



**City of Los Angeles  
Office of the City Clerk  
Neighborhood Council Funding Program**



**Neighborhood Purposes Grants**

Neighborhood Purposes Grants (NPGs) provide NCs opportunities to develop partnerships with local 501(c)(3) nonprofits and public schools to build community and enhance neighborhoods in the City of Los Angeles. Projects and activities supported by NPGs vary widely and can include, but are not limited to:

- The Arts
- Beautification
- Community Support
- Education
- Community Improvements

NPG-funded projects and activities must be for a **public benefit** and purpose, **open**, **accessible**, and **free of charge** to stakeholders.

Grants approved by NCs exceeding \$5,000 involve further review and possible City contract by the Office of the City Clerk.

Visit the NC Funding Program website page on NPGs ([click here](#)) to find out more details about how 501(c)(3) nonprofits and public schools serving NC areas can apply. There are two NPG Information Packets; One for prospective applicants to help guide them in the application process, and one for NC board members outlining considerations and factors to keep in mind while evaluating NPG requests.

A “Project Completion Report” template is also provided to help ensure accountability in the use of Grant funds and help demonstrate how NCs and their partners are supporting L.A. communities and stakeholders. NCs and NPG recipients are strongly encouraged to work together to complete and submit the Report at the conclusion of the project.

Any questions you may have with the NPG process, please contact us at the NC Funding Program:

- [Clerk.NCFunding@lacity.org](mailto:Clerk.NCFunding@lacity.org)
- (213) 978-1058

**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.

North Hollywood West

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

**SECTION I - APPLICANT INFORMATION**

1a)	SHE IS HOPE LA	83-2159039	CA	8/29/2018
	<b>Organization Name</b>	<b>Federal I.D. # (EIN#)</b>	<b>State of Incorporation</b>	<b>Date of 501(c)(3) Status (if applicable)</b>
1b)	17942 Ventura Blvd	Encino	CA	91316
	<b>Organization Mailing Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
1c)				
	<b>Business Address (If different)</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>

**1d) PRIMARY CONTACT INFORMATION:**

Tisha Janigian 818-447-7587 Tisha@sheishopela.org

<b>Name</b>	<b>Phone</b>	<b>Email</b>
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**2) Type of Organization- Please select one:**

- Public School (not to include private schools) **or**  501(c)(3) Non-Profit (other than religious institutions)
- Attach Signed letter on School Letterhead** **Attach IRS Determination Letter**

SHE IS HOPE LA	Encino	CA	91316
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**3) Name / Address of Affiliated Organization (if applicable) City State Zip Code****SECTION II - PROJECT DESCRIPTION****4) Please describe the purpose and intent of the grant.**

This grant supports single mother families with tailored educational programs on financial guidance, job training, peer support and essentials like clothing, shoes, housewares, food, and personal hygiene. By addressing immediate needs, we aim to lift them out of survival mode and empower them for lasting positive change.

**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)**

This grant is a vital step toward our goal of obtaining an apartment building for affordable housing, supporting single mother families for up to two years. Beyond immediate support, stable housing is fundamental to our mission, fostering long-term transformation in credit and self-esteem. By securing a haven, we recognize the interconnected nature of financial stability, education, and housing in rebuilding lives. Our vision is a holistic solution addressing immediate needs and providing a pathway to sustained independence, breaking the cycle of adversity and empowering single mother families for a lasting impact.

**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>
	n/a	\$	\$
		\$	\$
6b)	<b>Non-Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
	Purchasing personal hygiene supplies, basics and getting to our moms & kids	\$5000	\$5000
		\$	\$

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: \$ \_\_\_\_\_

10a) Start date: 05 / 01 / 2024 10b) Date Funds Required: 06 / 01 / 2024 10c) Expected Completion Date: 12 / 31 / 2024  
 (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\*  
 Tisha Janigian President/Founder DocuSigned by: Tisha Janigian 4/29/2024  
 PRINT Name Title Signature Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED\*  
 Sonja Kelly Secretary DocuSigned by: Sonja Kelly 4/29/2024  
 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

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

DEPARTMENT OF THE TREASURY

Date: **AUG 05 2019**

SHE IS HOPE LA  
16936 BURBANK BOULEVARD STE 138  
ENCINO, CA 91316

Employer Identification Number:  
83-2159039  
DLN:  
17053046371039  
Contact Person:  
FAITH E CUMMINS ID# 31534  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
170(b)(1)(A)(vi)  
Form 990/990-EZ/990-N Required:  
Yes  
Effective Date of Exemption:  
August 29, 2018  
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.

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.

Letter 947

SHE IS HOPE LA

Sincerely,

*Stephen A. Martin*

Director, Exempt Organizations  
Rulings and Agreements