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.

	Name of NC from which you are seeking this grant:	. <u>Ta</u>	rzana Neigh	borhood	d Council	
SEC	TION I- APPLICANT INFORMATION					
10)	WH-Tarzana Community Benefit Foundation	45-0775689		CA		05/10/11
1a)	Organization Name	Feder	al I.D. # (EIN#)	State of	Incorporation	Date of 501(c)(3) Status (if applicable)
41.	PO Box 1	Woodland Hills		CA	91365-0001	
1b)	Organization Mailing Address	City			State	Zip Code
	6100 Topanga Canyon Boulevard	Woodland Hills		CA	91367	
1c)	Business Address (If different)	City			State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:					
	Diana Williams	(818) 347-4737			diana@woodlar	ndhillscc.net
	Name	Phone			Email	
2)	Type of Organization- Please select one: Public School (not to include private schools)	or [501(c)(3) Noi	n-Profit	(other than religio	us institutions)
	Attach Grant Request on School Letterhea	Attach IRS Determination Letter				
	PO Box1			dland Hills, CA 9136		
3)	Name / Address of Affiliated Organization (If applicable)		City		State	Zip Code

SECTION II - PROJECT DESCRIPTION

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

The Tarzana Neighborhood Council and the Woodland Hills-Tarzana Community Benefit Foundation are co-sponsoring the 6th annual Earth Day Celebration and Art Poster Contest on Saturday April 8th, 2017 at the Tarzana Recreation Center.

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)

(6) Tarzana Schools are participating in an art poster contest encouraging youth to take care of earth and to make a difference. This year's theme is to empower children to participate in keeping the air we breathe clean and to take care of our environment. "Plant a seed for our future." It will also create an awareness in our community of the importance of art in schools. Each participating school will receive a \$250 art grant.

