

Neighborhood Council Funding Program
APPLICATION for Neighborhood Purposes Grant (NPG)



This form is to be completed by the applicant seeking the Neighborhood Purposes Grant and submitted to the Neighborhood Council from whom the grant is being sought. All applications for grants must be reviewed and approved in a public meeting. Upon approval of the application the Neighborhood Council (NC) shall submit the application along with all required documentation to the Office of the City Clerk, NC Funding Program.

Name of NC from which you are seeking this grant: Sherman Oaks Neighborhood Council

SECTION I - APPLICANT INFORMATION

1a)	<u>Los Angeles Parks Foundation</u>	<u>26-2358338</u>	<u>California</u>	<u>02/26/2008</u>
	<i>Organization Name</i>	<i>Federal I.D. # (EIN#)</i>	<i>State of Incorporation</i>	<i>Date of 501(c)(3) Status (if applicable)</i>
1b)	<u>2650 N. Commonwealth Avenue</u>	<u>Los Angeles</u>	<u>CA</u>	<u>90027</u>
	<i>Organization Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
1c)	<u></u>	<u></u>	<u></u>	<u></u>
	<i>Business Address (if different)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

1d) **PRIMARY CONTACT INFORMATION:**

<u>Carolyn Ramsey</u>	<u>310-472-1990</u>	<u>carolyn@laparksfoundation.org</u>
<i>Name</i>	<i>Phone</i>	<i>Email</i>

2) **Type of Organization- Please select one:**

- Public School (not to include private schools) **or** 501(c)(3) Non-Profit (other than religious institutions)
 Attach Signed letter on School Letterhead **Attach IRS Determination Letter**

3) LOS ANGELES PARKS FOUNDATION, 2650 N. COMMONWEALTH AVE., LA, CA 90027

<i>Name / Address of Affiliated Organization (if applicable)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
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SECTION II - PROJECT DESCRIPTION

4) **Please describe the purpose and intent of the grant.**

The funds provided by this grant would allow Van Nuys Sherman Oaks Recreation Center to purchase an Ice-O-Matic 30" Air Cooled Undercounter 185lb. Half Size Cube Ice Maker (70-lb Bin). The current ice machine has been broken for a few years. Multiple job orders have been placed for the machine to be fixed, but park staff has been told that the machine is beyond repair. At the moment, there is no ice to give to park patrons for first aid purposes or to use for community special events held at the park.

5) **How will this grant be used to primarily support or serve a public purpose and benefit the public at-large. (Grants cannot be used as rewards or prizes for individuals)**

The ice machine would be used by various programs offered through the Van Nuys Sherman Oaks RC: e.g., day camps, youth sports leagues, Little Folks Preschool, zumba, gymnastics, martial arts, tennis, and dance classes. An ice machine is especially useful during the hot summer months for day camp, servicing 250-300 participants each week (10 weeks total). In addition, having access to ice for first aid purposes is crucial for the 1600 kids the VNSO sports leagues. As a part of programming to the community, VNSO plans several holiday and special events throughout the year, including: Spring Egg Hunt, Opening Day, Parents Night Out, End of Season Banquets, Halloween Boo Bash, and Winter Holiday event. During these events it is beneficial to have access to ice for the complimentary foods and drinks provided to the public.

SECTION III - PROJECT BUDGET OUTLINE

You may also provide the Budget Outline on a separate sheet if necessary or requested.

6a)	Personnel Related Expenses	Requested of NC	Total Projected Cost
		\$	\$
		\$	\$
		\$	\$
6b)	Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
	Ice-O-Matic 30" Air Cooled Undercounter 185 lb. Ice Maker	\$ 2,079.54	\$ 2,079.54
		\$	\$
		\$	\$

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?
 No Yes If Yes, please list names of NCs: _____

8) Is the implementation of this specific program or purpose described in Question 4 contingent on any other factors or sources or funding? (Including NPG applications to other NCs) No Yes If Yes, please describe:

Source of Funding	Amount	Total Projected Cost
	\$	\$
	\$	\$
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application: \$ 2,079.54

10a) Start date: ___/___/___ 10b) Date Funds Required: 05/31/20 10c) Expected Completion Date: 06/30/20
 (After completion of the project, the applicant should submit a Project Completion Report to the Neighborhood Council)

SECTION IV - POTENTIAL CONFLICTS OF INTEREST

11a) Do you (applicant) have a current or former relationship with a Board Member of the NC?
 No Yes If Yes, please describe below:

Name of NC Board Member	Relationship to Applicant

11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application?
 Yes No *(Please note that if a Board Member of the NC has a conflict of interest and completes this form, or participates in the discussion and voting of this NPG, the NC Funding Program will deny the payment of this grant in its entirety.)

