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- 39 TEMECULA VALLEY POSSE
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- 41 THE INSTITUTE OF DEVINE AUTHENTICITY AND WELLNESS
- 42 THEATHER FOUNDATION
- 43 THESSALONIKA FAMILY SERVICES INC dba MISSION HOPE
- 44 THRIFTING 4 GIFTING FORMERLY THE ASSISTANCE LEAGUE
- 45 VETERANS OF FOREIGN WAR POST 4089
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FY 26/27 Community Service Funding (CSF)
Grant Application

26
MILVET



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

MilVet

Year Organization Founded: *

2016

Website:

www.milvet.org

Mailing Address: *

33040 Antelope Rd. #114
Murrieta, CA 92563

Number of Paid Staff: *

0

Number of Volunteers: *

25

Contact Name: *

Raven Hilden

Contact Title: *

CEO

Contact Email: *

ceo@milvet.org

Contact Phone: *

951-902-9681

Alternate Contact Name:

Alternate Contact Email:

info@milvet.org

Alternate Contact Phone:

[REDACTED]

**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Riverside County, CA

Business License No. *

052609

Geographic Area(s) the Project/Program Serves: *

Temecula Residents

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

Temecula Business License 2026.pdf

93.71KB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

MILITARY EMERGENCY SUPPORT PROGRAM

Start Date: *

2026-07-01

End Date: *

2027-06-01

Physical Address of Project/Program *

33040 Antelope Rd. #114 Murrieta, CA 92563

Preferred Payment Method:

(If grant is awarded.)

☒ Check Mailed ☐ Check Picked Up

☐ Electronic File Transfer

Make Check Payable to: *

MilVet

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

10/30/2016

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

3958913

Attach State of California Entity Status Letter: *

To find State of California Entity Status Letter,

CA Exempt Letter.pdf

370.06KB

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

IRS Employer Identification Number (EIN): *

371841663

Attach IRS Tax Exempt Determination Letter: *

To find IRS Tax Exempt Determination Letter,

MilVet 501c3.pdf

209.41KB

click the link below:

<https://apps.irs.gov/app/eos/>

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,

2026 Certificate of Status_1780896211973.pdf

292.51KB

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990*

You might find IRS Form 990

Form 990 2025 pg 1.pdf

220.77KB

on the link below:

(990, 990-EZ, 990-PF, 990-T)

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☐ Yes ☒ No

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☒ Executive Committee ☐ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

MilVet is a nonprofit organization founded in 2016, with the mission to support military personnel, veterans and their families through direct aid, advocacy, and community engagement. Over the past 10 years, MilVet has established itself as a trusted partner in serving those who serve our country.

Past Accomplishments:

- Successfully organized and distributed over 10,000 care packages to deployed men and women serving overseas
- Developed programs such as our the emergency support assistance program, veteran pantry and Holidays for Heroes.
- Hosted annual memorial and recognition events honoring military service members and veterans, reaching thousands of community members.
- Provided opportunities for more than 5,000 volunteers to get involved in the military care package program, obtain community service hours, encourage youth to participate.

Current Programs and Projects:

- Monthly MilVet Military Care Package Program: Providing care packages to deployed troops to enhance morale and demonstrate community support.
- Emergency Support Program: Weekly Veteran Pantry with non-perishable food and household supplies, new clothing, infant items, gas cards, food cards, utility assistance, financial aid, resources, filing assistance for disabilities and survivor benefits at no cost to veterans and their families.
- Community Engagement and Education: Conducting outreach programs to foster greater awareness of military and veteran issues within local communities, including hosting the Senator's monthly Veteran Advisory Council meeting in partnership with other veteran service organizations.
- Holidays for Heroes: Assists children of military families facing hardships for the holidays with gifts, trees, holiday photos, food, resources and much-needed cheer.

MilVet's ongoing commitment is to honor and support service members and veterans through impactful programs that promote well-being, recognition, and community connection.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☒ Yes ☐ No

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT * OR SPONSORSHIP	AMOUNT: *	MONTH + YEAR FUNDING RECEIVED *	NAME OF CITY GRANT OR SPONSORSHIP
Emergency Veteran Support	\$5,000.00	November 2025	

Project/Program Description

Project/Program Title: MILITARY EMERGENCY SUPPORT PROGRAM

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT.*

MILITARY EMERGENCY SUPPORT PROGRAM. This program will support active-duty service members and their families whose residence is located within the City of Temecula with assistance in times of urgent need. This can also include Temecula active-duty service members, veterans and their households. Grant funding will provide necessities such as nutritious food, meals, essential household supplies, hygiene products, utility assistance to help prevent disconnection, gas cards for VA appointments, and similar essential needs.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED.*

