

**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 NC

SECTION I - APPLICANT INFORMATION

1a)	<u>818 Consultant LLC</u> <i>Organization Name</i>	<u>33-1475746</u> <i>Federal I.D. # (EIN#)</i>	<u>CA</u> <i>State of Incorporation</i>	<u>10-21-24</u> <i>Date of 501(c)(3) Status (if applicable)</i>
1b)	<u>1385 E. Thousand Oaks Blvd #A</u> <i>Organization Mailing Address</i>	<u>Thousand Oaks</u> <i>City</i>	<u>CA</u> <i>State</i>	<u>91362</u> <i>Zip Code</i>
1c)	<u></u> <i>Business Address (if different)</i>	<u></u> <i>City</i>	<u></u> <i>State</i>	<u></u> <i>Zip Code</i>

1d) PRIMARY CONTACT INFORMATION:

Monique Johnson 818-450-7040 Ms818consultant@outlook.com

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 Signed letter 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.

Free community Science Arts and Crafts Event located at Sherman Oaks Castle Park 4989 Sepulveda Blvd. Sherman Oaks, CA 91403

Contributing to the overall development of youth. Activities involving critical thinking skills and problem-solving abilities. Exploring various scientific concepts through hands-on projects. Our organization will provide free pizza for youth ages 0-18 for no child left hungry purposes, as well as community participating adults receiving free household essentials from bathroom tissue, laundry detergent, bath soaps, resulting helping families throughout the summer expenses.

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 Neighborhood Council providing essentials readily available in the home is important for maintaining a clean, healthy, and organized living space. Properly stocked household essentials also help to ensure that daily tasks can be completed efficiently and without interruption. Moreover, having these items on hand can also contribute to a sense of comfort, security, and overall well-being for those living in the home. In conclusion, household essentials play a crucial role in creating a functional and comfortable living environment for individuals and families. Young individuals can develop a deeper understanding of the world around them and provoke curiosity and a passion for learning. Additionally, participating in such activities can enhance their fine motor skills, spark imagination, and improve their ability to communicate and collaborate with others. Science arts and crafts play a crucial role in nurturing well-rounded and intellectually curious individuals who are prepared to face the challenges of the future.



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
Toilettes, household essentials, soap, bath tissue, laundry	\$1500	\$
Science utensils, potteries and plants, paints, water cure	\$1000	\$
pizza	\$500	\$

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?
 No Yes If Yes, please list names of NCs: _____

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

9) What is the TOTAL amount of the grant funding requested with this application: \$3,000

10a) Start date: 7/19/25 10b) Date Funds Required: 7/14/25 10c) Expected Completion Date: 7/19/25
 (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*
Monique Johnson CEO Monique 1/30/25
 PRINT Name Title Signature Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*
Mishae Lamb Secretary LAMB 1/30/25
 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
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

818 CONSULTANT LLC
10444 CANOGA AVE UNIT 12
CHATSWORTH, CA 91311

Date:
10/21/2024
Employer ID number:
33-1475746
Person to contact:
Name: J Mason
ID number: 5262489
Telephone: 877 829-5500
Accounting period ending:
October 31
Public charity status:
170(b)(1)(A)(vi)
Form 990 / 990-EZ / 990-N required:
Yes
Effective date of exemption:
October 14, 2024
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053691005504

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
Director, Exempt Organizations
Rulings and Agreements

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

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

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type.
See Specific Instructions on page 3.

	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Moniquesamone Johnson	
	2 Business name/disregarded entity name, if different from above. 818 CONSULTANT LLC	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input checked="" type="checkbox"/> Other (see instructions) Nonprofit exempt under IRS Code Section 501(c)3	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i>
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions. 10444 Canoga Ave Unit 12	Requester's name and address (optional)
	6 City, state, and ZIP code Chatsworth CA 91311	
	7 List account number(s) here (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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
or									
Employer identification number									
3	3	-	1	4	7	5	7	4	6

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 to me); 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. citizen or other U.S. person (defined below); and
4. 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 for Part II, later.

Sign Here	Signature of U.S. person 	Date 10-22-24
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

NPG Application

Section A: The Work Plan

Briefly provide the project description and timeline.

818 Consultant LLC is hosting a free community Science arts and crafts event for the youth providing low-income families complimentary pizza as well as necessary essentials.

Section B: Identified Need

Identify the need for the project/event and provide relevant information on the target population(s) and target area(s) to be served by the project.

Relevant information for Low-income families providing assistance with household items for families in need, with a no child left hungry intent.

Section C: Stakeholder Focus

Does the project or event take place within the NC boundaries? Yes No
Which NC stakeholders are the primary beneficiaries of the NPG? (e.g. students, unhoused, children, underprivileged, adults, etc. If the event is non-specific, indicate General Population.) How does it directly benefit them? What proportion of your beneficiaries are NC stakeholders?

Community based benefit, with adults in need for there children. A child resource for nourishment with an essential item provided

Section D: Economic Community Benefit

Does the project use vendors and/or service providers (preferably small businesses) located within the Neighborhood? If so, please list them and, if possible, the anticipated expenditure.

Will there be a lasting physical improvement to the environment or infrastructure of the community? If so, please describe.

No Vendors. Intended to be a helpful resource for the community to enjoy their local recreational centers.

Section E: Measurable Objectives

Describe the measurable objective(s) of the project.

Free community event with no limits on amount of people to attend. A policy for all gender, disabled or race treated equal.

Section F: Expected Outcomes

If the objective(s) of the project are met, what are the expected outcome(s)?

Services a redevelopment for the resources for the children and parents within the community. Having a activity to promote healthy activities outdoors for children. Providing for children who may be experiencing hunger. Providing parents a essential item, for their children.

Section G: Building Community

How does the proposed project improve community engagement, promote civility and understanding, encourage problem-solving, or otherwise build community?

The community can benefit from meeting people in their community encouraging their children to have more outdoor activities preventing future health conditions.

Section H: Awareness Raising

How will the project grow awareness of and otherwise promote the Neighborhood Council?

The city council is going to be added to the event flyer, so the community is aware of the involvement, with acknowledgement for provided services

Other supporting information:

Do you have a current contract with the City? (this is required for all requests over \$5000)

Will the project be completed within the current Fiscal Year? (July 1 - June 30)

No Contract with the City, Complete project is dated for July 2025.



JULY 2025 SCIENCE ARTS & CRAFTS

Event Description Heading

Local Free Community Event

Summer fun, family activities, Please join our summer event to bring the community together with free pizza , and free giveaways

Summer Science

Arts & Crafts

Science Projects

Music

Games

Free Pizza

Orbeez Water beads

Planting flower

Paper Rocket Ships

Painting

All ages ,all families

818 CONSULTANT LLC
Monique Samone, CEO

Mishae Lamb, Admin
Assistant