

**Sherman Oaks
Neighborhood Council**

Finance Committee

Candy Williams, Chair 1-R

Jeffrey Hartsough, 2-CI
Howard Katchen, 3-R
Lisa Petrus, 4-R
Cheryl Shapiro

CITY OF LOS ANGELES
CALIFORNIA



Sherman Oaks
Neighborhood Council
P.O. Box 5721
Sherman Oaks, CA 91413

Website:
www.ShermanOaksNC.org

Sherman Oaks Neighborhood Council

Regular Finance Committee Meeting (Virtual) Agenda

Wednesday, October 28, 2020, 6:30 PM

How to Join the Virtual Zoom Meeting by Telephone or Online

By Telephone: Dial 1-669-900-6833, Enter Webinar ID 98170926877, and Press #

Online: Cut and Paste <https://us02web.zoom.us/j/98170926877>, Press "Enter"

Or on Zoom join meeting screen enter Webinar ID: 98170926277 Press "Enter"

IN CONFORMITY WITH THE GOVERNOR'S EXECUTIVE ORDER N-29-20 (MARCH 17, 2020) AND DUE TO CONCERNS OVER COVID-19, THE SHERMAN OAKS NEIGHBORHOOD COUNCIL BOARD MEETING WILL BE CONDUCTED ENTIRELY TELEPHONICALLY.

Every person wishing to address the Board must dial 1-669-900-6833 and enter 98170926877 and then press # to join the meeting. The meeting can also be joined from the Zoom join meeting screen using Webinar ID: 98170926877. Instructions on how to sign up for public comment will be given to listeners at the start of the meeting.

PUBLIC INPUT AT NEIGHBORHOOD COUNCIL MEETINGS

The public is requested dial *9, when prompted by the presiding officer, to address the Committee on any agenda item before the Committee takes an action on an item. Comments from the public on agenda items will be heard only when the respective item is being considered. Comments from the public on other matters not appearing on the agenda that are within the Committee's jurisdiction will be heard during the General Public Comment period. Please note that under the Brown Act, the Committee is prevented from acting on a matter that you bring to its attention during the General Public Comment period; however, the issue raised by a member of the public may become the subject of a future Committee meeting. Public comment is limited to two minutes per speaker, unless adjusted by the presiding officer of the Committee.

The Neighborhood Council system enables meaningful civic participation for all Angelenos and serves as a voice for improving government responsiveness to local communities and their needs. We are an advisory body to the City of Los Angeles, comprised of stakeholder volunteers who are devoted to the mission of improving our communities.

I. CALL TO ORDER & ROLL CALL

- a. Call to Order by Presiding Officer, Candy Williams
- b. Roll Call

II. ADMINISTRATIVE MOTIONS

- a. A motion to approval of the Minutes of the Thursday, September 24, 2020, Finance Committee Meeting.

III. COMMENTS BY PUBLIC OFFICIALS

IV. TREASURER'S REPORT

V. FUNDING MOTIONS

- a. **Monthly Expenditure Report (MER), Action Item, Vote Required**
A motion to Sherman Oaks Neighborhood Council's (SONC) Monthly Expenditure Report (MER) for the period ending September 30, 2020. *The MER for September 2020, is on the SONC website.*
- b. **Reallocation of Fiscal Year 2020 Outreach Funding, Action Item, Vote Required**
A motion to approve the expenditure of up to \$1,500.00 for items to be included in reallocate the FY2020 budgeted funds of \$1,500 for items to be included in hygiene kit as part of a Hygiene Kit Distribution event co-sponsored with Valley Of Change at St. Francis church in Sherman Oaks planned for December 2020.
- c. **Neighborhood Council Funding Program Application Request For Neighborhood Purpose Grant (NPG) SONC 2020-20201 Funds to North Valley Caring Services Action Item, Vote Required**
A motion to approve a Neighborhood Purposes Grant (NPG) in the amount of \$5,000.00 to the North Valley Caring Services. Funds to be used for protective equipment, programs supplies, maintain staff hours to provide vulnerable community members food security, and child development programs created as a response to the pandemic. *A copy of the NPG for North Valley Caring Services on the SONC website.*
- d. **Neighborhood Council Funding Program Application Request For Neighborhood Purpose Grant (NPG) SONC 2020-20201 Funds to Valley of Change organization Action Item, Vote Required**
A motion to approve a Neighborhood Purposes Grant (NPG) in the amount of \$4,700.00 to the Valley of Change organization. Funds to be used for monthly give away of essential hygiene products and food for those that are in need and/or unhoused in the Sherman Oaks community. *A copy of the NPG for Valley of Change is on the SONC website.*

