manager information:		
	Name ▶		
	Gaming manager compensation ▶\$		
	Description of services provided ▶		
	Director/officer Employee Independent contractor		
47	Mandatan, distributions,		
17	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to		
a	retain the state gaming license?		Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or	•••	
	spent in the organization's own exempt activities during the tax year 🎉		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional inf See instructions) and (ormatio	v); and on.
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	Schedule G (Form	990 or 9	J90-EZ) 2016

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open To Public Inspection

Name of the organization

Neighborhood House, Inc.

Pa	rt I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of determining	3		
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution amo	unts		
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests							
4	Books and publications							
5	Clothing and household							
•	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded							
10	Securities — Closely held stock							
11	Securities — Partnership, LLC,	_						
	or trust interests							
12	Securities — Miscellaneous		-					
13	Qualified conservation	· · · · · ·						
	contribution — Historic							
	structures							
14	Qualified conservation							
• •	contribution — Other							
15	Real estate Residential				-			
16	Real estate — Commercial							
17	Real estate — Other							
18	Collectibles							
19	Food inventory	X	1	116,905	Fair Market Valu	18		
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶(Other)	X	1	1.728	Fair Market Val	1e		
26	Other ►()							
27	Other ►()							
28	Other ►(
29	Number of Forms 8283 received by	v the orga	nization during the tax	ear for contributions for				
	which the organization completed	_			29			
			· — · — —				Yes	No
30a	During the year, did the organization	on receive	by contribution any pro	perty reported in Part I, lir	nes 1 through			
	28, that it must hold for at least three		•					
	to be used for exempt purposes for	-				30a		X
b	If "Yes," describe the arrangement			***************************************				
31	Does the organization have a gift a		e policy that requires th	e review of any nonstanda	ard			
						31		X
32a	contributions? Does the organization hire or use t	hird partie	s or related organization	ns to solicit, process, or s	ell noncash			
	contributions?					32a		Х

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

b If "Yes," describe in Part II.

describe in Part II.

33

Schedule M (Form	n 990) (2016)	Neighb	orhood	House,	Inc.				Page 2
Part II	the orga	nization is	reporting li	n Part I, colu	umn (b), th	n required by e number of r any addition	contributions	s, the numbe	Page 2 nd 33, and whether or of items received,
	Ol a Coll	IDMALION OF	DOUT, AIGC	/ complete t	riis part ioi	arry addition	Tal miorinata		
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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.

Department of the Treasury Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection

Inc.

OMB No. 1545-0047

Open to Public

Name of the organization Neighborhood House, Employer identification number

Form 990 - Organization's Mission
The mission of Neighborhood House is to provide individuals with
opportunities to enhance the quality of their lives. Our vision is to
break the cycle of poverty for the children and families with whom we
serve. We know the key is through education and that by strengthening the
parents/ family leaders, we have a greater impact on the child. So our
programs are educationally focused, which is broader than just the academic
component. And our work is to engage the parents/ grandparents in order to
strengthen the future for our children. We serve infants through senior
adults, approximately 220 people/ day from Portland and surrounding areas
of West Louisville. We work toward our mission and vision by addressing
daily needs as well as making a lifelong impact in meeting Life Needs,
teaching Life Skills and inspiring Life Dreams for our children and
families.
Form 990, Part III, Line 4c - Third Accomplishment
parenting support and leadership training. We also provide family and
intergenerational activities such as cultural events, cooking and exercise
classes, and recreation and holiday activities.
Form 990, Part III, Line 4d - All Other Accomplishment
Our Four Seasons Senior Adult Program improves the quality of life for some
of our city's most vulnerable citizens. Our seniors receive a nutritious
lunch each day as well as recreation, socialization and opportunities for

developing new skills and engaging in new activities they wouldn't have

otherwise. Activities vary including exercise and cooking classes, field trips, holiday events, health screenings and intergenerational opportunities.

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

The 990 tax return is prepared by an independent CPA firm based on the information obtained from the audit and inquiries of management. Before the return is filed, a draft of the return is reviewed by the Finance Committee. The Finance Committee reports their approval to the Board of Directors. A copy is provided to all board members, then the tax return is filed with the IRS.

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

On an annual basis each member of the board of directors are required to sign a conflict of interest form. If the form indicates a possible conflict of interest, the incident is thoroughly investigated. If there is a perceived conflict, the member will not be able to participate (including serving on a committee) on any decision relating to the conflict. If a major conflict is noted the Board Member will be asked to resign.

Periodically throughout the year possible conflicts are investigated and resolved as necessary.

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

The salary of the Executive Director is reviewed annually and approved by
the President/CEO of Maryhurst, Inc. The review includes a number of
factors such as performance, compensation as compared to peers, and the
financial condition of Neighborhood House, Inc. After determining the

Page 1 of 2

Schedule O (Form 990 or 990-EZ) (2016) Name of the organization	Employer identification number
Neighborhood House, Inc.	
compensation, the President/CEO of Mar	yhurst, Inc. meets with the Chairman
of the Board of Neighborhood House, In	c. to discuss the compensation.
- 000 D L VVI Time 10 Comming	Dogumenta Disalogura Evolanation
Form 990, Part VI, Line 19 - Governing	
Governing documents are available upon	request. The Form 990 is available
via Guidestar's website or upon reques	t.
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	Page 2 of 2

