



"Creating a Better Future for Our Community through Advocacy, Mentorship and Education"

March 12, 2018

Encino Neighborhood Council
4924 Paso Robles Avenue
Encino, Ca. 91316

Re: Neighborhood Purposes Grant
Board Meeting: March 28, 2018

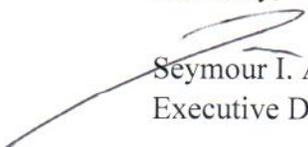
Dear Encino Neighborhood Council,

Please find attached our application for a Neighborhood Purposes Grant to be used to support the Teen Court program.

It is our desire to bring this request to the attention of your board for consideration at your board meeting on March 28th.

If there is any more information you need or if you have any other questions or comments please do not hesitate to contact me. My cell phone number is 818-943-0163 and my email address is SeymourAmster.pesa@gmail.com.

Sincerely,


Seymour I. Amster
Executive Director of PESA

**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: Encino Neighborhood Council

SECTION I - APPLICANT INFORMATION

1a) Parents, Teachers/Educators & Students in Action (PESA) 46-2694430 CALIFORNIA 12/01/13
Organization Name **Federal I.D. # (EIN#)** **State of Incorporation** **Date of 501(c)(3) Status (if applicable)**

1b) 18017 CHATSWORTH ST. #337 GRANADA HILLS CA 91344
Organization Mailing Address **City** **State** **Zip Code**

1c) 8727 VAN NUYS BLVD. #2 GRANADA HILLS CA 91402
Business Address (if different) **City** **State** **Zip Code**

1d) **PRIMARY CONTACT INFORMATION:**
SEYMOUR AMSTER (800) 894-7201 SEYMOURAMSTER.PESA@GMAIL.CC
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 Grant Request on School Letterhead **Attach IRS Determination Letter**
 N/A

3) Name / Address of Affiliated Organization City State Zip Code
(If applicable)

SECTION II - PROJECT DESCRIPTION

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

The purpose and the intent of this grant is to obtain funding as it relates to this Neighborhood Council so that the Teen Court Program can continue have a positive impact in the boundaries of this Neighborhood Council. The Teen Court program impacts the community by reducing crime committed by juveniles, as well as addressing the issue of hate crimes and incidents in the City of Los Angeles. PESA is the non-profit that provides support and funding for the Teen Court Program.

Teen Court diverts youthful offenders from the traditional justice system, and specifically addresses hate crime incidents through its SHADES program. A youthful offender is tried at in front of a jury of high school students and with a real judge presiding. The jury is allowed to ask questions of the youthful offender and his parents. If the jury finds the youthful offender culpable, the jury recommends diversionary terms and the judge imposes diversionary conditions usually following the recommendations of the jury. A judicial officer is designated as a mentor for the offending youth being tried under the SHADES component of the program and is required to do community service specific to his bias.

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)**

Youthful offenders are residents who live in the area the Neighborhood Council encompasses. For a youthful offender is not tried at a school he attends but is located near his residence. Thus one of the public purposes the grant will be used for is to sustain the Teen Court program at a location convenient for the residents in the neighborhood council area.

The high school students who participate in the program learn the value of not committing crimes, as well as the consequences of committing a crime. Thus the program helps to enhance public safety by teaching the participants the value of not committing crimes such as vandalism, shoplifting, and assaults.

Each summer there is a week long training program at the Museum of Tolerance, for the SHADES portion of the Teen Court program. The students learn about the values of inter-cultural tolerance. Only jurors who have completed this program can participate in a Teen Court case that involves an incident of hate. Also each summer there is the CAYC annual summit where students go to a college campus for 4 days and interact with students from other parts of California who are involved in Teen Court programs. During the school year the students participate in training sessions and other events where they are assisted in creating presentations and are given the opportunity to present what they have learned to the community. This grant would be used to support the entire Teen Court Program including the Outreach Programs described, as it relates to the boundaries to this Neighborhood Council.

SECTION III - PROJECT BUDGET OUTLINE

6a) Personnel Related Expenses	Requested of NC	Total Projected Cost
Support for Teen Court Session, materials and Club & Data Collection	\$ 1,500.00	\$ 45,000.00
Support for Events and Field Trips & Data Collection	\$ 1,500.00	\$ 55,000.00
Monitoring Youthful Offenders & Data Collection	\$ 2,000.00	\$ 40,000.00

6b) Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
Program Fees not included in above	\$ 0.00	\$ 17,000.00
Bus and other Transportation not included in above	\$ 0.00	\$ 7,500.00
Training Materials not included in above	\$ 0.00	\$ 14,000.00

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?
 No Yes, please list names of NCs: Most of the other NC as it relates to their boundaries.

