

Kingsburg Tri- County Health Care District Grant Application

Please complete and return documentation and information required under the District Grant Policy, Procedures and Guidelines. **Submit a signed original plus a set of 8 copies using a binder clip.**

Provide the following information for the grant applicant, and well as for all partnering and/or subcontracting entities, if any. **Use a separate page for each item listed on page 2 to fully describe required information.**

Applicant Name Kingsburg Community Assistance Program, Inc. (KCAPS)

Type of Organization Non-denominational faith based non-profit

Legal status of your business (LLP, nonprofit, etc.) 501 (c)(3) non-profit

Subject of Request Grant request for existing tutoring program

Total Amount Requested \$ 22,000.00 How many People Will Grant Serve? 40-50

Is this intended as a one-time or ongoing project? Ongoing

Project timeframe Sept 2024-June 2025 Lump sum or periodic disbursement? Periodic is fine

How will grant be recognized by recipient? Through newsletter

Total Years in business 45 # of Employees 12 Federal Tax ID # 94-2703633

Business Licenses, Certifications or Registration # City of Kingsburg business license

#05347

Individual Accountable for Grant Funds:

Name Aida Rushing/Patti Blayney Title Exec. Dir/ Grant Admin

Address 1139 Draper Street

City Kingsburg State CA Zip 93631

E-Mail directorKCAPS@gmail.com/blayney.patti@gmail.com Phone Number 559-897-7961/559 285-6642

By signing below, the undersigned hereby certifies under penalty of perjury that: (1) information contained within this application is true and correct to the best of my personal knowledge, information and reasonable belief; (2) the grant applicant has read and is familiar with all of the District's grant policies, procedures and guidelines; (3) the grant applicant hereby waives each and all claims and right(s), if any exist to, in any form, appeal or otherwise legally challenge each and all decisions of the Kingsburg Tri-County Health Care District pertaining to this grant application; and (4) the governing body of the grant applicant has duly authorized me to sign this grant application.

Signature _____

Date _____

4-4-24

Print Name and Title _____

Aida Rushing, Executive Director

The following information is required in relation to the requested grant. Please use separate pages for each numbered item, titling and numbering each page as listed below. We require the following: 1 signed copy of the grant application, with items 1-8 (below) completed and attached, plus 8 additional hardcopies.

1. **Project Overview:** Include purpose of the grant request. Describe in detail how the funds will promote health and wellness and further the grant goal of fostering quality health services and programs which benefit the residents of the District.
2. **Project Cost:** Itemized budget with explanation of each itemized cost and the need for such, and supporting documentation, such as actual bids or formal estimates, if any.
3. **Partner(s):** List all partners (if any), and their financial contributions for this specific project.
4. **Funding Sources:** List all funding sources for the past 5 years.
5. **Community Need:** Describe specific needs of the District which your project will meet.
6. **Legal Status:** Please provide a copy of your W-9, business licenses and certificates, as well as IRS determination letter if you are a nonprofit.
7. **Contributions:** List previous and ongoing community contributions your organization has made within the past 5 years.
8. **Plans:** Provide drawings or pictures of the proposed project with footnotes for explanations.

Kingsburg Tri-County Health Care District Grant Application 2024

RE: KCAPS

SUBJECT: Project Overview

The purpose of this grant request is to receive enough funds to continue our Tutoring Program through our next tutoring period of September 2024-May 2025. In October of 2021 we opened Tutoring Centers in Kingsburg and Traver serving Elementary through High School aged students. The Tutoring Program has been funded through Community Resource Grant money received in partnership with Kingsburg High School.

That particular grant encouraged partnership with local non-profits. This collaboration has been very successful. Unfortunately those grant funds will no longer be available as of June of 2024.

Although the Federal and State governments have officially stated that the COVID-19 pandemic is officially over – the reality is that the aftermath of the pandemic continues to be shown in many areas of society. Two of the areas that have been severely impacted are education and mental health.

Distance learning was not beneficial for many students. The consequence for many students is that they are behind academically, socially, and may be suffering with depression or anxiety. Consequently some are exhibiting behavioral issues as well. The ugly truth is that a number of students returned to school without adequate social or academic skills and are still having trouble adapting to learning and social environments.

Our tutoring efforts were initially concentrated on Kingsburg and Traver. 2,678 tutoring sessions were completed in the 2022-2023 tutoring year. (September – May). The 2023-2024 tutoring year is concentrated solely on Kingsburg, and we anticipate completing approximately 1,196 sessions this year.

