



**NEIGHBORHOOD PURPOSES GRANT  
NC REFERENCE PACKET**

NEIGHBORHOOD PURPOSES GRANT  
**NC REFERENCE PACKET SUBMISSION CHECKLIST**

Please review the application and ensure that the following required documentation is included prior to submitting the application to the Department:

- Demand Warrant (DW)** – completely filled out by NC
- NPG Application**- completely filled out by Applicant
- W-9 Form**- completely filled out by Applicant
- Business Tax Registration Certificate (BTRC)** from Applicant
- Signed Board Resolution** (including Public Benefit Statement if not using newly revised Demand Warrant form)
- Project Budget**—from Applicant

Please select the item that corresponds to the entity requesting the Grant:

- Non-Profits 501 C(3)**
  - Submit: **IRS Determination Letter**
- Public Schools**
  - Submit: **Official School Letterhead**

# NEIGHBORHOOD PURPOSES GRANT PROPOSAL EVALUATION FORM

Use this form to evaluate the merit of each Neighborhood Purposes Grant application.

Grant Applicant's Name: \_\_\_\_\_

Date: \_\_\_\_\_ Reviewer's

Name: \_\_\_\_\_

## **PART I: ELIGIBILITY**

1. Is the organization a nonprofit agency with tax-exempt status under Section 501(c)(3) of the Internal Revenue Code?

Yes \_\_\_\_\_ No \_\_\_\_\_

2. Do the programs and services of the organization primarily serve residents of your Neighborhood Council area?

Yes \_\_\_\_\_ No \_\_\_\_\_

3. Does the organization have an office/staff located in your Neighborhood Council area?

Yes \_\_\_\_\_ No \_\_\_\_\_

## **PART II: FUNDING PRIORITIES**

1. Which of the following priority areas does the proposed project align with:

- |   |  |
|---|--|
| <input type="checkbox"/> Education      | <input type="checkbox"/> Civic Engagement          |
| <input type="checkbox"/> Health         | <input type="checkbox"/> Neighborhood Improvements |
| <input type="checkbox"/> Human Services | <input type="checkbox"/> Other                     |
| <input type="checkbox"/> Arts/Culture   |  |

2. Does the proposed project primarily serve residents of your Neighborhood Council?

Yes \_\_\_\_\_ No \_\_\_\_\_

3. Will the proposed project be complete within one fiscal year (July 1-June 30)?

Yes \_\_\_\_\_ No \_\_\_\_\_

4. Does the proposed project have a budget of \$5,000 or less (does not require City contract)?

Yes \_\_\_\_\_ No \_\_\_\_\_

5. Does the proposed project have a budget of \$5,001 or more (requires City contract)?

Yes \_\_\_\_\_ No \_\_\_\_\_

6. Does the proposed project have a budget of \$20,001 or more (requires City contract and approval from the Department's General Manager and the Board of Neighborhood Commissioners)?

Yes \_\_\_\_\_ No \_\_\_\_\_

**PART III: CONFLICT OF INTEREST**

1. Does any Neighborhood Council board member have a conflict of interest with the grant applicant?

Yes \_\_\_\_\_ No \_\_\_\_\_

**PART IV: SCORING FORM**

**Instructions:** Please use the rating scale below to score the elements in Sections A-E. A score should be assigned to the statement to indicate the extent to which the proposal addresses the corresponding statement.

**Rating Scale**

<b>1 - Poor</b>	<b>2 - Fair</b>	<b>3 - Good</b>	<b>4 - Excellent</b>
The proposal has serious deficiencies. Not likely to recommend for funding.	The proposal somewhat addresses this element and is lacking some information. Likely to recommend for funding.	The proposal addresses this element in a satisfactory manner and provides adequate information. Recommend for funding.	The proposal fully addresses this element and is well articulated. Strongly recommend for funding.

**Score / Max. Score**

**Section A: Agency Experience**

The organization possesses expertise in working with the specified target population(s) and has a history working in the identified target area(s).

\_\_\_\_\_ / Out of 4

**Section B: Identified Need**

The organization clearly identified the proposed need for the project and provided relevant information on the target population(s) and target area(s) to be served by the project.

\_\_\_\_\_ / Out of 4

**Section C: Measurable Objectives and Expected Outcomes**

The organization clearly articulated the measurable objective(s) and expected outcome(s) for assessing the progress of the proposed project.

\_\_\_\_\_ / Out of 4

**Section D: Project Timeline**

The organization clearly described the project activities and necessary steps for completing the proposed project within the indicated period or time.

\_\_\_\_\_ / Out of 4

**Section E: Merit of Proposal**

The overall merit of the proposal illustrates a project that aligns with one of the primary objectives of the Neighborhood Council : (1) improving the physical infrastructure of the community or, (2) improving community engagement and problem-solving capacity.

\_\_\_\_\_ / Out of 4

**Total Points: \_\_\_\_\_ / Out of 20**

**Section F: Overall Comments**

Please offer the applicant any comments, suggestions or feedback in the areas below.

