

**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

**SECTION I - APPLICANT INFORMATION**

1a) NoHo Home Alliance 82 - 4768699 California 06/12/2018  
*Organization Name* *Federal I.D. # (EIN#)* *State of Incorporation* *Date of 501(c)(3) Status (if applicable)*

1b) 11031 Camarillo Street North Hollywood CA 91602  
*Organization Mailing Address* *City* *State* *Zip Code*

1c) \_\_\_\_\_  
*Business Address (if different)* *City* *State* *Zip Code*

1d) **PRIMARY CONTACT INFORMATION:**  
Stephanie Caridad // 818-927-5549 // stephaniecaridad@nohohome.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.**

NoHo Home Alliance will utilize grant money received to operate the Drop-In Access Center for People Experiencing Homelessness, maximizing the number of unhoused persons receiving stabilization & housing services in the Sherman Oaks neighborhoods. The Access Center's success comes from NoHo Home's deep experience and existing relationships with the unhoused population of this community. At the Access Center, unhoused neighbors will have access to bathrooms & showers, hot meals, mail & phone charging, clothing, as well as housing stabilization, physical, and mental health services.

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)**

NoHo Home Alliance is a hyper-local organization serving the unhoused neighbors in the East San Fernando Valley. Our services are the pathway towards building relationships with our unhoused neighbors. Through these relationships, we can best understand how to support their goals, and provide a full range of stabilizing services which advance the people from and in our neighborhood towards housing and thriving. We nurture community with the understanding that change becomes possible in the context of safe, reliable relationships that affirm human dignity. By supporting services in Sherman Oaks, the Neighborhood Council is supporting the end of individuals' homelessness in the neighborhood, to the benefit of the entire community.

**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>
	Site Managers to coordinate care for housing stabilization	\$2500	\$6,600
		\$	\$
		\$	\$

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

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

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: \$ 2500

10a) Start date: 5 / 1 / 24 10b) Date Funds Required: 4 / 30 / 24 10c) Expected Completion Date: 6 / 30 / 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:


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\*

Stephanie Caridad Executive Director  2/14/24  
 PRINT Name Title Signature Date

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

Benji Boehlke Secretary  2/14/24  
 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: **JUN 12 2018**

NOHO HOME ALLIANCE  
11031 CARMARILLO ST  
NORTH HOLLYWOOD, CA 91602

Employer Identification Number:  
82-4768699  
DLN:  
17053157380008  
Contact Person:  
DEL TRIMBLE ID# 31309  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
170(b)(1)(A)(vi)  
Form 990/990-EZ/990-N Required:  
Yes  
Effective Date of Exemption:  
February 20, 2018  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

NOHO HOME ALLIANCE

Sincerely,

*Stephen a. martin*

Director, Exempt Organizations  
Rulings and Agreements

**NoHo Home Alliance**  
**Budget Overview: Budget Fiscal Year '23-'24**  
**July 2023 - June 2024**

	<b>Total</b>
<b>Revenue</b>	
<b>40000 Contract Income</b>	
40100 CD4	87,000.00
40200 Other Contracts	21,000.00
<b>Total 40000 Contract Income</b>	<b>\$ 108,000.00</b>
<b>40300 Contributed Revenue</b>	
40400 Board Fundraising	30,000.00
40500 Corporate Giving	75,000.00
40600 Events & Campaigns	60,000.00
40700 Grants	305,500.00
40800 Individual Donations	45,000.00
<b>Total 40300 Contributed Revenue</b>	<b>\$ 515,500.00</b>
<b>Total Revenue</b>	<b>\$ 623,500.00</b>
<b>Gross Profit</b>	<b>\$ 623,500.00</b>
<b>Expenditures</b>	
<b>0100 Benefits and Taxes</b>	
50100 Benefits	31,608.00
50200 Employer Payroll Tax Expense	22,410.00
50300 Worker's Comp. Insurance	22,572.00
<b>Total 0100 Benefits and Taxes</b>	<b>\$ 76,590.00</b>
<b>50400 Contractors and Services</b>	
50500 Custodial Services & Waste Management (SMLC)	20,040.00
50600 Portable Restroom Servicing	3,000.00
50700 Repairs & Maintenance	4,000.00
<b>Total 50400 Contractors and Services</b>	<b>\$ 27,040.00</b>
<b>50800 Non-Personnel Expenses</b>	
<b>50900 Program Supplies</b>	
51100 Equipment/Other Supplies	4,000.00
51200 Food	50,500.00
51300 Guest Support Fund	15,000.00
51400 Hygiene Supplies	4,000.00
51500 Single-Use Goods	12,000.00
<b>Total 50900 Program Supplies</b>	<b>\$ 85,500.00</b>
<b>Total 50800 Non-Personnel Expenses</b>	<b>\$ 85,500.00</b>
<b>51600 Occupancy</b>	
51700 Office/Program Space - SM	9,000.00
51800 Office/Program Space - UU	2,400.00
<b>Total 51600 Occupancy</b>	<b>\$ 11,400.00</b>
<b>51900 Other Operating Expenses</b>	

52000 Bank/Financial Institution Fees	4,000.00
52400 Communications & Development	3,300.00
52600 Insurance - General Liability, Director & Officer	5,000.00
52700 Meetings	4,500.00
52800 Office Supplies	4,000.00
52900 Technology & Equipment	8,860.00
53000 Vehicle Expenses	2,000.00
<b>Total 51900 Other Operating Expenses</b>	<b>\$ 31,660.00</b>
<b>53100 Professional Services</b>	
53200 Bookkeeper	29,000.00
53300 Development Consultant	15,000.00
53400 Legal Fees	4,000.00
<b>Total 53100 Professional Services</b>	<b>\$ 48,000.00</b>
<b>53500 Salaries and Wages</b>	
53600 Administrative Assistant	13,100.00
53800 Director of Operations	75,000.00
53900 Drop In Site Managers	40,000.00
54000 Executive Director	87,500.00
54100 Food Coordinator	15,600.00
54200 Security	21,840.00
<b>Total 53500 Salaries and Wages</b>	<b>\$ 253,040.00</b>
<b>Total Expenditures</b>	<b>\$ 533,230.00</b>
<b>Net Operating Revenue</b>	<b>\$ 90,270.00</b>
<b>Net Revenue</b>	<b>\$ 90,270.00</b>