Form 4562

Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

achment 4

Name(s) shown on return Neighborhood House, Inc. Business or activity to which this form relates Indirect Depreciation Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions) 2 2 2,010,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 4 5 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 (b) Cost (business use only) 6 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 9 10 Carryover of disallowed deduction from line 13 of your 2015 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 ... 12 Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12 13 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 14 30,205 during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 124,061 Other depreciation (including ACRS) 16 MACRS Depreciation (Don't include listed property.) (See instructions.) Part III 3,144 MACRS deductions for assets placed in service in tax years beginning before 2016 17 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 2016 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (business/investment use (e) Convention (f) Method (g) Depreciation deduction placed in (a) Classification of property only-see instructions) 19a 3-year property 5-year property 492 200DB 4,325 7.0 MO 7-year property d 10-year property 29,337 15.0 HY 150DB e 15-year property 20-vear property S/L 25 yrs. g 25-year property 27.5 yrs. S/L MM Residential rental MM S/L property 27.5 yrs. ММ S/L 39 yrs. Nonresidential real property MM S/L Section C—Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System S/L 20a Class life S/L 12 yrs. b 12-year S/L 40 yrs. c 40-year Summary (See instructions.) Part IV 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 158,421 here and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

103004 Neighborhood House, Inc.

Federal Statements

FYE: 6/30/2017

C	as	h	-	E	O	Y
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Description	Amount		
PNC	\$	2,985	
Charitable Gaming-Stock Yards		5,579	
Stock Yards Bank		48,312	
Money Market-Stock Yards		49,330	
Petty cash		117	
Total	\$	106,323	

Accounts receivable - EOY

Description		Amount
Accounts receivable	\$	27,648
Total	\$	27,648
1000-	' <u></u>	

Accounts payable - EOY

Description	 Amount
Accrued Payroll Accrued Vacation Accounts payable FSA WH Vision Insurance WH	\$ 42,113 20,455 11,815 167
Short Term Disability WH Gap Insurance WH Critical Illness Ins WH	
United Way WH Ganishment Payroll Tax W/H	 384 1,440 -1,367
Total	\$ 75,007

AMENDED ARTICLUS OF INCORPORATION.

The undersigned, Lucy Belknup, Helchen B. Barret,
Fertha K. Sachs, Emily E. Einmigorodo, Emil S. Tachau, Henry
Elauber, Lafon Allen, Edward Sachs, Bernard Flexner, Leon F.
Lewis, Bernard Sellignan and Percy E. Booth, being all of the
members of the Board of Trustees or Eanagers of "Neighborhood
House," a comporation herotofore established in conformity
to section 879 of the Kentucky Statutes, do hereby smend their
articles of incorporation which have been filed in the office
of the County Clerk of Jefforson County and in the office of
the Secretary of State of Montucky by adding thereto the following provisions and by giving said corporation the additional
powers hereinafter enumerated.

Said corporate body shall have power to berrow money with which to pay for property obtained by purchase or with which to carry on its purposes generally and shall have power to pledge or nortgage its property, real or personal, to secure the payment of the money so berrowed or to secure the fulfillment of any of its contracts. To pledgee or mortgages or other creditor of said corporation shall be bound to look to the application of the proceeds of any loan made to said corporation. The corporators above named and their associates and successors shall be and remain the Board of Trustees of Neighborhood House.

In witness of these purposes we have affixed our signatures to these articles of incorporation in duplicate on this 19th day of January, 1912, that they may be filed in the office of the Secretary of State of Montucky and recorded in the office of the County Clark of Jofferson County.

STATE OF METUCKY : SCT.

STATE OF METUCKY: SCT.

COURTY OF JIFFERSON:

I. Jaken In No. Let., a notary public in and
for the county and state aforcard, do certify that the foregoing
instrument of writing was on the 18th day of January, 1912, produced to me in my office and acknowledged and delivered by Lucy
Belkmap, Nelchen B. Barrot, Berthe E. Sache, Emily E. Minnigerode,
Emil S. Eddhau, Henry Klauber, Lafon Allon, Bernard Flormer, Leon
D. Lavis Barrard Sellipmen and Percy E. Booth parties thereto P. Levis, Pernard Selligmen and Percy M. Booth, parties thereto, to be their act and deed and the act and deed of each of them, and to be their act and deed and the act and deed of each of those, and that said instrument of writing was also produced to me in my office on the lot day of Jaruary, 1912, and acknowledged and delivered by librard Sachs, party thereto, to be his act and load.

By complishing expires which for the librard lay of

1. P. S. F.17, Clerk of the County Court of Actions County in the State of Asserting do earlify that on this day at 10 50 Clock QN. the foregoing Assistant of Incornerships were produced to me in my Office and that I have recorded there, this ally the torrypling certificate in my said office.

Witness my hand this ...

ARTICLES OF INCORPORATION OF NEIGHBORHOOD HOUSE

KNOW ALL MEN BY THESE PRESENTS:

That the undersigned, MARSHALL P. ELDRED, MRS. THOMAS

A. BALLANTINE, WILLIAM M. COTTON, MRS. CARL BERG,

MRS. KERVIN BULLITT, MRS. GEORGE COHN, MRS. J. DONALD DINNING,

ASA W. PULLER, A. READ HENRY, RUTH HIGGINS, WILLIAM H. LANGLEY,

FRANCIS J. PEAK, P. EUGENE SANFORD and MRS. HUGH SHVAB, JR.,

being members of the Board of Trustees of NEIGHBORHOOD HOUSE,

128 South First Street, Louisville, Kentucky, a charitable

corporation heretofore organized under the laws of the Commonwealth of Kentucky, do hereby amend the Articles of Incorporation

of said NEIGHBORHOOD HOUSE in the following particular, to-wit:

The affairs of this Corporation shall be conducted by a Board of Directors which shall consist of not less than seven (7) nor more than twenty-five (25), to be determined in the discretion of said Board. Said Board of Directors shall have the power and authority heretofore vested in the Board of Trustees or Board of Managers of the said NEIGHBORHOOD HOUSE, together with such other power and authority as may be given by law.

