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:	Enc	ino			
SEC	TION I- APPLICANT INFORMATION					
1a)	Making the Arts Real for Youth Foundation / m.a.r.y.	46-36820	077	California	ı	10/21/13
ıu,	Organization Name	Federa	I I.D. # (EIN#)	State of	Incorporation	Date of 501(c)(3) Status (if applicable
46)	18013 Duncan Street	Encino			CA	91316
1b)	Organization Mailing Address	City			State	Zip Code
1c)	Business Address (If different)	City			State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:					
	Krickett Jones Halpern	(818) 929-	0977		krickett@mary-f	oundation.org
	Name	Phone			Email	-
2)	Type of Organization- Please select one: ☐ Public School (not to include private schools) Attach Grant Request on School Letterhead		501(c)(3) Nor Attach IRS D		(other than religion	us institutions)
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.

The m.a.r.y. foundation is a year round program, on going, and this grant will help and enable m.a.r.y. to offer a free event and workshops to the community by helping with the cost for advertisement, supplies, art materials, etc. Your logo, will be placed on printed posters and postcards acknowledging the Neighborhood Council and announced in the newsletters via email.

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)

The m.a.r.y. foundation welcomes the general public and is here to support ALL children with their social emotional well being through the arts. We have an event, m.a.r.y.'s day, and event workshops for children, their friends and family. The 6th m.a.r.y.'s day event and event workshops will bring knowledge and awareness of how the arts can help young people and provide them with skills to use the arts as a vehicle to help guide with social and emotional skill building. The m.a.r.y.'s day event and workshops bring professionals and children together to help teach and guide them. Most of the children participating in the program are residents from the top four cities of and/or students in (alphabetical order) Encino, Lake Balboa, Reseda, and Tarzana. Admission and parking for the event and workshops are free making the event and workshops accessible to all. Your funds will help m.a.r.y. to continue with our event and workshops and inspire young peoples' interest in the arts and bring family and friends together for a community that has the opportunity for expression and creativity as a outlet to build resilience for over all well-being.

Personnel Related Expenses		Requested of NC	To	tal Projecte	d Cost			
Presenters/Specialists			0		1,300			
4								
Non-Personnel Related Expenses)	Requested of NC	To	otal Projecte	d Cost			
Advertisement / Printing			350		2,000			
Art Materials / Supplies		•	550		2,700			
OTHER			0		5,500			
	ames of NCs: Lake Balboa, Reseda	, Tarzana						
	ls 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)							
Source of Funding		Amount	To	tal Projecte	d Cost			
Neighborhood Councils *		7,	700		11,500			
Other contributions/sponsors *			500		11,500			
m.a.r.y. costs * = ANY FUNDS NOT	RECEIVED WILL BE FUNDED BY M.A.R.	Y 2,	300		11,500			
c) Expected completion date: follow-up form to the Neighbor CTION IV - POTENTIAL CONFLICTS	(After completion o	ent of Neighborhoo	d Emp	owerment)	iii a			
		Soard Member of the	NC2					
a) Do you (applicant) have a former Ro U Yes - Please			107 H100-4079-2040000					
a) Do you (applicant) have a former	or existing relationship with a B		107 H100-4079-2040000	Applicant				
a) Do you (applicant) have a former Ro U Yes - Please	or existing relationship with a B		107 H100-4079-2040000		***			
a) Do you (applicant) have a former Ro U Yes - Please	or existing relationship with a B		107 H100-4079-2040000					
a) Do you (applicant) have a former Ro U Yes - Please	or existing relationship with a Be describe below: ard member consult the Office of No *(Please note that if or participates in the discussion)	Relations of the City Attorney a Board Member o	hip to	Applicant e				
a) Do you (applicant) have a former No Yes - Please Name of NC Board Member b) If yes, did you request that the bofiling this application? Yes interest and completes this form,	or existing relationship with a Be describe below: ard member consult the Office of No *(Please note that if or participates in the discussion it in its entirety.)	Relations of the City Attorney a Board Member o	hip to	Applicant e				
a) Do you (applicant) have a former No Yes - Please Name of NC Board Member b) If yes, did you request that the bo filing this application? Yes interest and completes this form, will deny the payment of this gran	or existing relationship with a Be describe below: ard member consult the Office of No *(Please note that if or participates in the discussion in its entirety.) NATURE my knowledge, the information of this application and affirm the penefit project/program and that aborhood Purposes Grant. I affir am submitting this application.	Relations of the City Attorney f a Board Member o n and voting of this provided herein an bendix A, "What is a hat the proposed pe t no conflict of inter m that I am not a ce I further affirm that	before the NPG, and come Public roject exturrent if the	e NC has a couthe Departing Benefit," (s) and/or putiest that would Board Memogrant received.	otherwise and rogram(s) ald aber of the			
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No Yes - Please Name of NC Board Member I yes, did you request that the bofiling this application? I yes interest and completes this form, will deny the payment of this grant CTION V - DECLARATION AND SIGN I hereby affirm that, to the best of is truly and accurately stated. I further Appendix B "Conflicts of Interest" fall within the criteria of a public to prevent the awarding of the Neigh Neighborhood Council to whom I used in accordance with the the to the Neighborhood Council. A) Executive Director of Non-Profit Councils.	ard member consult the Office of No *(Please note that if or participates in the discussion in its entirety.) NATURE my knowledge, the information of this application and affirm the discussion of this application and affirm the density project/program and that all borhood Purposes Grant. I affirm am submitting this application. Title	Relations of the City Attorney a Board Member of this provided herein and pendix A, "What is a that the proposed put no conflict of interm that I am not a coll further affirm that ere, said funds shadenesses and funds sh	before the NPG, and come Public roject exturrent if the	e NC has a couthe Departing Benefit," (s) and/or putiest that would Board Memogrant received.	otherwise and rogram(s) ald aber of the ved is not nediately			
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^{*} 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

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PROJECT BUDGET OUTLINE m.a.r.y.'s day Community Event

revised: June 20, 2018

Personal Related Expenses	Total Projected Cost			
Presenters/Specialists	1,300			

Non- Personal Related Expenses	Total Projected Cost		
Advertisement	2,000		
Event Prep Workshops	700		
Labor to make/repair event equipment	900		
Printing	2,800		
Supplies / Art materials	2,700		
Equipment	1,000		
Miscellaneous	100		
Total	11.500		

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

Date: SEP 122014

MAKING THE ARTS REAL FOR YOUTH FOUNDATION
18013 DUNCAN STREET
ENCINO, CA 91316-6411

Employer Identification Number: 46-3682077 DLN: 26053637003894 Contact Person: CUSTOMER SERVICE ID# 31954 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: Effective Date of Exemption: October 21, 2013 Contribution Deductibility: 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 5436

Sincerely,

Tamera Ripperda

Director, Exempt Organizations

Letter 5436