VI GENERAL PUBLIC COMMENT ON NON-AGENDA ITEMS

VII FINANCE COMMITTEE BUSINESS

a. FY 2020-2021 Ongoing Planning of Operating Funding Projects

b. Rescheduling dates for November 2020 and December 2020 Finance Committee Zoom Meeting

VIII ADJOURNMENT

THE AMERICAN WITH DISABILITIES ACT

As a covered entity under Title II of the Americans with Disabilities Act, the City of Los Angeles does not discriminate on the basis of disability and upon request will provide reasonable accommodation to ensure equal access to its programs, services, and activities. Sign language interpreters, assisted listening devices, or other auxiliary aids and/or services may be provided upon request. To ensure availability of services, please make your request at least 3 business days (72 hours) prior to the meeting by contacting the Department of Neighborhood Empowerment by calling (213) 978-1551 or email: NCsupport@lacity.org

PUBLIC ACCESS OF RECORDS

In compliance with Government Code section 54957.5, non-exempt writings that are distributed to a majority or all of the board in advance of a meeting may be viewed at our website: www.ShermanOaksNC.org or at the scheduled meeting. In addition, if you would like a copy of any record related to an item on the agenda, please email: gil.imber.sonc@gmail.com.

PUBLIC POSTING OF AGENDAS – Neighborhood Council agendas are posted for public review as follows: [www.ShermanOaksNC.org](#)

- Sherman Oaks Public Library, 14245 Moorpark Street, Sherman Oaks, CA 91423
- www.ShermanOaksNC.org
- You can also receive our agenda via email by subscribing to LA. City's Early Notification System at <https://www.lacity.org/subscriptions>

RECONSIDERATION AND GRIEVANCE PROCESS -- For information on the NC's process for board action reconsideration, stakeholder grievance policy, or any other procedural matters related to this Council, please consult the NC Bylaws. The Bylaws are available at our Board meetings and our website www.ShermanOaksNC.org.

Committee Members:

Candy Williams – Chair
Jeffrey Hartsough
Howard Katchen
Lisa Petrus
Cheryl Shapiro

CITY OF LOS ANGELES
California



**SHERMAN OAKS
NEIGHBORHOOD
COUNCIL**
P O Box 5721
Sherman Oaks, CA 91413
(818) 503-2399

Website:
www.shermanoaksn.org

**Sherman Oaks Neighborhood
Council Finance Committee Meeting
Minutes
Thursday, September 24, 2020
6:30 PM Virtual Meeting**

Minutes of the Finance Committee

I. MEETING CALLED TO ORDER & ROLL CALL

- a. Meeting called to order by Chair, Candy Williams at 6:35 PM
- b. Present – Candy Williams, Jeffrey Hartsough, Howard Katchen, Lisa Petrus,

II. ADMINISTRATIVE MOTIONS

- a. Minutes for August 26, 2020 were approved as presented. Motion to accept minutes Jeffrey Hartsough, seconded by, Howard Katchen. The vote was approved (4-Yes: Hartsough, Petrus, Katchen, Williams), (4-Yes, 0-No).

III. COMMENTS BY PUBLIC OFFICIALS

Their were no Public Officials in attendance

IV. TREASURER'S REPORT

Finance Chair Candy Williams reminded everyone that next month's meeting will be held on its regularly scheduled day of Wednesday, October 28, 2020 at 6:30pm

VI. THE FOLLOWING FUNDING MOTIONS WERE REVIEWED & ACTED UPON:

- a. Discussion of agenda item V. a, an expense report (MER) for period ending August 31, 2020 was reviewed. Motion to approve was brought by Candy Williams and seconded by Jeff Hartsough. Motion was approved unanimously by SONC Finance Committee members (4-Yes, 0-No).
- b. Discussion of agenda item V. b, FY 2021 Election Preparation to approve up to \$1,000 for preparation of the FY 2021 election. carryover funds to be classified to the NPG category for the FY 2020-2021 budget. Possibility of obtaining social media assistance. Motion to approve Candy Williams, seconded by Howard Katchen. Motion was approved unanimously by SONC Finance Committee members (4-Yes, 0-No).

VII. GENERAL PUBLIC COMMENT ON NON-AGENDA ITEMS

There were no general public comments on non-agenda items.

