



"Creating a Better Future for Our Community through Advocacy, Mentorship and Education"

April 1,2018

Tarzana Neighborhood Council P.O. Box 571016 Tarzana, Ca. 91357

Re:

Neighborhood Purposes Grant

Budget and Finance Committee Meeting: April 18, 2018

Dear Tarzana Neighborhood Council,

Please find attached our application for a Neighborhood Purposes Grant to be used to support the Teen Court program.

It is our desire to bring this request to the attention of your Budget and Finance Committee at their meeting on April 18th and then for them to make a recommendation to your board.

If this is the incorrect procedure, please inform me of the correct procedure by email.

We look forward to providing information to you about this program that is providing services to your Neighborhood Council.

If there is any more information you need or if you have any other questions or comments please do not hesitate to contact me. My cell phone number is 818-943-0163 and my email address is SeymourAmster.pesa@gmail.com.

Sincerely,

Seymour I. Amster

Executive Director of PESA

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. The Neighborhood Council (NC), upon approval of the application, shall submit the approved application along with all required documentation to the Department of Neighborhood Empowerment.

Tarzana Neighborhood Council Name of NC from which you are seeking this grant: **SECTION I- APPLICANT INFORMATION** Parents. Teachers/Educators & Students in Action (PESA) 46-2694430 **CALIFORNIA** 12/01/13 Federal I.D. # (EIN#) State of Incorporation Date of 501(c)(3) Organization Name Status (if applicable) **GRANADA HILLS** CA 91344 18017 CHATSWORTH ST. #337 Zip Code Organization Mailing Address Citv State 8727 VAN NUYS BLVD. #2 **GRANADA HILLS** CA 91402 Business Address (If different) City State Zip Code 1d) PRIMARY CONTACT INFORMATION: SEYMOUR AMSTER (800) 894-7201 SEYMOURAMSTER.PESA@GMAIL.CC Phone Email Name 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 IRS Determination Letter **Attach Grant Request on School Letterhead** 3) Name / Address of Affiliated Organization City State Zip Code (If applicable)

SECTION II - PROJECT DESCRIPTION

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

The purpose and the intent of this grant is to obtain funding as it relates to this Neighborhood Council so that the Teen Court Program can continue have a positive impact in the boundaries of this Neighborhood Council. The Teen Court program impacts the community by reducing crime committed by juveniles, as well as addressing the issue of hate crimes and incidents in the City of Los Angeles. PESA is the non-profit that provides support and funding for the Teen Court Program.

Teen Court diverts youthful offenders from the traditional justice system, and specifically addresses hate crime incidents through its SHADES program. A youthful offender is tried at in front of a jury of high school students and with a real judge presiding. The jury is allowed to ask questions of the youthful offender and his parents. If the jury finds the youthful offender culpable, the jury recommends diversionary terms and the judge imposes diversionary conditions usually following the recommendations of the jury. A judicial officer is designated as a mentor for the offending youth being tried under the SHADES component of the program and is required to do community service specific to his bias.

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)

Youthful offenders are residents who live in the area the Neighborhood Council encompasses. For a youthful offender is not tried at a school he attends but is located near his residence. Thus one of the public purposes the grant will be used for is to sustain the Teen Court program at a location convenient for the residents in the neighborhood council area.

The high school students who participate in the program learn the value of not committing crimes, as well as the consequences of committing a crime. Thus the program helps to enhance public safety by teaching the participants the value of not committing crimes such as vandalism, shoplifting, and assaults. Each summer there is a week long training program at the Museum of Tolerance, for the SHADES portion of the Teen Court program. The students learn about the values of inter-cultural tolerance. Only jurors who have completed this program can participate in a Teen Court case that involves an incident of hate. Also each summer there is the CAYC annual summit where students go to a college campus for 4 days and interact with students from other parts of California who are involved in Teen Court programs. During the school year the students participate in training sessions and other events where they are assisted in creating presentations and are given the opportunity to present what they have learned to the community. This grant would be used to support the entire Teen Court Program including the Outreach Programs described, as it relates to the boundaries to this Neighborhood Council.