IN WITNESS WHEREOF, the undersigned have set their hands this 2 day of March, 1955

Manahall B Fldned

Mrs. Thomas A. Ballantine

William M. Cotton

Mrs. Carl Berg V

Mrs. Kervin Bullitt

Mrs. George Cohn

Mrs. George Cohn

Mrs. George Cohn

Mrs. J. Donald Dinning

Mrs. J. Donald Dinning

Ms. J. Donald Dinning

Ms. Fuller

A. Read Henry

Ruth Higgins

Ruth Higgins

(Rw. W. Whim for Longlay

William H. Langley

Francis J. Peak

Francis J. Peak

J. Gugene Sanford

Uns. Hugh Shwab dr.

Mrs. Hugh Shwab, Jr.

COMMONWEALTH OF KENTUCKY
COUNTY OF JEFFERSON

I, the undersigned Notary Public in and for the State and County aforesaid, do hereby certify that the foregoing Amendment TO ARTICLES OF INCORPORATION of NEIGHBORHOOD HOUSE was this day produced before me in my county by MARSHALL P. ELDRED, MRS. THOMAS A. BALLANTINE, WILLIAM M. COTTON, MRS. CARL BERG, MRS. KERVIN BULLITT, MRS. GEORGE COHN, MRS. J. DONALD DINNING, ASA W. PULLER, A. READ HENRY, RUTH HIGGINS, WILLIAM R. LANGLEY, FRANCIS J. PEAK, F. EUGENE SANFORD and MRS. HUGH SHWAB, JR., who acknowledged same to be their true act and deed for the uses and purposes therein set out.

WITNESS my hand and notarial seal, this 2 day of March, 1955.

My commission expires Let 4-1458

ORIGINAL COPY

FILED AND RECORDED

OCT 3 - 1955

Elizabeth In Russ

Notary Public Jefferson County Kentucky

Charles mis

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ARTICLES OF AMENDMENT TO THE ARTICLES OF INCORPORATION OF NEIGHBORHOOD HOUSE

SECRETARY OF STATE

THIS AMENDMENT, dated 26 September 1972, to the Articles of Incorporation of Neighborhood House, Commonwealth of Kentucky

WITNESSETH:

WHEREAS, it has become necessary and proper to amend the Articles of Incorporation of Neighborhood House, a charitable and educational corporation of Louisville, Kentucky, in the manner hereinafter set forth, and WHEREAS, there are no shareholders in the corporation and no members entitled to vote upon such amendments;

NOW, THEREFORE, we, the President and Secretary, respectively, of Neighborhood House, do hereby certify that by a vote of and by resolution of the majority of the directors in office at their regular meeting held on 19 September 1972. Neighborhood House duly amended its Articles of Incorporation in the following respects:

- 1. The word, "exclusively," is added to the description of the purposes of the corporation, so that they now read "... form a corporation for charitable and educational purposes exclusively...";
- 2. A new paragraph is added to the said Articles, which provides: Upon dissolution or liquidation of the corporation, the directors shall, after paying or making provision for the payment of all the liabilities of the corporation, dispose of all of the assets of the corporation exclusively for the purposes of the corporation and in such a manner or to such organization(s) as shall at the time qualify as exempt under section 501(c)(3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States' Internal Revenue Law). Any assets not so disposed of shall be disposed of by any court having proper jurisdiction in accordance with the purposes of the corporation and exclusively to such organizations as are described in the preceding sentence.

IN TESTIMONY WHEREOF, the President and Secretary of Neighborhood House have hereunto signed their names; and Neighborhood House has caused these Articles of Amendment to be signed by its President and Secretary, all'this 28"day of September 1972.

NEIGHBORHOOM resident

Attest: Ruth C. Algins
Secretary

COMMONWEALTH OF KENTUCKY)

COUNTY OF Jufferen

the County and Commonwealth aforesaid, do hereby certify that the foregoing Articles of Amendment to the Articles of Incorporation of Neighborhood House were produced before me in the County and Commonwealth aforesaid by John St. Lawrence and Ruth Higgins, President and Secretary, respectively, of Neighborhood House, and were acknowledged by them to be their act and deed; and to be the act and deed of Neighborhood House.

Witness, my hand and seal, this 23' day of September, 1972.

Notary Public

Juffers County, Kentucky

(Seal)
My complesion expires:

: august 12, 1974

ORIGINAL COPY
FILED
SECRETARY OF STATE OF PENTUCKY

MAY 1 8 1973

Thema La Storace

This document was prepared by Charles M. Hassett, Attorney at Law, whose address is 2114 Edgehill Road, Louisville, Kentucky 40205.

Charles M. Hassett

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Cost Estimates - Capital Expenses

Cost Estimates	Amount	
Roof/Gutters repairs	\$	13,000
Energy efficient lighting	\$	14,000
Replace computers	\$	4,000
HVAC/Boilers repairs	\$	6,000
Install plumbing, sink, and drainage	\$	11,000
Painting and wall repair	\$	2,000
	Total \$	50,000

Please note: Priority items may cost more when contractor starts work if further damage is determined that was not visible when assessing for bid.