- a. Item VI. a, High level review on the on going planning for the FY 2020-2021 Operation Funding of Projects. Discussion included and was related to delays on spending due to the COVID-19 pandemic and State mandated shuts downs
Their were no public comments

Meeting was adjourned by Candy Williams, Finance Chair, sent out budget request forms to the committee chairs for upcoming projects/events that will need to be funded.

Sarah Manual SONC Chair of Outreach:

Stated that SONC was in need to social media presents due to the stay at home mandates and virtual meeting being the only form of outreach to community.

Finance Committeed suggested research and estimated cost done on social media helper.

The item is to be continued per review of rate of pay, job title, hours

Their were public comments

- b. Item VII. b, Finance Committee discussed the FY 2021 Election done by mail, the date and detail of what is needed to prepare for the election.

Sarah Manual SONC Chair of Outreach:

Suggested a development of FY 2021 Election plan and to continued discussions on next steps over the next few Finance Committee meetings.

Their were no public comments.

VIII. PUBLIC COMMENTS

There was no additional public comments on non-agenda items within SONC's jurisdiction

IX. ADJOURNMENT

Meeting adjourned at 7:11pm

Monthly Expenditure Report



Reporting Month: September 2020 Budget Fiscal Year: 2020-2021

NC Name: Sherman Oaks
Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available
\$50378.10	\$1015.26	\$49362.84	\$750.00	\$0.00	\$48612.84

Monthly Cash Flow Analysis					
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available
Office	\$27560.00	\$15.26	\$26037.84	\$0.00	\$25287.84
Outreach		\$1000.00		\$750.00	
Elections		\$0.00		\$0.00	
Community Improvement Project	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Neighborhood Purpose Grants	\$4440.00	\$0.00	\$4440.00	\$0.00	\$4440.00
Funding Requests Under Review: \$0.00		Encumbrances: \$0.00		Previous Expenditures: \$506.90	

Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	AT&T Messaging	09/18/2020	A motion to approve the Office of the City Clerk Neighborhood Council funding Program Fiscal Year Administrative Packet for the fiscal year 2020-2021 as presented.	General Operations Expenditure	Office	\$15.26
2	North Hollywood Interfaith Food Pantry	09/18/2020	A motion to approve a donation of up to \$1,000 to the North Hollywood Interfaith Food Pantry to address food in security in the San Fernando Valley during the declared COVID-19 pandemic e...	General Operations Expenditure	Outreach	\$1000.00
Subtotal:						\$1015.26

Outstanding Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	Sherman Oaks Chamber of Commerce	09/18/2020	A motion to approve the expenditure of up to \$750 to support the Sherman Oaks Chamber of Commerce and the community's Grand Re-Opening Promotion scheduled as allowed by the coronavir...	General Operations Expenditure	Outreach	\$750.00

Subtotal: Outstanding	\$750.00
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REQUEST FORM

**FY 2020-2021 SHERMAN OAKS NEIGHBORHOOD COUNCIL BUDGET REQUEST
ESTIMATED COST FOR PROJECTS AND OR EVENTS**

(A)	
Name:	Sarah Manuel
Contract Info.:	Sarah.Manuel.SONC@gmail.com
Title of Committee and Event	Co-sponsored Event with The Valley of Change, St. Francis De Sales and SONC -- Hygiene Kit and Distribution
DUE BY 09-09-2020	candy.williams.sonc@gmail.com

(B) COMMITTEE/PROGRAM OR EVENT DESCRIPTION	(C) BAC ATTACHED If Applicable	(D) BUDGET CATEGORY NO.	(E) SUB CATEGORY	(F) TYPE OF EXPENSE	(G) VENDOR	(H) TOTAL ESTIMATED COST
Hygiene Kits - 120 -- Please see supporting documents.		Outreach				
Hand sanitizer					Healing Solutions - Amazon.com	\$131.36
Cleansing Cloths					Medline - Amazon.com	\$242.00
Toothbrush					Amazon.com	\$39.40
Toothpaste					Amazon.com	\$116.50
Feminine Products (no tax included)					Amazon.com	\$15.42
Shampoo/Conditioner/Soap/Body Wash Set					Eco Botanicals - Amazon.com	\$350.38
Socks					Amazon.com	\$131.07
Combs					Amazon.com	\$38.25
Undergarments Women					Amazon.com	\$88.68
Undergarments Men					Amazon.com	\$114.98
Bottled Water					Grocery Store	\$50.58
Granola Bars					Amazon.com	\$73.58
Other Products to consider:					TOTAL	\$1,392.20
SONC Drawstrings Bags 120						
Facemasks 120						

DUE BY 09.09.2020 To: candy.williams.sonc@gmail.com

Column A:

Please provide your Name, Email Address and Title of Committee or Event.

