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. The Neighborhood Council (NC), upon approval of the application, shall submit the approved application along with all required documentation to the Department of Neighborhood Empowerment.

Name of NC from which you are seeking this grant: Westchester Playa Neighborhood

SECTION I - APPLICANT INFORMATION

1a) Culver Palms Meals on Wheels
Organization Name

95-2891033
Federal I.D. # (EIN#)
California
State of Incorporation

4427 Overland Avenue
Organization Mailing Address

Culver City
City

CA
State

90230
Zip Code

1b) Date of 501(c)(3) Status (If applicable)

3/31/75

1c) Business Address (If different)

City

State

Zip Code

1d) PRIMARY CONTACT INFORMATION:

Pam Frieden
Name

(310) 559-0666
Phone

mowculverpalms@gmail.com
Email

2) Type of Organization- Please select one:

☐ Public School (not to include private schools)
☐ 501(c)(3) Non-Profit (other than religious institutions)

Attach Grant Request 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.

Since 1974 Culver Palms Meals on Wheels, a 501 C 3 nonprofit, has been serving meals to those who are homebound. Our service area is quite large extending from Pico Blvd. to LAX and from La Cienega to the ocean. We provide nutritious meals at an affordable price to persons who are confined to their homes because of illness, accident, convalescence or age. Monday thru Friday we serve a hot meal and a cold snack to each of our clients. The meals are prepared under the guidance of a nutritionist and are in compliance with all health department regulations. We can accommodate most dietary needs. The majority of our clients are those who are age 75 plus. However, since we are not government-funded, (and therefore free of government restrictions on client age limits) we are able to feed homebound individuals who are under age 65. Many of our seniors find it difficult to make ends meet, especially if they are living on social security alone. Once they pay for their rent and medications, there is very little left for food. That is where we come in and help.

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)

Culver Palms Meals on Wheels, therefore, is seeking a $1,500 grant to feed those clients who live in Westchester, Playa del Rey and Playa Vista and are struggling with food insecurity. Currently, we have two routes that serve these areas. With this grant of $1,500 we will be able to serve 333 meals to help those who cannot afford their meals. Too many seniors living here on the Westside are left behind, alone and hungry, struggling to stay independent and healthy. Just recently we were asked to help a senior who was hospitalized for starvation. Currently, we have two people living in Westchester who recently have had to cut back their meals because they cannot afford to pay for all five days even at a reduced rate. Our budget to help subsidize those clients is $12,000 a year. In our planning, we have already reached that level and currently cannot take on any new subsidized clients unless we raise more funds. While we have been fortunate to receive donations from individuals in the community, those donations are not a reliable source of funds, especially in the current economic climate. We need to stabilize our budget with outside grants in order to ensure that services to needy seniors in Westchester, Playa del Rey and Playa Vista can be provided. That is why we are reaching out to community organizations for help. How does Meals on Wheels benefit the community? Culver Palms Meals on Wheels delivers the support that keeps seniors in their own homes, where they want to be. The cost of one year for a senior to receive Meals on Wheels is less than one day in a hospital. Research has shown that seniors receiving home-delivered meals and home visits from volunteers experience improvement in physical and mental health and quality of life.
SECTION III - PROJECT BUDGET OUTLINE

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<th>Personnel Related Expenses</th>
<th>Requested of NC</th>
<th>Total Projected Cost</th>
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<th>Non-Personnel Related Expenses</th>
<th>Requested of NC</th>
<th>Total Projected Cost</th>
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7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?
   ■ No   □ Yes, please list names of NCs: __________________________

8) Is the implementation of this specific program or purpose described in Box 4 above contingent on any other factors or sources of funding? (Including NPG applications to other NCs)
   ■ No   □ Yes, please describe:

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<th>Source of Funding</th>
<th>Amount</th>
<th>Total Projected Cost</th>
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9) What is the TOTAL amount of the grant funding requested with this application: ______________________

10a) Start date: __________

10b) Date Funds Required: __________

10c) Expected completion date: __________ (After completion of the project, the applicant must submit a follow-up form to the Neighborhood Council and the Department of Neighborhood Empowerment)

SECTION IV - POTENTIAL CONFLICTS OF INTEREST

11a) Do you (applicant) have a former or existing relationship with a Board Member of the NC?
   ■ No   □ Yes - Please describe below:

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<th>Name of NC Board Member</th>
<th>Relationship to Applicant</th>
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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? □ 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 Department 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 Appendix A, "What is a Public Benefit," and Appendix B "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*
    Pamela Frieden
    PRINT Name:
    Executive Director
    Title:
    Signature: ____________________________
    Date: __________

12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*
    JoAnna Barnett
    PRINT Name:
    Board Secretary
    Title:
    Signature: ____________________________
    Date: __________

* If a current Board Member holds the position of Executive Director or Secretary, please contact the Department at (213) 978-1551 for instructions on completing this form.
Request for Taxpayer Identification Number and Certification

Name: Culver Palms Meals on Wheels

Business name, if different from above:

Check appropriate box: [ ] Sole proprietor [ ] Corporation [ ] Partnership [ ] Other [ ] Exempt from backup withholding

Address (number, street, and apt. or suite no.)
4427 Overland Avenue
City, state, and ZIP code
Culver City, CA  90230

List account number(s) here (optional)

Part I  Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.

Note: If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

or

Employer Identification number

9 5 2 8 9 1 0 3 3

Part II  Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued), 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. person (including a U.S. resident alien).

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 on page 4.)

Sign Here  Signature of U.S. person

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person: Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding,

or

3. Claim exemption from backup withholding if you are a U.S. exempt payee.

Note: If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Foreign person: If you are a foreign person, use the appropriate Form W-8 (see Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien.

Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a “saving clause.” Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.

2. The treaty article addressing the income.

3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Cat. No. 10231X  Form W-9 (Rev. 1-2003)
Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

We have further determined you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in section 509(a)(2).

You are not liable for social security (FICA) taxes unless you file a waiver of exemption certificate as provided in the Federal Insurance Contributions Act. You are not liable for the taxes imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment, or other Federal taxes, please let us know.

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.

If your purposes, character, or method of operation is changed, please let us know so we can consider the effect of the change on your exempt status. Also, you should inform us of all changes in your name or address.
If your gross receipts each year are normally more than $5,000, you are required to file Form 990, Return of Organization Exempt From Income Tax, by the 15th day of the fifth month after the end of your annual accounting period. The law imposes a penalty of $10 a day, up to a maximum of $5,000, for failure to file a return on time.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

Please keep this determination letter in your permanent records.

Sincerely yours,

W. H. Conniff
District Director