<u>-</u> C1	TION III - PROJECT BUDGET OUTLINE		
a) [Personnel Related Expenses	Requested of N	C Total Projected Cost
-			
- Section			
		S	
)	Non-Personnel Related Expenses	Requested of N	IC Total Projected Cost
***************************************	\$250 art grant for the 6 schools-Vanalden Avenue Elementary School, Wilbu for Enriched Academics, Tarzana Elementary School, Nestle Avenue Elementary		
-	ter School, Portola Middle School and Sherman Oaks Center for Enriched		500.00
	Have you (applicant) applied to any other Neighborhood Co No D Yes, please list names of NCs:		
	Is the implementation of this specific program or purpose of factors or sources or funding? (Including NPG applications)		ve contingent on any other No U Yes, please describe
900000	Source of Filmding	Amount	Total Projected Cost
-		1	
	What is the TOTAL amount of the grant funding requested	with this application:	\$ 1,500.00
1	Start date: 01/20/17 10b) Date Funds Required:		
a)			
c)			applicant must submit a
	follow-up form to the Neighborhood Council and the Dep TION IV - POTENTIAL CONFLICTS OF INTEREST	partment of Neighborn	cod Empowernent)
	TRUNTO * FOLICIATIME CONFERD TO OF BATEREST		
	Do you (applicant) have a former or existing relationship will No Yes - Please describe below:	ith a Board Member of	the NC?
	Do you (applicant) have a former or existing relationship w		the NC?
	Do you (applicant) have a former or existing relationship will No		
	Do you (applicant) have a former or existing relationship will No		
a)	Do you (applicant) have a former or existing relationship wi ■ No □ Yes - Please describe below: Name of NC Board Member	Relatio	onship to Applicant
a)	Do you (applicant) have a former or existing relationship with the No	Relation Rel	ney before er of the NC has a conflict of
a)	Do you (applicant) have a former or existing relationship will no Pes - Please describe below: Name of NC Board Member If yes, did you request that the board member consult the Cifiling this application? Pyes No *(Please note Interest and completes this form, or participates in the discipling the payment of this grant in its entirety.)	Relation Rel	ney before er of the NC has a conflict of
la)	Do you (applicant) have a former or existing relationship with No	Relation Rel	ney before er of the NC has a conflict of
1a)	Do you (applicant) have a former or existing relationship with No Yes - Please describe below: Name of NC Board Member If yes, did you request that the board member consult the Cifiling this application? Yes No (Please note interest and completes this form, or participates in the discipated will deny the payment of this grant in its entirety.) TION V - DECLARATION AND SIGNATURE I hereby affirm that, to the best of my knowledge, the inform is truly and accurately stated. I further affirm that I have reappendix B "Conflicts of Interest" of this application and a fall within the criteria of a public benefit project/program as prevent the awarding of the Neighborhood Purposes Grant Neighborhood Council to whom I am submitting this application st	Relation Office of the City Attorn that if a Board Member sussion and voting of the mation provided herein ad Appendix A, "What ffirm that the propose and that no conflict of in the latter affirm that I am not cation. I further affirm	ney before er of the NC has a conflict of this NPG, the Department and communicated otherwise is a Public Benefit," and d project(s) and/or program(s) nterest exist that would a current Board Member of the that if the grant received is not
(a)	Do you (applicant) have a former or existing relationship with No Yes - Please describe below: Name of NC Board Member If yes, did you request that the board member consult the Cilling this application? Yes No *(Please note interest and completes this form, or participates in the discipant will deny the payment of this grant in its entirety.) TION V - DECLARATION AND SIGNATURE I hereby affirm that, to the best of my knowledge, the inform is truly and accurately stated. I further affirm that I have read payments and a fall within the criteria of a public benefit project/program at prevent the awarding of the Neighborhood Purposes Grant Neighborhood Council to whom I am submitting this application st to the Neighborhood Council.	Pelation Office of the City Attorn that if a Board Member cussion and voting of the mation provided herein ad Appendix A, "What ffirm that the propose and that no conflict of in the lam not cation. I further affirm atted here, said funds	ney before er of the NC has a conflict of this NPG, the Department and communicated otherwise is a Public Benefit," and d project(s) and/or program(s) nterest exist that would a current Board Member of the that if the grant received is not
a)	Do you (applicant) have a former or existing relationship with No Yes - Please describe below: Name of NC Board Member If yes, did you request that the board member consult the Cifiling this application? Yes No (Please note interest and completes this form, or participates in the discipated will deny the payment of this grant in its entirety.) TION V - DECLARATION AND SIGNATURE I hereby affirm that, to the best of my knowledge, the inform is truly and accurately stated. I further affirm that I have reappendix B "Conflicts of Interest" of this application and a fall within the criteria of a public benefit project/program as prevent the awarding of the Neighborhood Purposes Grant Neighborhood Council to whom I am submitting this application st	Pelation Office of the City Attorn that if a Board Member cussion and voting of the mation provided herein ad Appendix A, "What ffirm that the propose and that no conflict of in the lam not cation. I further affirm atted here, said funds	ney before er of the NC has a conflict of this NPG, the Department and communicated otherwise is a Public Benefit," and d project(s) and/or program(s) nterest exist that would a current Board Member of the that if the grant received is not