Column B: FY 20-21 COMMITTEE OR EVENT DESCRIPTION

Provide the description of the ongoing or new project or event.
(Please find enclosed examples for column C on Tab-Budget Column Description)

Column C: BOARD ACTION CERTIFICATION-(BAC) If Applicable

Provide a BAC as attachent (Dated approved and or item number)

Column E: SUB-CATEGORY DESCRIPTION

Provide 1 of the 5 sub-category title listed below for each of your request

- (1) Office; (2) Outreach; (3) Election; (4) Community Improvement Project-CIP;
- (5) Neighborhood Purpose Grants-NPG

Column F: TYPE OF EXPENSE

Provide the type of expense that will be utilized in the success of your project or event.
(Please find enclosed examples of vendors for column B on Tab-Budget Colum Description)

Not Mandatory. However if this program or event has been approved by the Board, please provide as attachment

Column D: BUDGET CATEGORY NUMBER

This column is helpful if you are aware of the 5 sub-categories in which your request is grouped. **Not Mandatory.**

(1) Office; **(2)** Outreach; **(3)** Election; **(4)** Community Improvement Project-CIP; **(5)** Neighborhood Purpose Grants-N

Column G: VENDORS

Provide names of vendors that will be utilized in the success of your project.

(Please find enclosed examples of vendors for column B on Tab-Budget Column Description)

Column H: TOTAL ESTIMATED AMOUNTS

Please provide estimates or actual total cost for each itemized request.

Item	Brand	Link	Unit Qty	Unit Cost		Kit Qty	Total Est. Cost (tax included)
Hand Sanitizer	Healing Solutions	https://www.ama	24	\$29.99		4	\$131.36
Cleansing Cloths	Medline	https://www.ar	24	\$44.20		5	\$242.00
Toothpaste Bulk	Colgate	https://www.ama	24	\$21.28		5	\$116.50
Toothbrush		https://www.ama	100	\$16.99		2	\$39.40
Travel Sized - Shampoo, Conditioner Set, Soap & Body Wash Travel Set	Eco Botanics	https://www.ama	60 Sets	\$159.99		2	\$350.38
Socks		https://www.ama	120	\$119.70		1	\$131.07
Combs		https://www.ama	24	\$6.99		5	\$38.25
Womens Undergarments		https://www.ama	60	\$80.99		1	\$88.68
Mens Undergarments		https://www.ama	72	\$105.00		1	\$114.98
Bottled Water		https://www.ama	48	\$16.86		3	\$50.58
Granola Bars	Veratify	https://www.ama	66	\$36.79		2	\$73.58
Feminine Products	Always	https://www.ama	132	\$15.42		1	\$15.42
				TOTAL KITS		120 EST. TOTAL	\$1,392.20
						COST PER KIT	\$11.60

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.

Sherman Oaks Neighborhood Council

Name of NC from which you are seeking this grant:

SECTION I - APPLICANT INFORMATION

1a)	North Valley Caring Services	95-4444561	CA	02/1996
	<i>Organization Name</i>	<i>Federal I.D. # (EIN#)</i>	<i>State of Incorporation</i>	<i>Date of 501(c)(3) Status (if applicable)</i>
1b)	15453 Rayen Street	North Hills	CA	91343
	<i>Organization Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
1c)				
	<i>Business Address (if different)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
1d)	PRIMARY CONTACT INFORMATION:			
	Alycia Monroy	818-929-2972	amonroy@nvcsinc.org	
	<i>Name</i>	<i>Phone</i>	<i>Email</i>	
2)	Type of Organization- Please select one:			
	<input type="checkbox"/> Public School (not to include private schools) Attach Signed letter on School Letterhead	or	<input checked="" type="checkbox"/> 501(c)(3) Non-Profit (other than religious institutions) Attach IRS Determination Letter	
3)	Name / Address of Affiliated Organization (if applicable)			
		<i>City</i>	<i>State</i>	<i>Zip Code</i>

SECTION II - PROJECT DESCRIPTION

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

Your support will allow us to:

1. Acquire personal protective equipment and other necessary program supplies for our team to perform their work safely and efficiently.
2. Maintain staff hours to oversee our existing food pantry, meal outreach, and child development programs that were created in response to the pandemic.

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)

NVCS food pantry is not only open but we have expanded its services in light of the pandemic. We now serves up to 2000 household every week as well as support 3 other food pantries. We deliver hot meals to 300 families living in motels, as well as deliver boxes of food to those who cannot leaves their houses. We opened our campus to provide childcare and online distant learning for 30 students from grades pre k - 12 using our agencies wifi.