ECTION III - PROJEC	T BUDGET OUTLI	NE				
a) Personnel Relate	d Expenses		Reques	ted of NC	Total Project	ted Cost
		nd Club & Data Collection		\$ 1,500.00	NAME OF TAXABLE PARTY.	\$ 45,000.00
Support for Events an	d Field Trips & Data Co	ollection		\$ 1,500.00		\$ 55,000.00
Monitoring Youthful O	ffenders & Data Collec	tion		\$ 2,000.00	1750 M.	\$ 40,000.00
b) Non-Personnel R	elated Expenses		Reques	ted of NC	Total Projec	ted Cost
Program Fees not inc	luded in above			\$ 0.00		\$ 17,000.00
Bus and other Transp	ortation not included in	above		\$ 0.00		\$ 7,500.00
Training Materials not	included in above			\$ 0.00		\$ 14,000.00
		other Neighborhood Counter of NCs: Most of the other				>
3) Is the implementa	ation of this specif	fic program or purpose de	scribed in bo	x 4 above co	ntingent on a	ny other
factors or source	s or funding? (Inc	cluding NPG applications	to other NCs)	■ No	☐ Yes, ple	ease describe
Source of Fundin	g		Amoun		Total Projec	ted Cost
follow-up form CTION IV - POTENT	to the Neighborh	(After completion ood Council and the Depander of INTEREST				
	· ·	r existing relationship with	a Board Mer	nber of the N	C?	
Name of NC Boar	☐ Yes - Please o	describe below:		Relationship	to Applicant	
filing this application interest and compared will deny the payr	tion? □Yes pletes this form, o ment of this grant	r participates in the discus in its entirety.)	at if a Board	Member of th	e NC has a c	
CTION V - DECLAR	ATION AND SIGNA	ATURE				
I hereby affirm tha	at, to the best of m	ny knowledge, the informa	tion provided	I herein and o	ommunicate	d otherwise
		ther affirm that I have read				
		of this application and affi	•			
		nefit project/program and				
•		orhood Purposes Grant. I				
		m submitting this applicat ms of the application state			•	
to the Neighborho		ms of the application state	eu nere, salu	iulius silali b	e returned in	illediately
a) Executive Directo	r of Non-Profit Co	rporation or School Princi	ipal - REQUIR	RED*		
SEYMOUR AMSTER		EXECUTIVE DIRECTOR		7~		4/01/1
PRINT	Name	Title	The state of the s	Signature	2 1	Date
b) Secretary of Non-	profit Corporation	or Assistant School Princ	ipal - REQUE	7 RED* .	8 1	9
FRANCINE AMSTER		SECRETARY	MA	Ken //	Mhorald.	4/01/
PRINT	Name	Title	-//	Signature		Date

^{*} If a current Board Member holds the position of Executive Director or Secretary, please contact the Department at (213) 978-1551 for instructions on completing this form



OGDEN UT 84201-0029

In reply refer to: 4077591934 Oct. 28, 2015 LTR 4168C 0 46-2694430 000000 00

00030922

BODC: TE

PARENTS EDUCATORS-TEACHERS & STUDENTS IN ACTION 18017 CHATSWORTH ST GRANADA HILLS CA 91344-5608



Employer Identification Number: 46-2694430
Person to Contact: Ms. Wiles
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Oct. 05, 2015, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in December 2013.

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.

4077591934 Oct.-28, 2015 LTR 4168C 0 46-2694430 000000 00 00030923

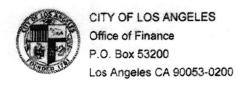
PARENTS EDUCATORS-TEACHERS & STUDENTS IN ACTION 18017 CHATSWORTH ST GRANADA HILLS CA 91344-5608

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

Sincerely yours,

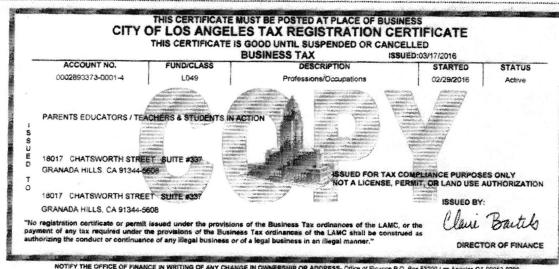
Jeffrey I. Cooper

Director, EO Rulings & Agreement



PARENTS EDUCATORS / TEACHERS & STUDENTS IN ACTION

18017 CHATSWORTH STREET SUITE #337 GRANADA HILLS, CA 91344-5608 18017 CHATSWORTH STREET SHITE #337 GRANADA HILLS, CA 91344-5608