Form W-9

(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; do	not leave this line blank.	,		
	Neighborhood House, Inc.				
	2 Business name/disregarded entity name, if different from above				
ge 3.	Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.			4 Exemptions (ccdes apply only to certain entities, not individuals; see	
on pa	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate		instructions on page 3):		
pe.	single-member LLC	D. C. t	L	Exempt payee code (if any) D0	3686
Print or type. Specific Instructions on page	LLC if the LLC is electified as a single-member LLC that is disregarded from the owner tipless the owner of the LLC is		Exemption from FATCA reporticode (if any)	ing	
ēĊi	✓ Other (see instructions) ► 501 (c			(Applies to accounts maintained outside the	e U.S.)
	5 Address (number, street, and apt. or suite no.) See instructions.	1930	Requester's name a	nd address (optional)	
See	201 N. 25th St.				
	6 City, state, and ZIP code		2,		
	Louisville, KY 40212 7 List account number(s) here (optional)			**	
	1 List Goodan Traines (c) Traine (aprilating)		**		
Par	Taxpayer Identification Number (TIN)		·		
-	your TIN in the appropriate box. The TIN provided must match the name	ne given on line 1 to avo	oid Social sec	urity number	
backu	p withholding. For individuals, this is generally your social security num	nber (SSN). However, for			
	nt alien, sole proprietor, or disregarded entity, see the instructions for F s, it is your employer identification number (EIN). If you do not have a r		a		
TIN, la		. ,	or		
	If the account is in more than one name, see the instructions for line 1.	. Also see What Name a	nd Employer	identification number	
Numb	er To Give the Requester for guidelines on whose number to enter.	* * *	6 1	- 0 4 4 5 8 4 2	2
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	penalties of perjury, I certify that: number shown on this form is my correct taxpayer identification numb	or for Lam waiting for a	i number te be ice	und to mal: and	
2. I an Ser	n not subject to backup withholding because: (a) I am exempt from bac vice (IRS) that I am subject to backup withholding as a result of a failur onger subject to backup withholding; and	kup withholding, or (b) I	I have not been no	otified by the Internal Reven	iue t I am
3. I an	n a U.S. citizen or other U.S. person (defined below); and	-			
	FATCA code(s) entered on this form (if any) indicating that I am exemp				
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	dividual or entity (Form W-9 requester) who is required to file an nation return with the IRS must obtain your correct taxpayer	1098-T (tuition)		·	
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	, individual taxpayer identification number (ITIN), adoption yer identification number (ATIN), or employer identification number			ment of secured property)	
(EIN),	to report on an information return the amount paid to you, or other not reportable on an information return. Examples of information	alien), to provide your	r correct TIN.	person (including a resident	
	returns include, but are not limited to, the following. 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.				





Neighborhood House, Inc.
Financial Statements and
Independent Auditors' Report
For the Years Ended
June 30, 2017 and 2016

Contents

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Independent Auditors' Report

To the Board of Directors of Neighborhood House, Inc.

We have audited the accompanying financial statements of Neighborhood House, Inc., (the Organization) (a not-for-profit organization) which comprise the statements of financial position as of June 30, 2017 and 2016, and the related statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Neighborhood House, Inc. as of June 30, 2017 and 2016, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Baldwin CPAs, PLLC

Louisville, Kentucky December 6, 2017

Neighborhood House, Inc. Statements of Financial Position June 30, 2017 and 2016

	2017			2016	
ASSETS					
Cash	\$	106,323	\$	135,185	
Accounts receivable		27,648		39,878	
Promises to give		176,918		355,561	
Prepaid expenses		32,053		32,733	
Loan costs, net		9		9,018	
Land, building and equipment, net		1,901,761		1,987,297	
Total assets	\$	2,244,703	\$	2,559,672	
LIABILITIES AND NET ASSETS					
LIABILITIES			_		
Accounts payable and accrued expenses	\$	11,815	\$	23,156	
Payroll accruals and withholding		63,192		58,996	
Bonds payable	-			13,304	
Total liabilities	_	75,007	_	95,456	
NET ASSETS					
Unrestricted		1,874,726		1,948,799	
Temporarily restricted		294,970		515,417	
Total net assets		2,169,696		2,464,216	
Total liabilities and net assets	\$	2,244,703	\$	2,559,672	

Neighborhood House, Inc. Statements of Activities For the Years Ended June 30, 2017 and 2016

2016	Temporarily	Restricted Total		440,105 \$ 1,038,489	404,143	70,308	17,964	127,814	(32,078)	440,105 1,626,640		(515,855)	(75,750) 1,626,640		- 1,417,101	- 210,840	- 195,572	- 1,823,513	(75,750) (196,873)	591,167 2,661,089	515,417 \$ 2,464,216
2	Tem	Unrestricted Res	1	\$ 598,384 \$	404,143	70,308	17,964	127,814	(32,078)	1,186,535		515,855	1,702,390		1,417,101	210,840	195,572	1,823,513	(121,123)		\$ 1,948,799 \$
		Total		\$ 954,792	447,655	70,459	526	158,290	(39,288)	1,592,434			1,592,434		1,447,806	263,323	175,825	1,886,954	(294,520)	2,464,216	\$ 2,169,696
2017	Temporarily	Restricted		\$ 307,018	ı	2.90	1	,		307,018		(527,465)	(220,447)		īŽ.	6		1	(220,447)	515,417	\$ 294,970
		Unrestricted		\$ 647,774	447,655	70,459	526	158,290	(39,288)	1,285,416		527,465	1,812,881		1,447,806	263,323	175,825	1,886,954	(74,073)	1,948,799	\$ 1,874,726
			Revenue and support:	Contributions and grants	Program fees	Rental income	Interest and miscellaneous income	Special event income	Special event expense		Net assets released from restrictions	Restrictions satisfied by payments	Total revenue and support	Expenses:	Program services	Management and general	Fund raising	Total expenses	Change in net assets	Net assets at beginning of year	Net assets at end of year

The accompanying notes are an integral part of these financial statements.

Neighborhood House, Inc. Statement of Functional Expenses For the Year Ended June 30, 2017

			Program Services	v		Support	Support Services	
	Child	Youth	Four		Total	Management		
	Development	Development	Seasons	Family	Program	and	Fund	
	Center	Program	Program	Services	Services	General	Raising	Total
Salaries	\$ 440,251	\$ 191,824	\$ 9,061	\$ 129,967	\$ 771,103	\$ 121,030	\$ 70,138	\$ 962,271
Payroll taxes	31,401	14,277	681	29'6	56,026	11,473	5,438	72,937
Employee benefits	27,037	4,580	262	1,929	33,808	14,073	1,420	49,301
Total salaries and related expenses	498,689	210,681	10,004	141,563	860,937	146,576	76,996	1,084,509
Professional fees	Ĭ		1	•	101	15,001	31,207	46,208
Office supplies	1,821	6,013	594	1,236	9,664	9,103	5,849	24,616
Program events and supplies	132,955	113,668	1,414	10,013	258,050		*	258,050
Contract services	369	19,397	982	17,607	38,355	14,219	2,767	55,341
Vianagement fee	15,427	15,427	1,028	4,114	35,996	35,997	30,855	102,848
Insurance	14,315	6,237	295	4,226	25,073	3,935	2,281	31,289
Staff development	1,271	1,271	0	574	3,116	3,785	06	6,991
Utilities	16,666	7,262	343	4,920	29,191	4,582	2,655	36,428
Interest	140	61	က	41	245	38	22	305
Transportation	759	1,224	36	269	2,716	1,563	127	4,406
Telephone	3,516	1,532	72	1,038	6,158	296	260	7,685
Property maintenance	18,134	7,901	373	5,353	31,761	4,986	2,889	39,636
Other expenses	4,113	1,951	Ŷ	1,611	7,675	2,646	7,980	18,301
Client support	301	3,127	ì	8,492	11,920	•	•	11,920
Depreciation and amortization	72,480	31,580	1,492	21,397	126,949	19,925	11,547	158,421
Total expenses	\$ 780,956	\$ 427,332	\$ 16,636	\$ 222,882	\$ 1,447,806	\$ 263,323	\$ 175,825	\$1,886,954
		1	l					

The accompanying notes are an integral part of these financial statements.

Neighborhood House, Inc. Statement of Functional Expenses For the Year Ended June 30, 2016

		Δ.	Program Services	₁		Support	Support Services	
	Child	Youth	Four		Total	Management		
	Development	Development	Seasons	Family	Program	and	Fund	
	Center	Program	Program	Services	Services	General	Raising	Total
				!				
Salaries	\$ 406,276	\$ 176,864	\$ 11,832	\$ 91,330	\$ 686,302	\$ 91,110	\$ 98,467	\$ 875,879
Payroll taxes	30,972	13,658	899	7,197	52,726	7,253	7,728	67,707
Employee benefits	22,421	3,798	217	1,600	28,036	11,671	1,178	40,885
Total calariae and related expenses	459 669	194 320	12 948	100,127	767.064	110.034	107,373	984,471
יסומו פמומורכם מווח וסומוכם כעל בווכמר			I		Ĭ	11 000	7 000	18 000
Professional fees		•				700,11	200-1	0 0 0
Office supplies	497	2,408	160	843	3,908	14,479	12,992	31,379
Program events and supplies	167,717	143,387	1,784	12,631	325,519	1	Ų.	325,519
Contract services	1,800	20,426	10,378	3,861	36,465	100	240	36,805
Management fee	15,000	15,000	1,000	4,000	35,000	35,000	30,000	100,000
Insurance	10,298	4,483	300	2,315	17,396	2,309	2,496	22,201
Staff development	1,923	2,223	1	1,447	5,593	3,013	1,302	806'6
Utilities	18,605	8,100	542	4,182	31,429	4,172	4,509	40,110
Interest	783	341	23	176	1,323	175	190	1,688
Transportation	821	688	775	570	2,854	3,096	317	6,267
Telephone	6,524	2,840	190	1,466	11,020	1,463	1,581	14,064
Property maintenance	22,702	9,883	661	5,103	38,349	5,091	5,502	48,942
Other expenses	1,782	971	,	616	3,369	4,906	4,776	13,051
Client support	2,595	E.	,	14,681	17,276	iĝ.	•	17,276
Depreciation and amortization	71,355	31,063	2,078	16,040	120,536	16,002	17,294	153,832
Total expenses	\$ 782,071	\$ 436,133	\$ 30,839	\$ 168,058	\$1,417,101	\$ 210,840	\$ 195,572	\$1,823,513

The accompanying notes are an integral part of these financial statements.