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
	\$	\$
	\$	\$
	\$	\$

6b)

Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
safety supplies, food containers, childcare program development	\$5000	\$
	\$	\$
	\$	\$75,000

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?

No Yes If Yes, please list names of NCs: 14 neighborhood councils

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
north hills east nc, lake balboa nc, arleta nc, sylmar nc, granada hills nc, northridge	\$12,929.00	\$
city and county emergency aid	\$26,000	\$
misc grants	\$8,000	\$75,000

9) What is the TOTAL amount of the grant funding requested with this application: \$ 5000

10a) Start date: 11 / 15 / 20 10b) Date Funds Required: 11 / 15 / 20 10c) Expected Completion Date: 2 / 01 / 20
 (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*

Manny Flores Exe. Director [Signature] 10/23/2020
 PRINT Name Title Signature Date

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

Martha Nava Office Admin [Signature] 10/23/2020
 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



Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248153327
Feb. 10, 2014 LTR 4170C 0
95-4444561 000000 00
00017356
BODC: TE

NORTH VALLEY CARING SERVICES
15435 RAYEN ST
NORTH HILLS CA 91343



011298

Person to Contact: Ms. Espelage
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your request of Jan. 30, 2014, regarding the tax-exempt status of North Valley Caring Services.

Our records indicate that a determination letter was issued in February 1996, granting this organization exemption from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

Our records also indicate this organization is not a private foundation within the meaning of section 509(a) of the Code because it is described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to this organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to the organization or for its 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/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

If you have any questions, please call us at the telephone number shown above.

0248153327
Feb. 10, 2014 LTR 4170C 0
95-4444561 000000 00
00017357

NORTH VALLEY CARING SERVICES
15435 RAYEN ST
NORTH HILLS CA 91343

Sincerely yours,

Susan M. O'Neill

Susan M. O'Neill, Department Mgr.
Accounts Management Operations

**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 Neighborhood Council

SECTION I - APPLICANT INFORMATION

	<u>The Valley of Change</u>	<u>85-2147322</u>	<u>California</u>	<u>6/29/2020</u>
1a)	<i>Organization Name</i>	<i>Federal I.D. # (EIN#)</i>	<i>State of Incorporation</i>	<i>Date of 501(c)(3) Status (if applicable)</i>
1b)	<u>4735 Sepulveda Blvd #107</u>	<u>Sherman Oaks</u>	<u>CA</u>	<u>91403</u>
	<i>Organization Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
1c)	<u>15030 Ventura Blvd #319</u>	<u>Sherman Oaks</u>	<u>CA</u>	<u>91403</u>
	<i>Business Address (if different)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
1d)	PRIMARY CONTACT INFORMATION:			
	<u>Latora Green</u>	<u>818-235-6431</u>	<u>latora.green@gmail.com</u>	
	<i>Name</i>	<i>Phone</i>	<i>Email</i>	
2)	Type of Organization- Please select one:			
	<input type="checkbox"/> Public School (not to include private schools) Attach Signed letter on School Letterhead	or	<input checked="" type="checkbox"/> 501(c)(3) Non-Profit (other than religious institutions) Attach IRS Determination Letter	
3)	<u>Name / Address of Affiliated Organization (if applicable)</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>

SECTION II - PROJECT DESCRIPTION

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

The purpose and intent of the grant is to continue to support the Sherman Oaks community by giving out essential kits (toothbrush, toothpaste/case, shampoo, conditioner, masks, soap, washcloth, water, hand sanitizer, etc) and food (hot meal and/or bag lunch) to those that are in need and/or unhoused. We assist the unhoused, daily, by providing water, gatorade, snacks and masks to those that are in need. We feel that it is essential to build our community up by taking care of each other by providing assistance which goes along way during this difficult time we are experiencing.

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 be used to support those that are in need and/or unhoused in Sherman Oaks by giving that extra support that is needed in the community. By receiving this grant, my non-profit organization will be able to reach even more people that are in need.



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

VALLEY OF CHANGE
C/O REGGIE WATKINS
4735 SEPULVEDA BLVE APT 107
SHERMAN OAKS, CA 91403-0000

Date:
09/23/2020
Employer ID number:
85-2147322
Person to contact:
Name: Customer Service
ID number: 31954
Telephone: 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:
June 29, 2020
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053620001290

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.

Sincerely,

Stephen A. Martin

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements