## 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: July 1, 20 <u>25</u> - June 30, 20 <u>2026</u>	Date: <u>02/27</u> /2025		
2. Total Amount Requested: \$ <u>1000</u> If requesting waiver of City fees or cha is being requested.	arges, please indicate the City service for which the waiver		
3. Proposed Program/Service of Funding Request: Coachella Youth Baseball & Softball Association			
<ul> <li>4. Agency/Organization: CYBSA</li> <li>5. Mailing Address: P.O BOX 1296 City: Coachella<sup>Zip</sup>: 92236</li> <li>6. Telephone: (760) 777-3725 Fax:</li> </ul>	<ul> <li>7. Official Contact Person: Name: Deana Alvidrez</li> <li>Title: Treasurer</li> <li>Telephone: (760) 777-3725</li> <li>Fax:</li> <li>E-mail: cybsa2017@gmail.com</li> </ul>		

- 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? 13yrs
- 10. Has the organization previously received funding from the City of Coachella?

If yes, please identify the program/service, total prior grant allocation, and the fiscal year in which the funds were received.

2024

- 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 2025 - May 2025
- 13. Describe briefly how the requested funds will be used. Purchase Baseball & Softballs used for games during the season. Trophies for players at end of season. Baseball equipment for new coaches, tee's, balls, bases.
- 14. Will the program/service require additional funding sources? If so, identify all funding sources and provide the steps taken to acquire funding. Sponsorships from local buinesses. Teams will reach out to businesses to get donations/ sponsorships for uniforms & equipment.
- 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? Donations, Registrations.
- 16. How will the proposed program/service serve City of Coachella residents? Will the proposed program/service also serve non-Coachella residents? Please describe. Yes, it helps keep children and teens stay active. This is an outlet to help kids with their mental well being. Helps keep them out of trouble. Having high school students learn time
- management to become responsible adults when they are umpiring baseball games. 17. Describe the characteristics of the clients the proposed program/service anticipates to serve (i.e. age group, gender, income level, ethnicity, etc.)

All diffrent levels of social economic class. 4 yr olds to 14 yr olds.

18. Attach a proposed budget for requested fur	nds.
Authorized Official: Deana Alvidrez	Title: Treasuerer
Signature: Deana Alvidrez	Date: <u>2/2</u> 7/2025

## Budget Proposal CYBSA Spring Season 2025

5 for season	\$128.45
2 for season	\$98.18
2 for season	\$231.98
5 for season	\$18.45
5 for season	\$23.95
5 for season	\$10.45
134 season	\$1164.46
	2 for season 2 for season 5 for season 5 for season 5 for season

Total	\$1675.92
Tax 8%	\$134.07
Grand Total	\$1809.99

Shipping

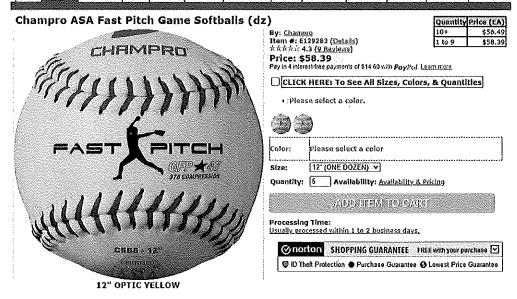
Unknown

Coachella Youth Baseball & Softball Association P.O Box 1296 Coachella, CA 92236 760-777-3725

Deana Alvidrez Treasuer



Home The Source Swimming Volleyball Cheer Football Lacrosse Playground Soccer Swimming Volleyball Fan Gear Closeouts



DEPARTMENT OF THE TREASURY

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

Date: DEC 24 2015

COACHELLA YOUTH BASEBALL & SOFTBALL INC C/O ASSOCIATION INC 84-076 CALENDULA AVE COACHELLA, CA 92236

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:
No

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.

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

Letter 947

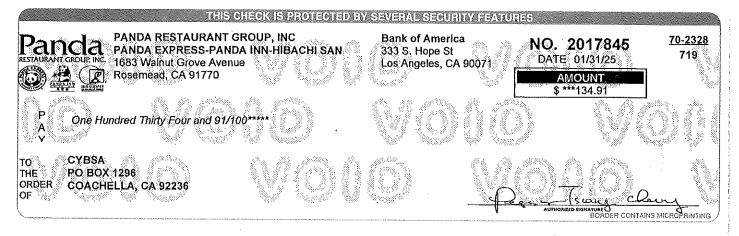
## COACHELLA YOUTH BASEBALL & SOFTBALL

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,

MI

Jeffrey I. Cooper Director, Exempt Organizations Rulings and Agreements



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			12/17/2024
PAY TO THE ORDER OF	CYBSA		<b>\$</b> **250.00
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	CYBSA PO BOX 1296 Coachella, CA 92236		
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