

- **A Director's motion to support the NPG submitted to the Ad Hoc COVID 19 Committee from the Well Baby Center, a non-profit organization engaged in valuable COVID 19 relief efforts for the Mar Vista CC community in the amount of \$5K.**

The COVID-19 pandemic is more than just a health crisis — it is impacting our communities-children and students, our local businesses, and our community members' livelihoods. As all continue to respond to this new challenge, many nonprofits are grappling with how to support the needs of the most vulnerable people in our community, and our neighbors are struggling to support their own families, while also trying to endure this crisis themselves. This unprecedented pandemic has more and more community members reliant on community nonprofit groups that are struggling to keep up due to lack of funds to purchase and support the needed resources and services.

Given these identifiable needs, to maximize our impact and be as effective as possible with our limited resources, we should make every attempt to utilize the existing infrastructure of food purchasing, distribution, services, or volunteers available.

To that end, there are existing organizations serving community members within our MVCC area working ON THE GROUND NOW with which MVCC can leverage its support for maximum results and efficiency to meet the significant needs of the community.

Now, the MVCC has an opportunity to leverage its resources to maximize impact today for our community. Delaying support for assistance efforts not only impacts those most vulnerable within our community, but it also continues to put more pressure on other public services and limited nonprofit assistance. These nonprofits have expressed that for every day they work to serve communities, the demand grows just as much for the next day. With every moment this pandemic continues, the greater the need from community members and the community nonprofits which seek to help them. Delaying support for community nonprofits groups serving the community means one less child or family they can feed, one less struggling student they can tutor, one less parent they can counsel.

Nonprofits have expressed the needs of the populations they serve and shared efforts underway from their teams to help our community members who need help TODAY. These organizations have expressed profound unmet demand for resources and support and services to serve Mar Vista area community members.

As community members continue to endure this pandemic, there has been an exponential increase in demand for needed resources (e.g. food, water and cleaning items, diapers), as well as for direct support and services (e.g. delivered groceries, financial and housing security counseling, remote educational assistance and tutoring), as witnessed by various nonprofit organizations serving the community at the grassroots level in the MVCC area.

Though limited, our MVCC NC funding can be leveraged within existing non-profit organizations which have a solid infrastructure to ensure the most productive use of resources is executed.

The Ad Hoc COVID-19 Response Committee has identified priorities for the community's needs at this time, including:

- Informational Resource Sharing and Outreach
- Food access and distribution
- Health/wellness support for parents and children
- Family resources--supplies and aid

**This motion seeks to support the Well Baby Center's NPG.**

**Well Baby Center is a non-profit parenting and counseling center located in the heart of Mar Vista, offering low fee service, no fee scholarships and sliding scale fees. Community offerings include group services, and free community activities in the walk-in center. They can offer a kit to families within the community with young children – a community struggling to find joy in the midst of work, childcare, and home-schooling responsibilities. Some are facing financial hardship, others are managing to care for a sick family member, while others may be feeling isolated, scared, and anxious. Enter a bit of sunshine with their survival kit. Funding will support these kits, which will include various wellness resources, developmental activities for children, and a way to support the continued growth of young children confined at home for over 200 kits.**

**I, therefore, MOVE for the MVCC to support an NPG from the Well Baby Center, a non-profit organization engaged in valuable COVID 19 relief efforts for the MVCC community in the amount of \$2,994, to provide mental health-focused materials, face masks, and activity supplies for children.**

**WBC NPG ATTACHED [HERE](#)**

**Neighborhood Council Funding Program**  
**APPLICATION for Neighborhood Purposes Grant (NPG)**



This form is to be completed by the applicant seeking the Neighborhood Purposes Grant and submitted to the Neighborhood Council from whom the grant is being sought. All applications for grants must be reviewed and approved in a public meeting. Upon approval of the application the Neighborhood Council (NC) shall submit the application along with all required documentation to the Office of the City Clerk, NC Funding Program.