KCAPS saw the need for after school tutoring and began those sessions prior to Kingsburg Elementary Schools' current after school programs. Their program decreased our numbers, but the need for a tutoring program separate from theirs continues to exist. One program does not meet all families' needs. KCAPS' program has more flexibility for parents who do not wish or need their child to continue to be in school for many extra hours per day. Additionally, we are seeing students with learning disabilities and special needs who do better in a more controlled, quiet environment. We are also serving students who are not from English speaking environments, and in a few cases come to us with little English of their own. They are also benefiting from the tutoring environment we offer.

Our Tutoring Program has also included a mental health component, in that we have a licensed Mental Health Professional available for an hour or so during each meeting date. Tutors are prepared to help students academically; they aren't typically equipped to help a student with emotional or mental health needs. Our Mental Health Professional has been there to assist students who expressed that they were bullied at school that day, have had a family member die, were sad from other social interactions, or were acting out due to frustrations with the schoolwork.

A good education promotes health and wellness in many areas of a person's life. Additional information on this is discussed in section 5 – community need.

Kingsburg Tri-County Health Care District Grant Application 2024

RE: KCAPS

SUBJECT: Project Cost

KCAPS is requesting grant funds in the amount of \$22,000.00.

Time period September 2024 - June 2025

\$16,500.00	Tutors (includes gross pay for employees, work comp, employer taxes, admin fee of \$2.16 per payroll check issued)
\$ 3,000.00	Mental Health Professional (non-employee compensation)
<u>\$ 2,500.00</u>	Supplies (such as paper, pens, printer ink, manipulatives, snacks, data base fee)
\$22,000.00	total grant request

KCAPS understands the Kingsburg Tri-County Hospital Board prefers to work on a reimbursement basis. Reimbursement requests with appropriate backup would be submitted on an approximate monthly basis.

Kingsburg Tri-County Health Care District Grant Application 2024

RE: KCAPS

SUBJECT: Partners

KCAPS:

While it is customary for grant proposals to include an additional fee for administrative expenses KCAPS will be covering the cost of the staff that hires and supervises the Tutoring Personnel. In addition, the insurance, utilities, and maintenance on the facility that houses the tutoring program will be covered by KCAPS.

KCAPS will also be covering the costs for the in-house accounting and administration work necessary for this grant.

Kingsburg Tri-County Health Care District Grant Application 2024

RE: KCAPS

SUBJECT: Funding Sources

KCAPS is a registered 501(c)(3) non-profit organization.

Our funding comes through the proceeds received through our Thrift Stores as well as donations from businesses, churches, and individuals.

We have also received grant funds from:

- Kingsburg Tri-County Health Care District (counseling services)
- Hillblom Foundation (Traver Community Library –housed in our Traver facility and staffed by KCAPS' personnel)
- Kingsburg High School Community Resources Grant (tutoring and mental health support)

Kingsburg Tri-County Health Care District Grant Application 2024

RE: KCAPS

SUBJECT: Community Need

KCAPS desires to give a hand-up to those we serve, thus improving our clients' lives and our community as a whole. One of the best ways to do this is through offering pathways out of poverty such as educational, physical, and mental health support. It is our belief that Kingsburg Tri-County Health Care District desires the same.

There are huge numbers of research studies on the importance of education. One such study was conducted by Tulane University and their summary of this subject is excellent. (1)

“Education gives people the tools they need to lead fulfilling lives, thrive personally, and contribute to their communities. In addition, education makes it more likely a person can access quality healthcare, find employment that pays a living wage, and live in a safe, non-polluted environment — all factors that affect well-being. In fact, people who live in lower socioeconomic conditions are at greater risk for a host of health issues, including higher rates of disease, mental illness, and premature death, according to Healthy People 2020.

Access to quality education early in life, high school graduation, and a college education can all provide opportunities for people to shift their socioeconomic status, reducing the likelihood of these negative health outcomes in return. Because of this, understanding how education impacts the health of communities is vital for public health professionals fighting to end health inequity.”

By providing continued tutoring services and mental health support to the students of Kingsburg, we are supporting and encouraging greater academic success. Academic success will equip those students with a greater chance to live a healthy and successful adult life; which will then positively impact their children, and our community.

We thank you for considering this Grant Application. We look forward to together positively impacting the community we both serve through the continued operation of KCAPS' Tutoring Program.

(1) <https://publichealth.tulane.edu/blog/social-determinant-of-health-education-is-crucial/>

Kingsburg Tri-County Health Care District Grant Application 2024
RE: KCAPS
SUBJECT: Legal Status

Please see the attached W-9, business license, and IRS determination letter.

