

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 NC

SECTION I - APPLICANT INFORMATION

- 1a) No Hollywood Food Pantry 84-3216434 CA 1/28/2020
Organization Name Federal I.D. # (EIN#) State of Incorporation Date of 501(c)(3) Status (if applicable)
- 1b) 4390 Colfax Ave Studio City CA 91602
Organization Mailing Address City State Zip Code
- 1c) _____
Business Address (if different) City State Zip Code
- 1d) **PRIMARY CONTACT INFORMATION:**
Barbara Javitz, Secy 323-646-7801 barbara@nhifp.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.
 To expand fresh food offerings to our client base of over 500 stakeholders weekly, of which at least 25% live in the Sherman Oaks zipcodes. The funds will be used to purchase additional refrigerators and to purchase produce from local farmers' markets.
- 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)
 Our client base is increasing weekly and encompassing a large population of unhoused people. Many of these lack refrigeration but want bagged salads and other types of fruits that do not require intense refrigeration. This grant would allow us to purchase foods and if needed, refrigerate them between our distribution days (Mondays and Fridays)

SECTION III - PROJECT BUDGET OUTLINE

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

6a)	Personnel Related Expenses	Requested of NC	Total Projected Cost
	0	\$	\$
		\$	\$
		\$	\$

6b)	Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
	2500	\$2500	\$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:

Source of Funding	Amount	Total Projected Cost
	\$	\$
	\$	\$
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application: \$2500.00

10a) Start date: 06/01/2025 10b) Date Funds Required: 04/30/2025 10c) Expected Completion Date: 07/01/2025
 (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*

Louise Stearns Gabel Board Chair [Signature] 3/7/25
 PRINT Name Title Signature Date

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

[Signature] Secretary [Signature] 3/7/25
 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 for instructions on completing this form

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

DEPARTMENT OF THE TREASURY

Date: JAN 28 2020

NORTH HOLLYWOOD INTERFAITH FOOD
PANTRY
C/O JUDI KENNISTON
4390 COLFAX AVE
STUDIO CITY, CA 91601

Employer Identification Number:
84-3216434
DLN:
29053303303029
Contact Person: MRS. GARNER ID# 31731
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
June 30
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
August 26, 2019
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. 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.

Letter 947

NORTH HOLLYWOOD INTERFAITH FOOD

Sincerely,

Stephen A. Maltin

Director, Exempt Organizations
Rulings and Agreements