*(Note: This information will be utilized to provide applicants with general feedback on their overall proposal.)*

1. Positive aspects of the proposal:

2. Areas for improvement:

3. General impressions and/or feedback:

Name of Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

**PART V: ATTACHMENTS**

Which of the following items were included as attachments to the proposal?

- Project Budget
- IRS Determination Letter [for 501 (c)(3) organizations]
- Board of Directors Roster (including officers, telephone numbers, professional affiliations and terms of office)
- Agency Operating Budget (current year)
- Form-990 (most recently submitted)
- Audited Financial Statement (most recently completed)

**NEIGHBORHOOD PURPOSES GRANT SAMPLE IRS DETERMINATION LETTER**

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

DEPARTMENT OF THE TREASURY

Date: **AUG 31 2005**

INITIATING CHANGE IN OUR  
NEIGHBORHOODS COMMUNITY DEV CORP  
12502 VAN NUYS BLVD STES 113 & 114  
PACOIMA, CA 91331

Employer Identification Number:  
95-XXXXXXX  
DLN:  
17XXXXXXXXXXXX

Contact Person:  
JOHN DOE ID# XXXXX  
Contact Telephone Number:  
(213) 555-1212

Public Charity Status  
170(b) (1) (A) (vi)

Dear Applicant:

Our letter dated JUNE 2002, stated you would be exempt from Federal Income tax under section 501(c)(3) of the Internal Revenue Code, and you would be treated as a public charity, rather than as a private foundation, during an advance ruling period.

Based on the information you submitted, you are classified as a public charity under the Code section listed in the heading of this letter. Since your exempt status was not under consideration, you continue to be classified as an organization exempt from Federal Income tax under section 501(c)(3) of the Code.

Publication 557, Tax-Exempt Status for Your Organization, provides detailed information about your rights and responsibilities as an exempt organization. You may request a copy by calling the toll-free number for forms, (800) 829-1676. Information is also available on our Internet Web Site at [www.irs.gov](http://www.irs.gov).

If you have general questions about exempt organizations, please call our toll free number shown in the heading between 8:30 a.m. and 5:30 p.m. Eastern time.

Please keep this letter in your permanent records.

Sincerely yours,

Jane Doe  
Director, Exempt Organizations  
Rulings and Agreements

## NEIGHBORHOOD PURPOSES GRANT BOARD RESOLUTION TEMPLATE

**Instructions:** Please place on your neighborhood council letterhead and fill-in the information between the brackets.

<DATE>

We, <board officer name 1> and <board officer name 2>, declare that we are the <title of board officer 1> and <title of board officer 2> respectively of the <nc name> and that on <date of nc meeting where resolution was adopted> a Brown Act noticed public meeting was held by the <nc name> with a quorum of <number> board members present and that by a vote of; <number> yes, <number> no, and <number> abstentions the <nc name> adopted the following resolution:

The Neighborhood Purposes Grant (NPG) application submitted by <applicant name> has been available for review and comment by the public and duly evaluated by the <nc name> Board.

Therefore be it resolved that the <nc name> approves the NPG submitted by <applicant name> in the amount of <grant amount> for the following purposes and community benefits:

<Itemize Approved Budget Expenses Here>

The abovementioned expenditure will have an impact on <insert who> for <insert purpose>.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date



## NEIGHBORHOOD PURPOSES GRANT PROJECT COMPLETION FOLLOW-UP

Neighborhood Councils providing a grant to 501(c)(3) organizations or to public schools should require the grantee to be accountable for the progress and/or completion of the proposed project.

As a best practice, the Neighborhood Council (NC) should set up spot check reviews of ongoing receipts for the project as it moves toward completion.

After the project comes to a close, the NC Treasurer should obtain a Project Completion Report from the grantee for the Board to then review.

One source of information that should be requested and obtained is the nonprofit's tax returns which show income and expenses for past, current and pertinent future years.

Some points to keep in mind:

- Neighborhood Councils must maintain accountability
- Maintain organized records and keep them available for review
- Have scheduled or periodic inspections and audits
- Review project receipts
- Review progress of the project
- Review Project Completion Report from grantee to NC  
(See Appendix A - Project Completion Report)
- Acquire photo's at project's throughout the process and/or at the project's completion

Should issues arise, the Department of Neighborhood Empowerment reserves the right to request all supporting documentation and to review the grant approval process as well as the project's progress and completion.

## NEIGHBORHOOD PURPOSES GRANT PROJECT COMPLETION FORM

Please complete the following information regarding the Neighborhood Purposes Grant your organization received from the Neighborhood Council listed below.

Awarding Neighborhood Council: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Grant Amount: \$ \_\_\_\_\_

Date Granted: \_\_\_\_\_

Please answer the following questions regarding the grant funding referred to above. Attach additional pages if necessary.

1. Please provide a summary of the overall project for which funding was granted.

2. Please detail the projected community impact and the actual outcome.

3. Please describe any challenges as well as solutions where appropriate.

\_\_\_\_\_  
*Submitted by*                      *Date*                      *E-mail*                      *Phone*