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	<p>1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)</p> <p>Kingsburg Community Assistance Program, Inc.</p>	
	<p>2 Business name/disregarded entity name, if different from above.</p> <p>KCAPS</p>	
	<p>3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)</p> <p>Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.</p> <p><input checked="" type="checkbox"/> Other (see instructions) 501(C)(3) non-profit</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____</p> <p style="text-align: right;"><i>(Applies to accounts maintained outside the United States.)</i></p>
	<p>3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/></p>	
	<p>5 Address (number, street, and apt. or suite no.). See instructions.</p> <p>1139 Draper Street</p>	<p>Requester's name and address (optional)</p>
	<p>6 City, state, and ZIP code</p> <p>Kingsburg, CA 93631</p>	
	<p>7 List account number(s) here (optional)</p>	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
or									
Employer identification number									
9	4	-	2	7	0	3	6	3	3

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date 04-04-2024
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

(8A)

BUSINESS LICENSE CERTIFICATE

CITY OF KINGSBURG

Having paid license as prescribed by the City Ordinance, the certificate holder described is entitled to conduct business in the City of Kingsburg in conformity with the Rules and regulations of said City

TYPE OF BUSINESS:NON-PROFIT

Date of Expiration: 12/31/2024

BUSINESS ADDRESS: 1139 DRAPER ST KINGSBURG, CA
93631

BUSINESS NAME Kingsburg Community
Assistance Program

ATTN: AIDA RUSHING

MAILING ADDRESS: 1139 Draper St.
KINGSBURG, CA 93631

NON TRANSFERABLE

PLEASE POST IN A CONSPICUOUS PLACE



KEEP FOR YOUR
RECORDS

License #: 05347

Date Paid:

Total: \$0.00

Balance Due: \$0.00

(8B)

Internal Revenue Service

Department of the Treasury

**P. O. Box 2508
Cincinnati, OH 45201**

Date: May 9, 2000

Kingsburg Community Assistance Program Inc
1139 Draper St
Kingsburg, CA 93631

Person to Contact:
Felicia Johnson #31-04013
Customer Service Representative
Toll Free Telephone Number:
8:00 a.m. to 9:30 p.m. EST
877-829-5500
Fax Number:
513-263-3756
Federal Identification Number:
94-2703633

Dear Sir or Madam:

This letter is in response to your request for a copy of your organization's determination letter.

Our records indicate that a determination letter issued in July 1986, granted your organization exemption from federal income tax under section 501(c)(3) of the Internal Revenue Code. That letter is still in effect.

Based on information subsequently submitted, we classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Code because it is an organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

This classification was based on the assumption that your organization's operations would continue as stated in the application. If your organization's sources of support, or its character, method of operations, or purposes have changed, please let us know so we can consider the effect of the change on the exempt status and foundation status of your organization.

Your organization is required to file Form 990, Return of Organization Exempt from Income Tax, only if its gross receipts each year are normally more than \$25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of the organization's annual accounting period. The law imposes a penalty of \$20 a day, up to a maximum of \$10,000, when a return is filed late, unless there is reasonable cause for the delay.

All exempt organizations (unless specifically excluded) are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more paid to each employee during a calendar year. Your organization is not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, these organizations are not automatically exempt from other federal excise taxes.

Donors may deduct contributions to your organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to your organization or for its use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

(8c)

Kingsburg Tri-County Health Care District Grant Application 2024

RE: KCAPS

SUBJECT: Contributions

KCAPS has been active in Kingsburg for over 45 years. We are dedicated to helping the citizens of Kingsburg, London, and Traver. We offer emergency food support, professional mental health counseling, referrals to resident drug rehabilitation facilities, and women's and homeless shelters. To those who qualify we also provide emergency rental and utility assistance. We also give away free backpacks filled with school supplies (approximately 500 annually) and operate Christmas with Dignity Toy Stores in Kingsburg, London, and Traver.

For the past 3 years we have also operated tutoring centers in Kingsburg and Traver. Additionally we help fund and operate other community outreach ministries and programs.

From January 1, 2019 through current we have conservatively:

- Distributed enough food to feed 138,740 hungry tummies
- Gifted \$10,538 worth of clothing to clients
- Provided \$13,793 in emergency lodging
- Provided \$96,638 in professional counseling
- Provided \$49,465 in rental assistance
- Provided \$9,442 for transportation related needs
- Provided \$43,134 in utility assistance
- Provided \$1,769 in vehicle repairs
- Provided \$16,125 for miscellaneous emergency needs
- Purchased \$101,675 in Christmas Toys to augment those that were directly donated
- Provided \$46,994 in scholarships of various forms
- Spent \$51,183 on various ministry outreaches
- Purchased \$261,877 of food to augment donated food items

Kingsburg Tri-County Health Care District Grant Application 2024

RE: KCAPS

SUBJECT: Plans

Following are photos of our Tutoring Center. The tables and chairs are portable allowing the tutors to set up for individual, small group, or larger group applications.