Neighborhood House, Inc. Statements of Cash Flows For the Years Ended June 30, 2017 and 2016

		2017	2016
CASH FLOWS FROM OPERATING ACTIVITIES:			
Change in net assets	\$	(294,520)	\$ (196,873)
Adjustments to reconcile change in net assets			
to net cash provided (used) by operating activities:			
Depreciation and amortization		158,421	153,832
Donated vehicle		196	(9,847)
(Increase) decrease in operating assets:			
Accounts receivable		12,230	(19,285)
Promises to give		178,643	57,345
Prepaid expenses		680	9,029
Increase (decrease) in operating liabilities:			
Accounts payable and accrued payroll		(7,145)	 33,234
Net cash provided (used) by operating activities	_	48,309	 27,435
CASH FLOWS FROM INVESTING ACTIVITIES:			
Purchase of improvements and equipment		(63,867)	 (17,427)
Net cash provided (used) by investing activities		(63,867)	(17,427)
CASH FLOWS FROM FINANCING ACTIVITIES:			
Payments on bonds payable		(13,304)	 (37,500)
Net increase (decrease) in cash		(28,862)	(27,492)
Cash at beginning of year		135,185	 162,677
Cash at end of year	\$	106,323	\$ 135,185
SUPPLEMENTAL DISCLOSURES:			
Cash paid for interest	\$	90	\$ 1,688
Donated vehicle	\$	-	\$ 9,847

Note 1 - Summary of Significant Accounting Policies

The Neighborhood House, Inc. (the Organization) is a not-for-profit community center serving the Portland neighborhood of Louisville, Kentucky. The Organization's mission is to provide individuals with opportunities to enhance their lives. The Organization offers four core program areas:

<u>Child Development Center</u> – provides children ages six weeks through twelve years with a safe, nurturing learning environment.

<u>Youth Development Program</u> – provides a safe place for children and teens to develop positive and meaningful relationships.

Four Seasons Program – provides services to improve the quality of life for senior adults.

Family Services - provides community activities and an Emergency Food Bank.

Funds to provide these services are provided by individuals, corporations, foundations, private and government grants and earned income.

Basis of Accounting

The Organization prepares its financial statements on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

Basis of Presentation

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) with regards to financial statements of Not-for-Profit Organizations. Under this guidance, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. A description of the three net assets categories follows:

<u>Unrestricted Net Assets</u>: include the portion of expendable funds that are not subject to donor-imposed stipulations.

<u>Temporarily Restricted Net Assets</u>: include gifts for which donor-imposed restrictions have not been met.

<u>Permanently Restricted Net Assets</u>: include amounts which the donor has stipulated that the corpus be invested in perpetuity and only the income be made available for program operations in accordance with donor restrictions.

Estimates

Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenues and expenses. Actual results could differ from those estimates.

Cash

The Organization considers all checking accounts and money market accounts to be cash equivalents. Cash received with donor-imposed restrictions limiting its use to long-term purposes is not considered cash for the purposes of the statement of cash flows.

Accounts Receivable

Accounts receivable consist primarily of amounts due from the Kentucky Child Care Assistance Program, a food reimbursement program, private pay child care clients and grants where the service has already been performed and reimbursement has been requested or billed. Management considers all accounts receivable to be collectible; therefore no allowance for doubtful accounts is necessary. Bad debts are written off as they occur. Bad debt expense was \$0 for the years ended June 30, 2017 and 2016, respectively.

Promises to Give

Promises to give are recognized when the donor makes a promise to give to the Organization that is, in substance, unconditional. Promises to give becoming due in the next year are recorded at net realizable value. Promises to give in subsequent years are reported at the present value of their net realizable value, using risk free interest rates applicable to the years in which the promises are recognized. Conditional promises to give are recognized when the conditions on which they depend are substantially met. Management considers all promises to give to be collectible; therefore no allowance for doubtful accounts is necessary.

Land, Building and Equipment

Land, building and equipment is recorded at cost, or if donated, at the approximate fair value at the date of donation. The cost of property and equipment purchased in excess of \$500 is capitalized. Depreciation is computed using primarily the straight-line method over the estimated lives of the assets from 3 to 40 years.

Loan Costs

Loan costs of \$19,157 were amortized on a straight-line basis over the life of the bonds payable. The bonds were paid off during 2017 and fully amortized. Amortization expense for each of the years ended June 30, 2017 and 2016 was \$9,018 and \$959, respectively. Loan costs are reported on the statements of financial position net of accumulated amortization of \$19,157 and \$10,139 as of June 30, 2017 and 2016, respectively.

Contributions

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence and/or nature of any donor restrictions.

Support that is restricted by the donor is reported as an increase in unrestricted net assets if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in temporarily or permanently restricted net assets, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

In-Kind Donations

The Organization receives various types of in-kind donations including services and food. FASB ASC 958-605-25 requires recognition of professional services received if those services (a) create or enhance long-lived assets or (b) require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation. Most of the services received by the Organization do not meet these criteria. Contributions of tangible assets are recognized at fair value when received and are recorded as part of public support on the statements of activities. The amounts reflected as in-kind support are offset by like amounts included in expenses or assets.

Expense Allocation

Directly identifiable expenses are charged to program and supporting services. Expenses related to more than one function are charged to programs and supporting services based on time studies or square footage.

Income Tax Status

The Organization is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. In addition, the Organization qualifies for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization other than a private foundation under Section 509(a)(2).

Management has concluded that any tax positions that would not meet the more-likely-than-not criterion of FASB ASC 740-10 would be immaterial to the financial statements taken as a whole. Accordingly, the accompanying financial statements do not include any provision for uncertain tax positions, and no related interest or penalties have been recorded in the statement of activities or accrued in the statement of financial position.

Note 2 - Concentrations of Credit Risk

Accounts receivable and promises to give - Financial instruments that are exposed to credit risk consist of accounts receivable and promises to give. Accounts receivable and promises to give are principally with the State of Kentucky, foundations and corporations based in the Louisville area. Realization of these accounts is dependent on various economic conditions.

<u>Cash</u> - The Organization maintains its cash balance in several financial institutions in Louisville, KY. The cash balances are insured by the Federal Deposit Insurance Corporation. At various times during the year, the cash balance may exceed amounts federally insured. Risk is mitigated by the high quality of the financial institution.