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

Source of Funding	Amount	Total Projected Cost

9) What is the TOTAL amount of the grant funding requested with this application: \$ 5,000.00

10a) Start date: 03/01/18 10b) Date Funds Required: 05/01/18

10c) Expected completion date: 06/01/18 (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:

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 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 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*

SEYMOUR AMSTER EXECUTIVE DIRECTOR [Signature] 3/12/18
 PRINT Name Title Signature Date

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

FRANCINE AMSTER SECRETARY [Signature] 3/12/18
 PRINT Name 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



Department of the Treasury
Internal Revenue Service

OGDEN UT 84201-0029

In reply refer to: 4077591934
Oct. 28, 2015 LTR 4168C 0
46-2694430 000000 00

00030922

BODC: TE

PARENTS EDUCATORS-TEACHERS &
STUDENTS IN ACTION
18017 CHATSWORTH ST
GRANADA HILLS CA 91344-5608



007650

Employer Identification Number: 46-2694430
Person to Contact: Ms. Wiles
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Oct. 05, 2015, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in December 2013.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 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/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.

4077591934
Oct..28, 2015 LTR 4168C 0
46-2694430 000000 00
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PARENTS EDUCATORS-TEACHERS &
STUDENTS IN ACTION
18017 CHATSWORTH ST
GRANADA HILLS CA 91344-5608

If you have any questions, please call us at the telephone number
shown in the heading of this letter.

Sincerely yours,



Jeffrey I. Cooper
Director, ED Rulings & Agreement



CITY OF LOS ANGELES
 Office of Finance
 P.O. Box 53200
 Los Angeles CA 90053-0200

PARENTS EDUCATORS / TEACHERS & STUDENTS IN ACTION

18017 CHATSWORTH STREET SUITE #337
 GRANADA HILLS, CA 91344-5608

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 SUITE #337
 GRANADA HILLS, CA 91344-5608

THIS CERTIFICATE MUST BE POSTED AT PLACE OF BUSINESS
CITY OF LOS ANGELES TAX REGISTRATION CERTIFICATE
THIS CERTIFICATE IS GOOD UNTIL SUSPENDED OR CANCELLED
BUSINESS TAX ISSUED: 03/17/2016

ACCOUNT NO.	FUND/CLASS	DESCRIPTION	STARTED	STATUS
0002893373-0001-4	L049	Professions/Occupations	02/29/2016	Active

PARENTS EDUCATORS / TEACHERS & STUDENTS IN ACTION

18017 CHATSWORTH STREET SUITE #337
 GRANADA HILLS, CA 91344-5608

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 GRANADA HILLS, CA 91344-5608

ISSUED FOR TAX COMPLIANCE PURPOSES ONLY
NOT A LICENSE, PERMIT, OR LAND USE AUTHORIZATION

ISSUED BY: *Clara Bautista*
 DIRECTOR OF FINANCE

"No registration certificate or permit issued under the provisions of the Business Tax ordinances of the LAMC, or the payment of any tax required under the provisions of the Business Tax ordinances of the LAMC shall be construed as authorizing the conduct or continuance of any illegal business or of a legal business in an illegal manner."

NOTIFY THE OFFICE OF FINANCE IN WRITING OF ANY CHANGE IN OWNERSHIP OR ADDRESS - Office of Finance P.O. Box 53200 Los Angeles CA 90053-0200
 IMPORTANT - READ REVERSE SIDE

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Parents, Educators/Teachers & Students in Action

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only **one** of the following seven boxes:
 Individual/sole proprietor or single-member LLC
 C Corporation S Corporation Partnership Trust/estate
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.
 Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
18017 Chatsworth Street, Suite 337

6 City, state, and ZIP code
Granada Hills, Ca. 91344

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally 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.

Social security number

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or

Employer identification number

4	6	-	2	6	9	4	4	3	0
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Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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 3.

Sign Here Signature of U.S. person ▶ 

Date ▶ 12/26/16

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

- An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:
- Form 1099-INT (interest earned or paid)
 - Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.
- By signing the filled-out form, you:
- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
 - Certify that you are not subject to backup withholding, or
 - Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
 - Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.