

# 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: North Hills West Neighborhood Council

### SECTION I- APPLICANT INFORMATION

- 1a) New Horizons 95-1862084 CA April 1957  
*Organization Name* *Federal I.D. # (EIN#)* *State of Incorporation* *Date of 501(c)(3) Status (if applicable)*
- 1b) 15725 Parthenia St North Hills CA 91343  
*Organization Mailing Address* *City* *State* *Zip Code*
- 1c) \_\_\_\_\_  
*Business Address (if different)* *City* *State* *Zip Code*
- 1d) **PRIMARY CONTACT INFORMATION:**  
Daryl Rubin 818-894-7422 drubin@newhorizons-sfv.org  
*Name* *Phone* *Email*
- 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) \_\_\_\_\_  
*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.

New Horizons would like to purchase 225 chairs from Van Nuys Restaurant Depot discounted to \$20 per chair. These would be used in the Sam's Cafe space on campus for meetings and events replacing old torn and broken chairs.

- 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)

Since the pandemic, New Horizons has cautiously transitioned back to holding community and local legislative meetings. Sam's Cafe is available to the public to be used for private and community meetings. Requests to use our space has dramatically increased over the past year and it is evident we need to replace the aging and broken chairs if we are going to host these events. Some of which include the LA County Regional Center, John Lee's annual Educators Forum, North Hills Neighborhood Council and other service organizations.

**SECTION III - PROJECT BUDGET OUTLINE**

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

6a)	<b>Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
		\$	\$
		\$	\$
		\$	\$

6b)	<b>Non-Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
	225 stackable chairs	\$4500	\$4500
		\$	\$
		\$	\$

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:

<b>Source of Funding</b>	<b>Amount</b>	<b>Total Projected Cost</b>
	\$	\$
	\$	\$
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application: \$ 4500

10a) Start date: 05/01/24 10b) Date Funds Required: 05/15/24 10c) Expected Completion Date: 06/15/24  
(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:

<b>Name of NC Board Member</b>	<b>Relationship to Applicant</b>

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\*

John C Brauer

President/CEO

*John Brauer*

02/08/24

PRINT Name

Title

Signature

Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED\*

Greg Buesing

Secretary

*G Buesing*

02/08/24

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](mailto: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: November 14, 2013

Person to Contact:

Mrs. Day #0110209

Toll Free Telephone Number:

877-829-5500

Employer Identification Number:

95-1862084

NEW HORIZONS: SERVING INDIVIDUALS WITH  
SPECIAL NEEDS  
15725 PARTHENIA ST  
SEPULVEDA CA 91343-4913

Dear Sir or Madam:

This is in response to your October 31, 2013 request for information regarding your tax-exempt status.

Our records indicate you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in April 1957.

Our records also indicate you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section 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/charities](http://www.irs.gov/charities) for information regarding filing requirements. Specifically, note that section 6033(j) of the Code automatically revokes the tax-exemption of any organization that fails to satisfy its filing requirement for three consecutive years. The automatic revocation of exemption is effective as of the due date of the third required annual filing or notice. The IRS maintains a list of organizations whose tax-exempt status was automatically revoked at IRS.gov.

If you have any questions, please call the phone number in the heading of this letter.

Sincerely,



Kenneth Corbin  
Acting Director,  
Exempt Organizations