(Rev. December 2014) Department of the Treasury

Request for Taxpayer Identification Number and Certification

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 lin	e: do pot loove this is a start						丄					
	Parents, Educators/Teachers & Students in Action												
N	2 Business name/disregarded entity name, if different from above												
90													
d c	3 Check appropriate box for federal tax classification; check only one of the following seven boxes:												
Print or type Specific Instructions on page	single-member LLC Corporation S Corporation Partnership Trust/estate						4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):						
ic 3	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶						Exempt payee code (if any)						
Print or type	Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.						Exemption from FATCA reporting code (if any)						
g 2	☐ Other (see instructions) ▶						(Applies to accounts maintained outside the U.S.)						
SC	5 Address (number, street, and apt. or suite no.) Requester's name						and address (optional)						
8	. Charavorus Sueet, Suite 337					and tradition (opticalist)							
See	6 City, state, and ZIP code												
0,	Granada Hills, Ca. 91344												
1	7 List account number(s) here (optional)									··········	***********	***************************************	
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Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is penerally your pooled on the name given on line 1 to avoid					Social security number								
resident alien, sole proprietor, or discounded early your social security number (SSN). However, for a					T	T	T	T	1	Г			
entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.						-	•		-		***************************************		
									J				
Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.					Employer identification number								
The state of the s						T	T	T			T	=	
Part	I Certification			4 (6	- 2	6	9	4	4	3	0	
	penalties of perjury, I certify that:		***************************************					<u></u>					
1. The	number shown on this form is my correct towns and it also		***************************************							***************************************	***************************************		
2. lam	number shown on this form is my correct taxpayer identification number subject to backup withholding because (a)	mber (or I am waiting for a	number	to b	oe is	ssued	to m	ie); 2	nd				
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue no longer subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am										nue at Lam			
	a U.S. citizen or other U.S. person (defined below); and										,-		
4. The FATCA code(s) entered on this form (if any) indicating that I am average to the second													
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding interest paid acquisition as the control of the IRS that you are currently subject to backup withholding interest paid acquisition as the control of the IRS that you are currently subject to backup withholding interest paid acquisition as the control of the IRS that you are currently subject to backup withholding interest paid acquisition as the IRS that you are currently subject to backup withholding interest paid acquisition as the IRS that you are currently subject to backup withholding interest paid acquisition as the IRS that you are currently subject to backup withholding interest paid acquisition as the IRS that you are currently subject to backup withholding interest paid acquisition as the IRS that you are currently subject to backup withholding interest paid acquisition as the IRS that you are currently subject to backup withholding interest paid acquisition as the IRS that you are currently subject to backup withholding interest paid acquisition as the IRS that you are currently subject to backup withholding interest paid acquisition as the IRS that you are currently subject to backup withholding interest paid acquisition as the IRS that you are currently subject to backup withholding interest paid acquisition as the IRS that you are currently subject to backup withholding interest paid and IRS that you are currently subject to backup withholding interest paid and IRS that you are currently subject to backup withholding interest paid and IRS that you are currently subject to backup withholding interest paid and IRS that you are currently as the IRS that													
because	you have failed to report all interest and dividends on your tax returned, acquisition or abandonment of secured property, cancellation	en notified by the IRS that	you are	cur	rent	y sub	ect	to b	acku	p wit	hho	lding	
	y, payments other than interest and dividends, you are not required ons on page 3.	to sign the certification, but	t you m	ust	pro	vide yo	our	corre	ct Ti	NS	N, a	na m	
oign	Signature of		-								יי ייי	10	
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General Instructions		 Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T 											
	ferences are to the Internal Revenue Code unless otherwise noted.	Form 1099-C (canceled debt)											
	velopments. Information about developments affecting Form W-9 (such on enacted after we release it) is at www.irs.gov/fw9.	 Form 1099-A (acquisition or abandonment of secured property) 											
Purpos	e of Form	Use Form W-9 only if you are a U.S. person (including a resident alien), to											

as

P

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification or unber (ATIN), adoption taxpayer identification or unber (ATIN), or employer. which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

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? on page 2.

- By signing the filled-out form, you:
- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Gertify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.