

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: 02/21/2024

July 1, 20 24 - June 30, 20 25

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.

3. Proposed Program/Service of Funding Request:

Coachella Youth Baseball & Softball

4. Agency/Organization: CYBSA

5. Mailing Address:
PO Box 1296
City: Coachlla Zip: 92236

6. Telephone: (760) 777-3725

Fax:

7. Official Contact Person:

Name: Deana Alvidrerz

Title: Treasurer

Telephone: (760) 777-3725

Fax:

E-mail: cybsa2017@gmail.com

 8. Does this organization have a non-profit status with the Internal Revenue Service (IRS)? Yes Vo (Attach documentation)		
9. How long has this organization been in existence? 12 years		
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 is which the funds were received. 2023		
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? March 2023		
13. Describe briefly how the requested funds will be used. Team Uniform, end of season trophies, coaches equipment ex Bases, tee, balls, nets		
14. Will the program/service require additional funding sources? If so, identify all funding sources and provide the steps taken to acquire funding. Team sponsorships, local businesses		
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? Team registartions, team sponsorships, local businesses		
16. How will the proposed program/service serve City of Coachella residents? Will the proposed program/service also serve non-Coachella residents? Please describe. It will keep children stay active, it can help with mental status. Keep them safe and out of trouble.		
17. Describe the characteristics of the clients the proposed program/service anticipates to serve (i.e. age group, gender, income level, ethnicity, etc.) ages 4-14 all genders. all diffrent levels of social economic status & ethnicities.		
 18. Attach a proposed budget for requested funds.		
Authorized Official: Deana Alvidrez Title: Treasurer		
Signature: Deana Alvidrez Date: 2/28/24		

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

Date: DEC 24 2015

COACHELLA, CA 92236

COACHELLA YOUTH BASEBALL & SOFTBALL INC C/O ASSOCIATION INC 84-076 CALENDULA AVE Employer Identification Number: 80-0360619
DLN:

17053288310025 Contact Person:

MS. TRUSTY ID# 31657

Contact Telephone Number: (877) 829-5500

Accounting Period Ending:
September 30
Public Charity Status:
509(a)(2)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
October 9, 2015
Contribution Deductibility:
Yes
Addendum Applies:

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.

No

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.

Based on the information you submitted with your application, we approved your request for reinstatement under Revenue Procedure 2014-11. Your effective date of exemption, as listed at the top of this letter, is the postmark date of your application.

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

COACHELLA YOUTH BASEBALL & SOFTBALL

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,

Jeffrey I. Cooper

Director, Exempt Organizations

Rulings and Agreements

Budget Proposal CYBSA Spring Season 2024

Baseball \$37.99 DZ	6 dz for season	\$227.94
Tballs \$29.69 DZ	4 dz for season	\$118.76
Softballs \$42.59 DZ	4dz for season	\$170.36
Bases \$7.79	5 for season	\$38.95
Plugs for Field each \$ 3.89	24 for fields	\$93.36
Nets \$ 75.00	2 for season	\$150
Tees \$10	5 for season	\$50.00
Score books	11 for season	110
Total	\$959.37	
Tax 8%	\$67.94	
Grand Total		\$1,027.31

Shipping Unknown

Coachella Youth Baseball & Softball Association

P.O BOX 1296

Coachella , Ca 92236

760-777-3692

Deana Alvidrez

Treasurer