

## 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: 06/16/2025

July 1, 20<u>25</u> - June 30, 20<u>26</u>

**2. Total Amount Requested:** \$ <u>1,000</u>.00

If requesting waiver of City fees or charges, please indicate the City service for which the waiver is being requested.  $_{\sf NO}$ 

3. Proposed Program/Service of Funding Request:

Due to budget cuts , our athletic department cannot afford to buy needed away jerseys for ou

4. Agency/Organization:	7. Official Contact Person:			
Cvhs Athletics Booster Club, Inc 5. Mailing Address:	Name: Gracie Reynoso			
P. O Box 1337 City: <sub>Coachella</sub> Zip: <sub>92236</sub>	Title: Donation Coordinator			
	<b>Telephone:</b> (760) 397-9545			
6. Telephone: (760) 397-9545 Fax:	Fax:			
	E-mail: Cvhsathleticsboosterclub@gmail.com			

- 8. Does this organization have a non-profit status with the Internal Revenue Service (IRS)? Yes Von(Attach documentation)
- **9.** How long has this organization been in existence? 2017
- 10. Has the organization previously received funding from the City of Coachella?
  - Yes Vo

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 **v**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?

Our Football season start August 2025-November 2025- following CIF games

- 13. Describe briefly how the requested funds will be used. Due to the budget cuts, this grant would allow us to purchase away jersey for our varsity team so that we can pass down our current jersey to our younger players so that all of our student- athletes have usable uniforms.
- 14. Will the program/service require additional funding sources? If so, identify all funding sources and provide the steps taken to acquire funding.

Uniforms must be repleaced every three seasons due to wear and tear. Uniforms purchased by this grant will not need to be replaced until 2028.

**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 requesting this grant to go towards our new jersey funds, we have a quantity of 71 students and 95.00 per uniform. Our CVHS Football program provides critical extracurricular activities that require young men from our community, many who are in risk

- 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 require a C average for program eligibility and strict schedule of practice activities and accountability. We also teach students about their weight training, recovery, hydration, the danger of controlled subtances, while promoting mentoring and guidence.
- 17. Describe the characteristics of the clients the proposed program/service anticipates to serve (i.e. age group, gender, income level, ethnicity, etc.)

As a volunteer-led organization serving our community in the Eastern Valley , we are commited to serve all our student- atheletes. We want to make sure our students have all the resources to thrive on and off the field. Most of our players come from low - income

18. Attach a proposed budget for requested funds.
Authorized Official: Signature: Date: 0.10.2025.

CVHS Athletics Booster Club			
2025 Season Budget			
Team Equipment	<u>Unit</u>	<u>Budget</u>	
Ice Machine	1x	1,000.00	
Ice Pods	1x	90.00	
Water jugs	x2	60.00	
Locker rooms (Broken locker rooms/Benches)	Remodel (x50)	5,000.00	)
Ice chest	2x	50.00	
<u>Uniforms</u>			
JV ( Practice Games )	50 Players	500.00	
Varsity ( Practice Games )	50 Players	500.00	
Extra cleats for players in need	x2	200.00	
Spirit Packs( Green and Black shirts, Drawstring bag)		4,000.00	
CIF away Jerseys	x71	6,745.00	
Travel Expenses			
CIF games (Booster Club responsible for Half)	Estimated 3 games	3,000.00	
Away games (Booster club responsible for Half)	4 away games	2,500.00	
Camps	2x	500.00	
Team Meals			
JV – Thursday,s	7 games	600.00	
Varsity – Friday Games	7games	600.00	
	Total Budget	25,345.00	

# MEMBERSHIP AND TAX EXEMPT STATUS CERTIFICATE

This document certifies that

#### CVHS Athletic Booster Club, Inc. EIN: 82-1802920 • Fiscal year end: December

EIN. 82-1802920 • FISCAI year end. December

is a subordinate member in good-standing of Parent Booster USA, Inc. through

### December 31, 2025

and as a result is recognized by the Internal Revenue Service as tax-exempt under section 501(c)(3) of the Internal Revenue Code.

Information about federal tax-exempt status under section 501(c)(3) of the Internal Revenue Code.

Membership in Parent Booster USA must be renewed annually to maintain tax-exempt status. To renew membership, visit: <u>parentbooster.org/renew</u>.

Parent Booster USA, Inc. is a Florida nonprofit corporation recognized by the IRS as tax-exempt under section 501(c)(3) of the Internal Revenue Code. Parent Booster USA, Inc. has also been issued a group exemption letter by the IRS that recognizes Parent Booster USA's subordinate organization members as tax-exempt under section 501(c)(3). Parent Booster USA quarterly provides the IRS with an updated list of its subordinate organizations in good standing. Subordinate organizations in good standing are provided with this certificate to confirm their federal tax-exempt status.

# Confirming Parent Booster USA's tax-exempt status.

Parent Booster USA's federal tax-exempt status and group exemption letter may be confirmed on the IRS website as follows:

- 1. Go to <u>www.irs.gov</u> or visit <u>apps.irs.gov/app/eos</u> and skip to step 5
- 2. At the top the page under **Search**, or under **Menu** on mobile, click **Charities & Non-profits**
- 3. Click the link for the **Tax Exempt Organization Search**
- 4. Down the page, click the blue button for the Tax Exempt Organization Search
- 5. Enter Parent Booster USA's EIN: 30-0281785
- 6. Click Search

Under **Deductibility Status**, it says **GROUP**. If you click on **GROUP**, an explanation regarding the group letter ruling that exempts PBUSA's subordinates appears.



13506 Summerport Village Pkwy #1506 Windermere, FL 34786 Phone: 407-347-0063 Fax: 407-459-7546 Email: info@parentbooster.org Internal Revenue Service P. O. Box 2508 Cincinnati, OH 45201

#### Department of the Treasury

Date: June 27, 2019

PARENT BOOSTER USA INC 3554 W ORANGE COUNTRY CLUB DR WINTER GARDEN FL 34787 Person to Contact: Mrs. Brown # 02-02975 Employer Identification Number: 30-0281785 Group Exemption Number: 5271

Dear Sir or Madam:

This is in response to your request dated June 24, 2019, for information about your tax-exempt status.

Our records indicate we issued a determination letter to you in October 2005, and that you're currently exempt under Internal Revenue Code (IRC) Section 501(c)(3).

We also recognized the subordinates on the list you submitted as exempt from federal income tax under IRC Section 501(c)(3).

For federal income tax purposes, donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106 and 2522.

Because IRC Section 170(c) describes your subordinate organizations, donors can deduct contributions they make to them.

Please refer to www.irs.gov/charities for information about filing requirements. Specifically, IRC Section 6033(j) provides that, if you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked on the filing due date of the third required return or notice.

In addition, each subordinate organization is subject to automatic revocation if it doesn't file a required return or notice for three consecutive years. Subordinate organizations can file required returns or notices individually or as part of a group return.

For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).

If you have questions, call 1-877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific Time).

Sincerely yours,

Apphele a. martin

Stephen A. Martin Director, Exempt Organizations Rulings and Agreements 760-818-6525 Cvhsathleticsboosterclub@gmail.com Thank You

Your company name to be advertised \_\_\_\_\_Aziz Farms\_\_\_\_\_

Amount of your contribution \_\_\_\_\$1000\_\_\_\_

Mailing address to receive receipt \_\_\_\_82805 Avenue 60 \_\_

\_Thermal Ca 92274\_\_\_

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CONTRACTOR CARLON CONTRACTOR OF STREET

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TAX ID-EIN: 82-1802920

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Mechanics Bank 5973

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