## 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.

me	of NC from which you are seeking this grant:	Tarzana NC			angangangangangan di Kalanganganganganganganganganganganganganga
•					:
- desiring the	TION I- APPLICANT INFORMATION WH-Tarzana Community Benefit Foundation	45-0975689	CA		5/10/2011
121	Organization Name	Federal I.D. # (EIN#)	State of Inco	rporation	Date of 501(c)(3) Status (if applicable
1h)	PO Box 1	Woodland H	lills (	A	91365-0001
•	Organization Mailing Address	City	S	tale	Zip Code
1c)	6100 Topanga Canyon Blvd	Woodland H	lills (	A	91367
10)	Business Address (If different)	City	S	tate	Zip Code
1d):		18-347-4737	diana@	woodla	andhillscc.net
	Name	Phone	En	ail	
2)	Type of Organization- Please select one: Public School (not to include private schools) Attach Signed letter on School Letterhead	or 501(c)(3) No Attach IRS	n-Profit (other t Determination	han religious Letter	s institutions)
3)	Name / Address of Affiliated Organization (if app	licable) City		State	Zip Code

#### SECTION II - PROJECT DESCRIPTION

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

Tarzana Recreation Center will be offering summer camp this year during the COVID-19 Pandemic. They only have room for 48 campers, 6 groups of 8. The camp will require social distancing. In order to accomplish the goal of 8 groups, the gym will be required to be split into space for two group. Thus the Rec Center needs to purchase a "Freestanding Portable Partition" to provide for the social distancing in the gym. Other rooms in the Rec Center complex do not fit the required guidelines.

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)

This grant will allow a greater number of campers to attend the Tarzana Recreation summer camp, by creating a better use of space available.

NPG TNCAWH-TCBF 6-11-20

Personnel Related Expanses	Requested of NC	Total Projected Cost
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	IS	5
Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
Purchase of "Freestanding Portable Partition	\$2179.52	\$2179.52
	\$	\$
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7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?

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) IN O I Yes If Yes, please describe:

	rojected Cost	atal Projecte	Īte	Amount		in the second	ina	urce of Fund
		( )	5	5				
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			8	\$	and the second se		an ay an	

9) What is the TOTAL amount of the grant funding requested with this application: \$2,179.52

10a) Start date:  $\frac{06}{29}$   $\frac{29}{2020}$  10b) Date Funds Required:  $\frac{07}{10}$   $\frac{10}{2020}$  10c) Expected Completion Date:  $\frac{8}{14}$   $\frac{14}{2020}$  (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 No	<b>Yes</b>	If Yes, pleas	e describe below:	and the second	
Name	of NC Board	Member		arti	Relationship to Applicant
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	property of a start and to the second	et de la la propositione de la construction de la construction de la construction de la construction de la const	a na manana ang ang ang ang ang ang ang ang an	a construction of the second sec	a provinsi and a figure relation we wanted from a provinsi and the provinsi and the provinsi of the provinsi of
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11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application?

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\*

Diana Williams	CEO	Dear DU	A 6/11/2020
PRINT Name	Title	Signature	Date
12b) Secretary of Non-profit Corporation	or Assistant School Pri		

× 11.

PRINT Name	Titie	Signature	Date
Paul Lawler	Board Corporate Secretary	And Sauler	6/11/2020

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

DEPARTMENT OF THE TREASURY

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

Date: MAY 1 0 2011

WOODLAND HILLS TARSANA CHAMBER OF COMMERCE COMMUNITY BENEFIT C/O WETCC 20121 VENTURA BLVD STE 204 WOODLAND HILLS, CA 91364 Employer Identification Number: 45-0975689 DLN:

17053095374001 Contact Person: DEL TRIMBLE Contact Telephons Number: (377) 829-5500

ID# 31309

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:

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 latter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

No

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 Charitles, for some helpful information about your responsibilities as an exempt organization.

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Letter 947 (DO/CG)

Departi	WJ-9 October 2018) ment of the Treasury. Revenue Service	Request for Taxpayer Identification Number and Certific So to www.irs.gov/FormW9 for instructions and the lates	· · · ·	Give Form to the requester. Do not send to the IRS.
	Woodland Hills-Tar. 2 Business name/disrega	Ir income tax return). Name is required on this line; do not leave this line blank, zana Chamber of Commerce Community Benefit Foundation ded entity name, if different from above Center Chamber of Commerce Community Benefit Found		
Print or type. Specific Instructions on page 3.	following seven boxes. Individual/sole propr single-member LLC Limited liability comj Note: Check the app LLC if the LLC is cla another LLC that is;	pany. Enter the tax classification (C=C corporation, S=S corporation, P=Partners propriate box in the line above for the tax classification of the single-member ow ssified as a single-member LLC that is disregarded from the owner unless the or not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single the owner should check the appropriate box for the tax classification of its owner	Certain instruct Exempt ship) ▶ mer. Do not check wher of the LLC is te-member LLC that r.	ptions (codes apply only to entitles, not individuals; see ions on page 3): payee code (if any) ion from FATCA reporting any) accounts maintained outside line U.S.)
See Sp	PO Box 1 6 City, state, and ZIP cod	91365-0001	Requester's name and addre	ss (optional)
	your TIN in the appropri	tentification Number (TIN) are box. The TIN provided must match the name given on line 1 to avo		mber
reside entitie 77N; li Note:	ent alien, sole proprietor, es, it is your employer ide ater. If the account is in more	duals, this is generally your social security number (SSN). However, for or disregarded entity, see the instructions for Part I, later. For other antification number (EIN). If you do not have a number, see How to get than one name, see the instructions for line 1. Also see What Name a or for guidelines on whose number to enter.	and Employer identific	ation number 9 7 5 6 8 9
Par Unde	t II Certificatio	and an a second s	ngga and a final and a fin	<mark>n in de la constant d Constant de la constant de la constan Constant de la constant de la constant</mark>

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 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 Service (IRS) that I am 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 no longer subject to backup withholding; and
- 3. I am 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 exempt from FATCA reporting is correct.

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 because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

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### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to the 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 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 brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098 T (student loan interest),
- 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident allen), to provide your correct TIN.

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.