Note 3 -- Promises to Give

Promises to give are all current and consist of the following at June 30:

	 2017	 2016
Metro United Way for operations Programs	\$ 164,168 12,750	\$ 215,561 140,000
	\$ 176,918	\$ 355,561

Promises to give due in more than one year are recognized at fair value, using present value techniques and a discount rate ranging from 1-2%. No allowance for doubtful accounts is necessary, as management believes that all amounts are collectible.

Note 4 - Land, Building, and Equipment

Land, building and equipment consist of the following at June 30:

	2017	2016
Land	\$ 525,193	\$ 525,193
Building and improvements	3,055,729	3,019,964
Furniture and equipment	353,885	333,490
Vehicles	60,358	60,358
Total costs	3,995,165	3,939,005
Less accumulated depreciation	(2,093,404)	(1,951,708)
	1,901,761	1,987,297
Building under lease	157,136	157,136
Less accumulated depreciation	(157,136)	(157, 136)
	= =====	=
Land, building and equipment, net	\$ 1,901,761	\$ 1,987,297
Depreciation expense	\$ 149,403	\$ 152,873

Note 5 - Bonds Payable

In 2005, the City of Shively issued bonds on behalf of the Organization. The bonds are reported as a liability of the Organization. The bonds payable are secured by a promissory note issued by a local bank which is in turn secured by a first mortgage on real estate. The bonds payable have an annual interest rate of 3.98%, with a maturity date of December 1, 2025. Each year the Organization signs a letter of agreement with the bank to pay interest only. The interest rate is subject to change beginning December 1, 2010, and on each five year anniversary thereafter based on a variable rate. The bonds were paid off in September 2016 and principal payments of \$13,304 and \$37,500 were made for the years ended June 30, 2017 and 2016, respectively.

Note 6 - Line of Credit

The Organization has available a \$50,000 line of credit, expiring October 15, 2017, none of which was outstanding on June 30, 2017 or 2016. Advances on the line of credit carry an interest rate of 3.25%. The credit line is secured by an interest in the property located at 201 North 25th Street, Louisville, KY. As of October 15, 2017, the credit line was increased to \$100,000 with a maturity date of October 15, 2018.

Note 7 - Restrictions of Assets

Temporarily restricted net assets consist of the following at June 30:

	2017	 2016
Programs	\$ 294,970	\$ 515,417

Note 8 – Leasing Arrangements

The Organization is the property owner of a building under an operating lease that expires May 31, 2018, with a monthly rent of \$5,859. The building is fully depreciated. The Organization also receives other rental income for room rentals for events. Net rental income for the years ended June 30, 2016 and 2015 is as follows:

	 2017	 2016
Gross rental income	\$ 70,459	\$ 70,308

The following is a schedule by years of future minimum rental income under all leases as of June 30, 2016:

June 30, 2018 \$ 64,449

Note 9 - Defined Contribution Pension Plan

The Organization has a defined contribution pension plan which covers all employees who have met certain age and service requirements. The Organization contributed \$14,992 and \$9,912 for the years ended June 30, 2017 and 2016, respectively.

Note 10 - Management Contract

The Organization has a management agreement with Maryhurst, Inc. that renews annually. Under this agreement, Maryhurst, Inc. provides to the Organization a range of management services including general operations management, financial management and program operations management. Under the terms of the contract, the Organization paid Maryhurst, Inc. \$8,333 per month through June 30, 2017. This agreement is renewed annually. Total management fees were \$100,000 and \$100,000 for the years ended June 30, 2017 and 2016, respectively.

Note 11 - In-Kind Donations

Contributions of tangible assets are recognized at fair market value when received. The amounts are reflected in the accompanying financial statements as support and are offset by like amounts included in expenses or assets. In-kind donations consisting of food and supplies for the years ended June 30, 2017 and 2016 were \$118,633 and \$206,703, respectively. In June 30, 2016, a donated vehicle was also received.

Note 12 - Accounting Standards Updates

Accounting Standards Update 2014-09, Revenue from Contracts with Customers (Topic 606)

In May 2014, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2014-09, Revenue from Contracts with Customers (Topic 606), requiring an entity to recognize the amount of revenue to which it expects to be entitled for the transfer of promised goods or services to customers. The core principle of ASU 2014-09 is to recognize revenues when a customer obtains control of a good or service, in an amount that reflects the consideration to which an entity is expected to be entitled for those goods or services. The standard will replace most existing revenue recognition guidance in GAAP when it becomes effective and permits the use of either a full retrospective or retrospective with cumulative effect transition method. In August 2015, the FASB issued ASU 2015-14, which deferred the effective date of ASU 2014-09 by one year. The updated standard will be effective for the year ending June 30, 2020. The Organization has not yet selected a transition method and is currently evaluating the effect that the new standard will have on its combined financial statements.

Accounting Standards Update 2016-02, Leases (Topic 842)

In February 2016, the FASB issued ASU 2016-02, Leases (Topic 842), requiring all leases to be recognized on the Organization's balance sheet as a right-of-use asset and a lease liability, unless the lease is a short term lease (generally a lease with a term of twelve months or less). At the commencement date of the lease, the Organization will recognize: 1) a lease liability for Organization's obligation to make payments under the lease agreement, measured on a discounted basis; and 2) a right-of-use asset that represents the Organization's right to use, or control the use of, the specified asset for the lease term. Upon adopting the ASU, the Organization will be required to recognize and measure its leases at the beginning of the earliest period presented using a modified retrospective approach.

ASU 2016-02 will be effective for the Organization for the year ending June 30, 2021, with early adoption permitted. The Organization is currently evaluating the effect that the new standard will have on its combined financial statements.

