



CITY OF COACHELLA, CA COMMUNITY BASED GRANT PROGRAM APPLICATION FOR FUNDS REQUEST

Please Type Information and Print
Information entered in the provided spaces cannot be saved.

(Attach additional pages as needed, however applicants are encouraged to be brief.)

1. Application Funding Cycle:

Date: 2/11/2025

July 1, 2025 - June 30, 2026

2. Total Amount Requested: \$ 1000

If requesting waiver of City fees or charges, please indicate the City service for which the waiver is being requested. N/A

3. Proposed Program/Service of Funding Request:

Cover community meals with youth and/or caregiver while on outings in the Coachella and In

4. Agency/Organization:

Friends of the Children Coachella V

5. Mailing Address:

49950 Jefferson Street STE 230189

City: Indio Zip: 92201

6. Telephone: (760) 501-8792

Fax:

7. Official Contact Person:

Name: Karrie Schaaf

Title: Executive Director

Telephone: (760) 501-8788

Fax:

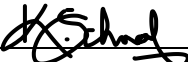
E-mail: KSchaaf@friendscoachellavalley.org

8. Does this organization have a non-profit status with the Internal Revenue Service (IRS)?
 Yes No (Attach documentation)
9. How long has this organization been in existence?
 2024
10. Has the organization previously received funding from the City of Coachella?
 Yes No
 If yes, please identify the program/service, total prior grant allocation, and the fiscal year in which the funds were received.
11. Is this request for a New or Existing program/service within the City?
12. What is the anticipated time frame to provide the proposed program/service and the expenditure of the requested funds?
 July 2025 - June 2026
13. Describe briefly how the requested funds will be used.
 Due to the food insecurity we are seeing with our families, we will use the \$1000 to provide meals for the youth we mentor and their caregivers while on outings and/or in emergent situations.
14. Will the program/service require additional funding sources? If so, identify all funding sources and provide the steps taken to acquire funding.
 We requested a \$5000 grant from the City of Indio to assist in providing meals and food support.
15. If the program/service is planned to continue beyond the period provided by this grant, what funding plans are there to sustain the program/service?
 We are continuing to apply for funds and solicit donations at community awareness presentations to allow us to provide supplemental food and meals when meeting with our families and youth.
16. How will the proposed program/service serve City of Coachella residents? Will the proposed program/service also serve non-Coachella residents? Please describe.
 We are serving 12 youth from Valley View and Palm View in CVUSD and will be serving 12 youth from Hoover and Roosevelt in DSUSD. We will also be purchasing the meals and food from businesses in the Indio and Coachella area. so further supporting the community.
17. Describe the characteristics of the clients the proposed program/service anticipates to serve (i.e. age group, gender, income level, ethnicity, etc.)
 We mentor youth for twelve years starting at the age of five and provide supportive services to their families. The youth we selected for Friends of the Children are facing multiple risk factors and our support hopes to reduce risk factors and increase their protective factors

18. Attach a proposed budget for requested funds.

Authorized Official: Karrie Schaaf

Title: Executive Director

Signature:  _____

Date: 2/11/25

FR1ENDS of the CH1LDREN

Coachella Valley

FY25 Unrestricted Operating Budget

REVENUE

Foundation contributions	275,000
Individual contributions	254,123
Corporate contributions	20,000
Grants from National	250,000
TOTAL REVENUE	\$799,123

EXPENSES

Salaries and related expenses

Wages	479,458
Payroll taxes	47,946
Benefits and 401(k) match	57,535
Total salaries and related expenses	\$584,939

Other expenses

Youth activities	7,200
Friend's activities	7,500
Caregiver engagement and support	4,800
Hiring and staff development	5,700
Community awareness	23,100
Travel and meetings	5,400
Supplies and equipment	12,120
Professional services	40,620
Audit and tax filing fees	3,600
Affiliation Fees	13,125
Rent, utilities, phone, and internet	49,000
Business insurance	8,000
Information technology	18,984
Payroll, banking, and donation fees	14,020
Total Other Expenses	\$213,169

Total Expenses	\$798,108
-----------------------	------------------

SURPLUS / (DEFICIT)	\$1,014
----------------------------	----------------

Budget Narrative

Foundation Contributions

Includes \$100,000 in secured funding; remaining \$175,000 needs to be raised

Individual Contributions

Includes \$224,123 in secured funding; remaining \$30,000 needs to be raised

Corporate Contributions

\$20,000 to be raised

Grants from National

Consists of the expansion grant

Salaries and Related Expenses

Year 1 staffing includes Executive Director, Program Director, Operations Director, and three Friends. Each Friend provides direct services to eight youth. Friends are expected to maintain a cell phone and travel with the youth so expense includes \$50/month for cell phone reimbursement.

Youth Activities

Costs included are related to Youth activities, \$30/child/month.

Friend Activities

Costs included are related to Friends (\$50/Friend/month) and the cost of transportation for those activities (\$200/month direct mileage reimbursement).

Caregiver Engagement and Support

\$20 per month per family

Hiring and Staff Development

Amount is based on averages from recently launched chapters. Costs include recruitment, background checks, new staff training, and staff development.

Community Awareness

Expenses related to awareness, fundraising events and partnership cultivation

Travel and Meetings

Administrative travel that includes board and committee meetings, community partner meetings and events

Supplies and Equipment

Based on average expenses from four similar size chapters plus three laptops for Friends

Professional Services

Includes, but not limited to, costs of contracting Finance through Friends-National (\$2,260 per month) & grant writing services (20 hrs a month @ \$90 per hour + 10% admin fee).

Audit and Tax Filing Fees

990 filing fee of 3,600

Affiliation Fees

Affiliation fees of \$13,125 to National

Rent, utilities, phone, and internet

Based on estimate provided by Executive Director

Business insurance

Estimate based on other chapters

Information technology

Cost of accessing National's program database management system, donor database, and monthly fees for Microsoft, IT support and learning management system.

Payroll, banking, and donation fees

Based on fee assumptions



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

FRIENDS OF THE CHILDREN COACHELLA VALLEY
900 ISLAND DRIVE UNIT 403
RANCHO MIRAGE, CA 92270

Date:
06/26/2024
Employer ID number:
99-3003825
Person to contact:
Name: Customer Service
ID number: 31954
Telephone: 877-829-5500
Accounting period ending:
August 31
Public charity status:
170(b)(1)(A)(vi)
Form 990 / 990-EZ / 990-N required:
Yes
Effective date of exemption:
June 19, 2024
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053576010424

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