b)	Do you (applicant) have a former or existing relationship with No Yes - Please describe below: Name of NC Board Member If yes, did you request that the board member consult the Cilling this application? Yes No (Please note interest and completes this form, or participates in the discipation will deny the payment of this grant in its entirety.) TION V - DECLARATION AND SIGNATURE I hereby affirm that, to the best of my knowledge, the informistruly and accurately stated. I further affirm that I have readpendix B "Conflicts of Interest" of this application and a fall within the criteria of a public benefit project/program as prevent the awarding of the Neighborhood Purposes Grant Neighborhood Council to whom I am submitting this application st to the Neighborhood Council. Executive Director of Non-Profit Corporation or School Prince.	Relation Provided Herein and Appendix A, "What fifirm that the propose and that no conflict of it. I affirm that I am not cation. I further affirm ated here, said funds ancipal REQUIRED*	ney before er of the NC has a conflict of this NPG, the Department and communicated otherwise is a Public Benefit," and d project(s) and/or program(s) nterest exist that would a current Board Member of the that if the grant received is not shall be returned immediately
(a)	Do you (applicant) have a former or existing relationship with No Yes - Please describe below: Name of NC Board Member If yes, did you request that the board member consult the Cilling this application? Yes No *(Please note interest and completes this form, or participates in the discipant will deny the payment of this grant in its entirety.) TION V - DECLARATION AND SIGNATURE I hereby affirm that, to the best of my knowledge, the inform is truly and accurately stated. I further affirm that I have read pendix B "Conflicts of Interest" of this application and a fall within the criteria of a public benefit project/program at prevent the awarding of the Neighborhood Purposes Grant Neighborhood Council to whom I am submitting this application st to the Neighborhood Council. Executive Director of Non-Profit Corporation or School Prinding Williams PRINT Name Title	Period Relation Provided Herein and Appendix A, "What ffirm that the propose and that no conflict of int. I affirm that I am not eation. I further affirm that here, said funds and here, said funds and here.	ney before er of the NC has a conflict of this NPG, the Department and communicated otherwise is a Public Benefit," and d project(s) and/or program(s) nterest exist that would a current Board Member of the that if the grant received is not shall be returned immediately
a) b)	Do you (applicant) have a former or existing relationship with No Yes - Please describe below: Name of NC Board Member If yes, did you request that the board member consult the Cilling this application? Yes No *(Please note interest and completes this form, or participates in the discipation will deny the payment of this grant in its entirety.) TION V - DECLARATION AND SIGNATURE I hereby affirm that, to the best of my knowledge, the inform is truly and accurately stated. I further affirm that I have read payment of a public benefit project/program at prevent the awarding of the Neighborhood Purposes Grant Neighborhood Council to whom I am submitting this application st to the Neighborhood Council. Executive Director of Non-Profit Corporation or School Principle Diana Williams Executive Director PRINT Name Title Secretary of Non-profit Corporation or Assistant School Principal Corporation or	Period Relation Provided Herein and Appendix A, "What ffirm that the propose and that no conflict of int. I affirm that I am not eation. I further affirm that here, said funds and here, said funds and here.	ney before er of the NC has a conflict of this NPG, the Department and communicated otherwise is a Public Benefit," and d project(s) and/or program(s) nterest exist that would a current Board Member of the that if the grant received is not shall be returned immediately
a) b)	Do you (applicant) have a former or existing relationship with No Yes - Please describe below: Name of NC Board Member If yes, did you request that the board member consult the Cilling this application? Yes No *(Please note interest and completes this form, or participates in the discipant will deny the payment of this grant in its entirety.) TION V - DECLARATION AND SIGNATURE I hereby affirm that, to the best of my knowledge, the inform is truly and accurately stated. I further affirm that I have read pendix B "Conflicts of Interest" of this application and a fall within the criteria of a public benefit project/program at prevent the awarding of the Neighborhood Purposes Grant Neighborhood Council to whom I am submitting this application st to the Neighborhood Council. Executive Director of Non-Profit Corporation or School Prinding Williams PRINT Name Title	Period Relation Provided Herein and Appendix A, "What ffirm that the propose and that no conflict of int. I affirm that I am not eation. I further affirm that here, said funds and here, said funds and here.	ney before er of the NC has a conflict of this NPG, the Department and communicated otherwise is a Public Benefit," and d project(s) and/or program(s) nterest exist that would a current Board Member of the that if the grant received is not shall be returned immediately

Revised 012615 - Page 2 of 2

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

DEPARTMENT OF THE TREASURY

ID# 31309

Date:

MAY 1 0 2011

WOODLAND HILLS TARZANA CHAMBER OF COMMERCE COMMUNITY BENEFIT C/O WHICC 20121 VENTURA BLVD STE 204 WOODLAND HILLS, CA 91364

Employer Identification Number: 45-0975689 DLN: 17053095374001

Contact Person: DEL TRIMBLE

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 14, 2011 Contribution Deductibility: Yes

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. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

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.