



# 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: 05/02/2024

July 1, 2023 - June 30, 2024

2. Total Amount Requested: \$ 3,000.00

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:

Request funding to continue the rescue, rehabilitation and rehoming of abandoned animals.

4. Agency/Organization:

Desert Paws Sanctuary

5. Mailing Address:

PO Box 342

City: Indio Zip: 92202

6. Telephone: (760) 574-9284

Fax:

7. Official Contact Person:

Name: Yesenia Reynoso

Title: Chief Financial Officer

Telephone: (760) 701-2056

Fax:

E-mail: [donate@desertpawssanctuary.org](mailto:donate@desertpawssanctuary.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?

Incorporated June 2023 and roots back to 2020 by a group of friends sharing the same passion of saving animals.

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?

All operations are carried out entirely by volunteers. Funds will be expended for spay/neuter and vaccination services to encourage the adoption of 47 rehabilitated dogs over a six-month period.

13. Describe briefly how the requested funds will be used.

Efforts will focus to address and expand spay/neuter and vaccination services and other medical services with the goal of adoption. The intent is to reduce the number of dogs, with a focus on injured and pregnant or nursing dogs, who are abandoned in the desert and reduce the likelihood they will experience fatal outcomes.

14. Will the program/service require additional funding sources? If so, identify all funding sources and provide the steps taken to acquire funding.

Desert Paws Sanctuary partners with a local low-cost spay/neuter and vaccination organization, California Animal Network, to provide spay/neuter and vaccinations for adoptable dogs and strays. Other close partners are Animal Action League, West Coast Boxers Rescue, Support 4 Paws, Animal Rescue of California, Loving All Animals, and Forgotten Felines Rescue.

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?

Funding will be used over a 6-month period.

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 will reduce the number of abandoned animals in our community while also providing education and resources to low-income communities regarding animal welfare.

17. Describe the characteristics of the clients the proposed program/service anticipates to serve (i.e. age group, gender, income level, ethnicity, etc.)

We would like to address the needs of our low-income community by reducing the number of animals prone to injury or death. Also, educate families and our youth on animal welfare to help understand the needs of our community.

18. Attach a proposed budget for requested funds.

Authorized Official: Yesenia Reynoso

Title: Chief Financial Officer

Signature: \_\_\_\_\_

Date: 5/2/2024

# Nonprofit Budget Fiscal Year 2023-24



<b>Revenue</b>	<b>Amount</b>	
Adoption Fees	\$3,600.00	
Donations directed by Individuals	\$15,000.00	
In-kind Donation	\$2,000.00	
Special Event Donations	\$2,000.00	
Government Grants	\$2,000.00	
Corporate Grants	\$2,500.00	
<b>Total Revenue</b>		<b>\$27,100.00</b>
<b>Expenses</b>	<b>Amount</b>	
Medical Care	\$10,000.00	
Pet Food and Supplies	\$8,000.00	
Travel & Auto Expenses	\$3,000.00	
Advertising and Printing	\$2,000.00	
Bank Fees and Service Charges	\$600.00	
Office Expense	\$500.00	
Supplies and Materials	\$1,000.00	
Taxes and Licenses	\$600.00	
<b>Total Expenses</b>		<b>\$25,700.00</b>
<b>Net Surplus/Deficit</b>		<b>\$1,400.00</b>

*Initial Budget for foster-based nonprofit*



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

DESERT PAWS SANCTUARY  
83091 LOS CABOS AVE  
COACHELLA, CA 92236

**Date:**  
07/07/2023  
**Employer ID number:**  
93-1979615  
**Person to contact:**  
Name: Customer Service  
ID number: 31954  
Telephone: (877) 829-5500  
**Accounting period ending:**  
June 30  
**Public charity status:**  
170(b)(1)(A)(vi)  
**Form 990 / 990-EZ / 990-N required:**  
Yes  
**Effective date of exemption:**  
June 19, 2023  
**Contribution deductibility:**  
Yes  
**Addendum applies:**  
No  
**DLN:**  
26053579001263

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](http://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