Mar Vista

Name of NC from which you are seeking this grant: \_\_\_\_\_

**SECTION I - APPLICANT INFORMATION**

1a)	Well Baby Center	26-2055149	CA	08/12/2008
	<i>Organization Name</i>	<i>Federal I.D. # (EIN#)</i>	<i>State of Incorporation</i>	<i>Date of 501(c)(3) Status (if applicable)</i>
1b)	12316 Venice Blvd.	Mar Vista	CA	90066
	<i>Organization Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
1c)				
	<i>Business Address (if different)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
1d)	<b>PRIMARY CONTACT INFORMATION:</b>			
	Donna Rabin	(31) 402-2229 x 108	donna@wellbabycenter.org	
	<i>Name</i>	<i>Phone</i>	<i>Email</i>	
2)	<b>Type of Organization- Please select one:</b>			
	<input type="checkbox"/> Public School <i>(not to include private schools)</i> Attach Signed letter on School Letterhead	or	<input checked="" type="checkbox"/> 501(c)(3) Non-Profit <i>(other than religious institutions)</i> Attach IRS Determination Letter	
3)				
	<i>Name / Address of Affiliated Organization (if applicable)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

**SECTION II - PROJECT DESCRIPTION**

4) Please describe the purpose and intent of the grant.

Well Baby Center has provided affordable counseling, parent education, and other support for middle to low-income families in the community for over 11 years. The purpose of the grant is to produce and distribute a mental health focused "Survival Kit" with adult and child face masks, art supplies, and materials for wholesome and fun activities for children and families. A handbook will provide important information (such as "How to Talk to Kids About COVID"), simple exercises and techniques to help maintain stability and sanity in the household, links to resources and more, in an uplifting format.

5) How will this grant be used to primarily support or serve a public purpose and benefit the public at-large. (Grants cannot be used as rewards or prizes for individuals)

As part of our response to COVID-19, we have remained open during the pandemic, offering free phone consultations and tele-health counseling and support groups designed to help individuals and families cope with the uncertainties, financial stresses, and increased anxieties of parenting under stay-at-home orders. We intend to work with other local nonprofits to gather additional useful items and identify families in need, and would distribute 200 kits to families. Each kit helps every member of a household. The kits are intended to promote family wellness, destigmatize the need for help and support during this time, and raise awareness of mental health and wellness services. Community support is a known preventative factor in mental health, which is the purpose of providing this kit, with MVCC, to our local families.

**SECTION III - PROJECT BUDGET OUTLINE**

You may also provide the Budget Outline on a separate sheet if necessary or requested.

6a)	<b>Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
	production of handbook and kits 5 hours @\$20	\$ 100	\$ 100.00
		\$	\$
6b)	<b>Non-Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
	please see itemized budget (attached)	\$ 2894.00	\$ 2894.00
		\$	\$

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?  
 No  Yes If Yes, please list names of NCs: \_\_\_\_\_

8) Is the implementation of this specific program or purpose described in Question 4 contingent on any other factors or sources or funding? (Including NPG applications to other NCs)  No  Yes If Yes, please describe:

Source of Funding	Amount	Total Projected Cost
	\$	\$
	\$	\$
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application: \$ 2994.00

10a) Start date: 6 / 1 / 20 10b) Date Funds Required: 6 / 1 / 20 10c) Expected Completion Date: 6 / 31 / 20  
 (After completion of the project, the applicant should submit a Project Completion Report to the Neighborhood Council)

**SECTION IV - POTENTIAL CONFLICTS OF INTEREST**


11a) Do you (applicant) have a current or former relationship with a Board Member of the NC?  
 No  Yes If Yes, please describe below:

Name of NC Board Member	Relationship to Applicant

11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application?  
 Yes  No \*(Please note that if a Board Member of the NC has a conflict of interest and completes this form, or participates in the discussion and voting of this NPG, the NC Funding Program will deny the payment of this grant in its entirety.)

**SECTION V - DECLARATION AND SIGNATURE**

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is truly and accurately stated. I further affirm that I have read the documents "What is a Public Benefit," and "Conflicts of Interest" of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit project/program and that no conflict of interest exist that would prevent the awarding of the Neighborhood Purposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am submitting this application. I further affirm that if the grant received is not used in accordance with the terms of the application stated here, said funds shall be returned immediately to the Neighborhood Council.