SECTION V - DECLARATION AND SIGNATURE

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is truly and accurately stated. I further affirm that I have read the documents "What is a Public Benefit," and "Conflicts of Interest" of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit project/program and that no conflict of interest exist that would prevent the awarding of the Neighborhood Purposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am submitting this application. I further affirm that if the grant received is not used in accordance with the terms of the application stated here, said funds shall be returned immediately to the Neighborhood Council.

12a) Executive Director of Non-Profit Corporation or School Principal - REQUIRED*
CAROLYN RAMSAY EXEC. DIR. *Carolyn Ramsay* 3/24/20
 PRINT Name Title Signature Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*
THOMAS MILLER PRESIDENT *Thomas Miller* 3/25/20
 PRINT Name Title Signature Date

* If a current Board Member holds the position of Executive Director or Secretary, please contact the NC Funding Program at (213) 978-1058 or clerk.ncfunding@lacity.org for instructions on completing this form

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

DEPARTMENT OF THE TREASURY

Date: **AUG 12 2008**

LOS ANGELES PARKS FOUNDATION
C/O ERIC CHO
LATHAM & WATKINS LLP
633 W 5TH ST STE 4000
LOS ANGELES, CA 90071

Employer Identification Number:
26-2358338
DLN:
17053155039018
Contact Person:
WINNIE W LEE ID# 31208
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
February 26, 2008
Contribution Deductibility:
Yes
Advance Ruling Ending Date:
December 31, 2012
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. During your advance ruling period, you will be treated as a public charity. Your advance ruling period begins with the effective date of your exemption and ends with advance ruling ending date shown in the heading of the letter.

Shortly before the end of your advance ruling period, we will send you Form 8734, Support Schedule for Advance Ruling Period. You will have 90 days after the end of your advance ruling period to return the completed form. We will then notify you, in writing, about your public charity status.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 1045 (DO/CG)

LOS ANGELES PARKS FOUNDATION

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

A handwritten signature in black ink that reads "Robert Choi". The signature is written in a cursive style with a large, looped initial "R".

Robert Choi
Director, Exempt Organizations
Rulings and Agreements

Enclosures: Publication 4221-PC
Statute Extension

Part X Public Charity Status (Continued)

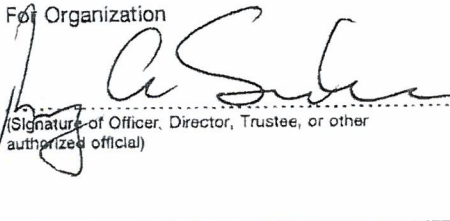
- e 509(a)(4)—an organization organized and operated exclusively for testing for public safety.
- f 509(a)(1) and 170(b)(1)(A)(iv)—an organization operated for the benefit of a college or university that is owned or operated by a governmental unit.
- g 509(a)(1) and 170(b)(1)(A)(vi)—an organization that receives a substantial part of its financial support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public.
- h 509(a)(2)—an organization that normally receives not more than one-third of its financial support from gross investment income and receives more than one-third of its financial support from contributions, membership fees, and gross receipts from activities related to its exempt functions (subject to certain exceptions).
- i A publicly supported organization, but unsure if it is described in 5g or 5h. The organization would like the IRS to decide the correct status.

6 If you checked box g, h, or i in question 5 above, you must request either an **advance** or a **definitive ruling** by selecting one of the boxes below. Refer to the instructions to determine which type of ruling you are eligible to receive.

