

ADDENDUM "1"

**CITY OF POMPANO BEACH
FISCAL YEAR 2017**

FUNDING FOR NON-FOR-PROFIT ORGANIZATIONS

1. Legal Name of Organization: **XPRESS YOUTH DEVELOPMENT INSTITUTE, INC**
2. Mailing Address: 4821 NW 19th Street
Coconut Creek, FL 33063
3. Date of Incorporation: April 9, 2001
- 3a. Does your corporation/organization fall within Section 501(c)(3) and Section 501(a) of the Internal Revenue Code? Yes X No _____
(Please attach proof of tax exempt status)
4. Chief Executive Officer: Joseph Ballard
Official Title: President Telephone #: 754-366-9918
5. Contact Person (if different from above): (Same as Above)
Telephone #: _____
6. Provide a brief description of the organizations goals and objectives:

There is a desperate need to engage youth in the Pompano Beach community, as well as all communities into positive deeds in order to impact said communities in a positive manner. Our goal is to give our youth an alternative to crime and violence due to the rising juvenile crime rate that impacts our neighborhoods. We will provide mentoring, guidance, and an outlet to increase their self-esteem, build their social intervention through positive organized activities, as well as academic enrichment. Our youth will be exposed to discipline, career development, and positive behavior through intervention and friendly competition.

7. Amount of funding requested: \$3,000.00

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8. Provide a brief description of how City funds would be spent and identifying the community need(s) to be addressed. This should include what exactly will be provided and to how many people (City residents).

Our funds will be utilized to provide uniforms for residents of the City of Pompano Beach that participate in the Pompano Xpress Track Club, sponsored by Xpress Youth Development Institute, Inc. We will also utilize funds to support the Xpress Youth Summer Camp, during the summer of 2017. This camp provides extended academic tutoring after the end of the regular school term. Funds will assist to help sponsor field trips, purchase school supplies and to purchase T-shirts as uniforms for our students in order to identify our participants. We anticipate approximately 60 athletes for the Pompano Xpress Track Club and approximately 25 youths for the Xpress Summer Youth Camp.

9. How will the recommended funding compliment the array of City services currently being provided to City residents?

Our programs will assist in servicing youth of the City of Pompano Beach that are not being reached by the services of the City. We have a cadre of staff members that are very influent in the community.

10. Will the recommended grant amount result in the leveraging of additional funds from the County, State, Federal or other foundations/agencies which require a local match like a contribution from the City of Pompano Beach? Yes ____ No X

10a. If yes, what is the ratio of this other funding to the City's recommended funding?

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11. Does your organization receive support from the County or other cities? Yes ___ No X

11a. If yes, please list the amount(s) and source(s).

12. What percentage of your organization’s budget is direct delivery of service as opposed to “overhead”? 10%

13. PERFORMANCE MEASURES

Please list below the various levels of service [performance measures] that your organization will be providing to residents of the City of Pompano Beach.

	Most Recently Completed Year 2015	Current Year Estimated 2016	Next Year Proposed 2017
Total Persons Served	85	25	80
Number of Pompano Beach residents served	85	25	80
Track & Field	65	25	60
Summer Youth Camp	20	Not Active	20

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14. Agency Budget Information: *Please note that Total Resources Available and Total Resources Allocated should be EQUAL for each fiscal year.*

		Last Year Adopted 2016	Current Year Proposed 2017
Resource Available:		0	
City of Pompano Beach		0	\$3,000
Federal Funding		0	
State Funding		0	
Other Local Government Funding		0	
Foundation Grants		0	
User Fees		0	
Other Revenue Sources		\$1,800	\$1,800
Total Resources Available		\$1,800	\$4,800

Resource Allocated:			
Salaries			
Benefits			
Supplies		\$1,000	\$2,500
Contractual Services			
Capital Outlay [Equipment]		\$800	\$1,300
Other			
Total Resources Allocated		\$1,800	\$4,800

- *Please provide line item detail for expenses over \$10,000*