12a) Executive Director of Non-Profit Corporation or School Principal - **REQUIRED\***  
 Deborah Groening-Rother Founder, CEO  05/08/2020  
 PRINT Name Title Signature Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - **REQUIRED\***  
 Donna Rabin Development Director  05/08/2020  
 PRINT Name Title Signature Date

\* If a current Board Member holds the position of Executive Director or Secretary, please contact the NC Funding Program at (213) 978-1058 or [clerk.ncfunding@lacity.org](mailto:clerk.ncfunding@lacity.org) for instructions on completing this form

**BUDGET: "JUST ADD WATER" PARENT'S SURVIVAL KIT QUANTITY 200**

Supplies/Materials

	Item	Price/Qty	Cost	Per Kit
	2 washable reusable cloth face masks (1 adult/1 child). Partial donation, reg \$6.25-7.25 each	\$3.00/each x 400	1200.00	6.00
	4 oz glass jar/lid	\$21.03/24 x 9	190.00	.88
	4 oz Dawn dish soap	\$19.89/gal x 7	140.00	.63
	1/2 cup sugar	\$0.50/lb x 50	25.00	.06
	wooden dowel	\$6.50/100 x 2	13.00	.07
	pipe cleaner	\$2.00/100 x 2	4.00	.02
	1 cup flour	\$2/lb x 58	116.00	.58
	1 cup salt	\$0.26/lb x 100	26.00	.13
	1 tbsp cream of tartar	\$25/5 lbs	25.00	.12
	1 packet food coloring	\$18.62/24 x 9	167.58	.83
	1 .5 oz packet cooking oil	\$13.18/10 x 20	263.00	1.31
	watercolor paint kit w/brush	\$68/40 x 5	340.00	1.91
	#5 paper bags for dry ingredients	\$3.70/250 x 2	7.40	.04
	12x10x7 recycled kraft bag	\$6.50/25 x 8	52.00	.29
	labels to seal ingredient bags	\$58/8000	58.00	.02
	<b>Kit Materials Subtotal</b>		<b>2627.00</b>	<b>\$12.89</b>
<b>Printed Materials/Ads</b>				
	200 sheets card stock (handbook)	\$18/pack	18.00	
	2000 sheets paper (handbook)	\$39/case	39.00	
	Creative design & printing (handbook)	\$0.06/page x 2000	120.00	
	Facebook ad push	\$3/day x 30	90.00	
<b>Production/Distribution</b>				
	Staff est 5 hours @ avg \$20/hr. <i>(we will rely mostly on volunteers for assembly and distribution of the kits and flyers).</i>		100.00	
	<b>Total Project—200 Kits*</b>		<b>\$2,994.00</b>	

**\*Not included in this budget are additional materials and goods we would solicit for donation by other organizations for inclusion in the kits--hand sanitizer, wipes, paper towels, etc.**

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

DEPARTMENT OF THE TREASURY

Date: AUG 12 2008

THE INFANT PARENT MENTAL HEALTH  
FOUNDATION  
C/O KENNETH L GROSS  
9777 WILSHIRE BLVD STE 515  
BEVERLY HILLS, CA 90212

Employer Identification Number:  
26-2055149  
DLN:  
17053086346008  
Contact Person:  
THOMAS C KOESTER ID# 31116  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Effective Date of Exemption:  
February 15, 2008  
Addendum Applies:  
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Based on the information you submitted with your application, we have determined you are likely to qualify as a private operating foundation described in section 4942(j)(3) of the Code. Accordingly, you are treated as a private operating foundation for your first year. After that, you will be treated as a private operating foundation as long as you continue to meet the requirements of section 4942(j)(3). You are required to file Form 990-PF annually.

Please see enclosed Publication 4221-PF, Compliance Guide for 501(c)(3) Private Foundations, for some helpful information about your responsibilities as an exempt organization.

Letter 1075 (DO/CG)