Accounting Standards Update 2016-14, Not-for-Profit Entities (Topic 958)

In August 2016, the FASB issued ASU No. 2016-14, *Not-for-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities*, that changes how a not-for-profit organization classifies its net assets, as well as the information it presents in the financial statements and notes about its liquidity, financial performance, and cash flows. The ASU includes a reduction in the number of net asset categories from three to two, conforming requirements on releases of capital restrictions, several new requirements related to expense presentation and disclosure (including investment expenses), and new required disclosures communicating information useful in assessing liquidity. The ASU will be effective for the Organization for the year ending June 30, 2019. Early adoption is permitted. The Organization is currently evaluating the effect that the new standard will have on its combined financial statements.

Note 13 - Subsequent Events

Management has evaluated subsequent events for recognition or disclosure in the financial statements through December 6, 2017 which was the date at which the financial statements were available to be issued.

NEIGHBORHOOD HOUSE

General Information

Organization Number 0037626

Name NEIGHBORHOOD HOUSE

Profit or Non-Profit N - Non-profit

Company Type KCO - Kentucky Corporation

Status A - Active Standing G - Good **State** KY

File Date 5/9/1902 **Organization Date** 5/9/1902 **Last Annual Report** 4/10/2018

Principal Office 201 NORTH 25TH. ST.

LOUISVILLE, KY 40212-1401

Registered Agent PAM J. RICE

> 201 NORTH 25TH STREET LOUISVILLE, KY 40212

Current Officers

President Celia Manlove **Vice President** Ted Nixon

Vicki Hines-Martin **Secretary**

Treasurer Debbie Held Director James Rogers Director Kevin Fuqua **Director** Kelly Bryant

Individuals / Entities listed at time of formation

Director MARSHALL P ELDRED

Director MRS THOMAS A BALLANTIN

Director WM M COTTON **Director** MRS CARL BERG **Director**

MRS KERVIN BULLITT

Incorporator **LUCY BELKNAP** Incorporator **LANA DUPONT** Incorporator PATTY B SEMPLE Incorporator REBECCA R JUDAH

Incorporator PATTY S HILL

Images available online

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

Annual Report 4/10/2018 1 page **PDF Annual Report** 4/19/2017 **PDF** 1 page

Annual Report	3/8/2016	1 page	<u>PDF</u>	
Annual Report	3/31/2015	1 page	<u>PDF</u>	
Annual Report	1/23/2014	1 page	<u>PDF</u>	
Annual Report	1/14/2013	1 page	<u>PDF</u>	
Annual Report	2/9/2012	1 page	<u>PDF</u>	
Annual Report	2/18/2011	1 page	<u>PDF</u>	
Annual Report	2/26/2010	1 page	<u>PDF</u>	
Annual Report	2/16/2009	1 page	<u>PDF</u>	
Annual Report	2/13/2008	1 page	<u>PDF</u>	
Annual Report	1/16/2007	1 page	<u>PDF</u>	
Annual Report	4/6/2006	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	5/23/2005	1 page	<u>PDF</u>	
Annual Report	7/6/2004	1 page	<u>PDF</u>	
Annual Report	5/13/2003	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	5/8/2002	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/23/2001	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/6/2000	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/19/1999	2 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/23/1998	2 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1997	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1996	3 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1995	3 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1994	3 pages	<u>tiff</u>	<u>PDF</u>
Statement of Change	10/5/1993	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1993	2 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1992	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1991	5 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1990	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1989	1 page	<u>tiff</u>	<u>PDF</u>
Articles of Incorporation	5/9/1902	1 page	<u>tiff</u>	<u>PDF</u>

Assumed Names

Activity History

File Date	Effective Date	Org. Referenced
4/10/2018 12:37:57 PM	4/10/2018 12:37:57 PM	
4/19/2017 10:11:20 AM	4/19/2017 10:11:20 AM	
3/8/2016 11:49:57 AM	3/8/2016 11:49:57 AM	
3/31/2015 3:12:30 PM	3/31/2015 3:12:30 PM	
1/23/2014 11:35:40 AM	1/23/2014 11:35:40 AM	
1/14/2013 1:02:07 PM	1/14/2013 1:02:07 PM	
2/9/2012 11:17:22 AM	2/9/2012 11:17:22 AM	
	4/10/2018 12:37:57 PM 4/19/2017 10:11:20 AM 3/8/2016 11:49:57 AM 3/31/2015 3:12:30 PM 1/23/2014 11:35:40 AM 1/14/2013 1:02:07 PM 2/9/2012	4/10/2018

Annual report	2/18/2011 7:28:56 AM	2/18/2011 7:28:56 AM
Annual report	2/26/2010 2:04:17 PM	2/26/2010 2:04:17 PM
Annual report	2/16/2009 10:00:30 AM	2/16/2009 10:00:30 AM
Annual report	2/13/2008 2:44:40 PM	2/13/2008 2:44:40 PM
Annual report	1/16/2007 11:46:23 AM	1/16/2007 11:46:23 AM
Annual report	4/6/2006 8:40:27 AM	4/6/2006
Annual report	5/23/2005	5/23/2005
Annual report	7/6/2004	7/6/2004
Registered agent address change	2/19/2004 11:30:45 AM	2/19/2004
Amendment - Change purpose	5/18/1973	5/18/1973
Amendment - Miscellaneous amendments	10/3/1955	10/3/1955
Amendment - Miscellaneous amendments	1/24/1912	1/24/1912

Microfilmed Images

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

Annual Report	12/31/2004 2:11:27 PM	1 page
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Amendment	1/24/1912	4 pages
Articles of Incorporation	5/9/1902	4 pages