- a **Request for Advance Ruling:** By checking this box and signing the consent, pursuant to section 6501(c)(4) of the Code you request an advance ruling and agree to extend the statute of limitations on the assessment of excise tax under section 4940 of the Code. The tax will apply only if you do not establish public support status at the end of the 5-year advance ruling period. The assessment period will be extended for the 5 advance ruling years to 8 years, 4 months, and 15 days beyond the end of the first year. You have the right to refuse or limit the extension to a mutually agreed-upon period of time or issue(s). Publication 1035, *Extending the Tax Assessment Period*, provides a more detailed explanation of your rights and the consequences of the choices you make. You may obtain Publication 1035 free of charge from the IRS web site at www.irs.gov or by calling toll-free 1-800-829-3676. Signing this consent will not deprive you of any appeal rights to which you would otherwise be entitled. If you decide not to extend the statute of limitations, you are not eligible for an advance ruling.

Consent Fixing Period of Limitations Upon Assessment of Tax Under Section 4940 of the Internal Revenue Code

For Organization



(Signature of Officer, Director, Trustee, or other authorized official)

Barry A. Sanders

(Type or print name of signer)

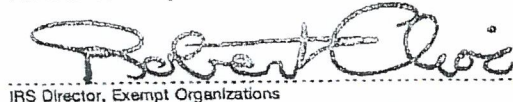
Chairman, President, Director

(Type or print title or authority of signer)

MAY 23 2008

(Date)

For IRS Use Only



IRS Director, Exempt Organizations

AUG 12 2008

(Date)

- b **Request for Definitive Ruling:** Check this box if you have completed one tax year of at least 8 full months and you are requesting a definitive ruling. To confirm your public support status, answer line 6b(i) if you checked box g in line 5 above. Answer line 6b(ii) if you checked box h in line 5 above. If you checked box i in line 5 above, answer both lines 6b(i) and (ii).

- (i) (a) Enter 2% of line 8, column (e) on Part IX-A. Statement of Revenues and Expenses. _____
- (b) Attach a list showing the name and amount contributed by each person, company, or organization whose gifts totaled more than the 2% amount. If the answer is "None," check this box.
- (ii) (a) For each year amounts are included on lines 1, 2, and 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each **disqualified person**. If the answer is "None," check this box.
- (b) For each year amounts are included on line 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each payer, other than a disqualified person, whose payments were more than the larger of (1) 1% of line 10, Part IX-A. Statement of Revenues and Expenses, or (2) \$5,000. If the answer is "None," check this box.

- 7 Did you receive any unusual grants during any of the years shown on Part IX-A. Statement of Revenues and Expenses? If "Yes," attach a list including the name of the contributor, the date and amount of the grant, a brief description of the grant, and explain why it is unusual. Yes No

1 Shipping address

Christina Conyers
14201 HUSTON ST
SHERMAN OAKS, CA 91423-2365
[Add delivery instructions](#)

[Change](#)

2 Payment method

Amazon.com Store Card ending in 6615
Earn 5% back
[Billing address](#): Christina Conyers, 6442 FISHERS CT, MOORPAR...
[Add a gift card or promotion code or voucher](#)
Enter code [Apply](#)
 Apply Amazon Prime Store Card Rewards \$14.52 (14.52 points) available

[Change](#)

[Place your order](#)

By placing your order, you agree to Amazon's [privacy notice and conditions of use](#).

Order Summary

Items	\$1,899.12
Shipping & handling	\$0.00
Total before tax	\$1,899.12
Estimated total to be collected*	\$180.42

Order total: \$2,079.54

[How are shipping costs calculated?](#)
[Why didn't I qualify for Prime Shipping?](#)

3 Review items and shipping

Want to save time on your next order and go directly to this step when checking out?
 Default to these delivery and payment options

Estimated delivery: Mar. 27, 2020 - April 2, 2020

Items shipped from Burkett Restaurant Equipment and Supplies



Ice-O-Matic ICEU150HA 30" Air Cooled Undercounter 185 lb. Half Size Cube Ice Maker - 70 lb. Bin
\$1,899.12
Qty:

Sold by: Burkett Restaurant Equipment and Supplies
In stock
WARNING: ~ California's Proposition 65

Gift options not available.

Choose a delivery option:

You will be contacted to arrange the date of the delivery. Shipping charges may vary based on delivery location. [Learn more](#)
FREE Arranged Freight Delivery

The carrier will call you at 818-783-5121. [Change](#)

[Place your order](#)

Order total: \$2,079.54

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