Funding will allow MilVet to purchase essential items through the Emergency Assistance Program/Pantry, such as shelf stable food, beverages, diapers, infant supplies, hygiene products, critical utility assistance (electricity, water), and gas cards for doctor appointments.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.*

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

Temecula Veterans and their families benefit from the services as the pantry provides critical food and household items for families in need. Not only do they receive items, they are also screened and introduced to resources in the community and access to programs aimed at sustainability such as access to accredited assistance with filing for VA benefits, state benefits and employment assistance.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

*

800

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

*

25

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY.*

Funding will allow MilVet to purchase essential items through the Emergency Assistance Program/Pantry, such as shelf stable food, beverages, diapers, infant supplies, hygiene products, critical utility assistance (electricity, water), and gas cards for doctor appointments.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$0.00
Other grants or funding already awarded for Project/Program, if any 12000	* \$12,000.00
In-Kind match amount or volunteer credit hours estimated amount	* \$50,000.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment * 800	EXPENSES * \$800.00
Facilities/Rent/Insurance * 10,000	* \$10,000.00
Supplies * 20200	* \$20,200.00
Services * 0	* \$0.00
Food * 40000	* \$40,000.00
Other (i.e. Informational Outreach, etc) * 1000	* \$1,000.00
Staffing Expense	* \$0.00
TOTAL REVENUE: \$72,000.00	TOTAL EXPENSES \$72,000.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

MilVet

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Raven Hilden

President/Authorized Officer Title: *

CEO

E-mail: *

ceo@milvet.org

Phone: *

951-902-9681

President/Authorized Officer Signature *



Raven Hilden

Submission Date:

2026-06-07 10:52:04 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
PO Box 2508
Cincinnati, OH 45201

MILVET
% RAVEN L HILDEN
30777 RANCHO CALIFORNIA RD 892521
TEMECULA, CA 92589

Date:
August 20, 2021
Employer ID number:
37-1841663
Form 990 required:
990, YES
Person to contact:
Name: S Lenard
ID number: 0203196

Dear Sir or Madam:

We're responding to your request dated August 16, 2021, about your tax-exempt status.

We issued you a determination letter in December 2016, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Section 509(a)(2).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax-deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period.

- Form 990, Return of Organization Exempt From Income Tax
- Form 990-EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific time).

Thank you for your cooperation.

Sincerely,

Stephen A. Martin

Stephen A. Martin

Director, Exempt Organizations Rulings and Agreements

Letter 4168 (Rev. 09-2020)
Catalog Number 66666G



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 8/22/2022

ESL ID: 8590949861

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 3958913

Entity Name: MILVET

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



Secretary of State

Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: MILVET
Entity No.: 3958913
Registration Date: 10/28/2016
Entity Type: Nonprofit Corporation - CA - Public Benefit
Formed In: CALIFORNIA
Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 07, 2026.

SHIRLEY N. WEBER, PH.D.
Secretary of State

Certificate No.: 467017626

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at bizfileOnline.sos.ca.gov.



BA20241392168



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20241392168

Date Filed: 7/30/2024

B2930-8710 07/30/2024 10:24 PM Received by California Secretary of State

Entity Details

Corporation Name MILVET
Entity No. 3958913
Formed In CALIFORNIA

Street Address of California Principal Office of Corporation

Street Address of California Office 33040 ANTELOPE RD
114
MURRIETA, CA 92563

Mailing Address of Corporation

Mailing Address 33040 ANTELOPE RD
114
MURRIETA, CA 92563
Attention Raven Hilden

Officers

Officer Name	Officer Address	Position(s)
+ Jackie Aponte	33040 ANTELOPE RD 114 MURRIETA, CA 92563	Secretary
+ Raven Hilden	33040 ANTELOPE RD 114 MURRIETA, CA 92563	Chief Executive Officer
+ Mayra Lewis	33040 ANTELOPE RD 114 MURRIETA, CA 92563	Chief Financial Officer

Additional Officers

Officer Name	Officer Address	Position	Stated Position
+ Sandy Word	33040 ANTELOPE RD 114 MURRIETA, CA 92563	Chairperson of Board	

Agent for Service of Process

Agent Name RAVEN HILDEN
Agent Address [REDACTED]
MENIFEE, CA 92584

Email Notifications

Opt-in Email Notifications Yes, I opt-in to receive entity notifications via email.

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

Raven Hilden

Signature

07/30/2024

Date

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate (pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California) to engage in, carry on or conduct, in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California; nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

BUSINESS NAME: Milvet

BUSINESS LOCATION: 33040 Antelope Rd, 114, Murrieta, CA 92563

DESCRIPTION: Non-Profit

BUSINESS OWNER: Raven L Hilden

Business License Number: 052609
License Fee: \$35.00
Effective Date: October 27, 2025
Expiration Date: January 31, 2027
Fees paid in accordance with City Ordinance

MILVET
33040 ANTELOPE RD, 114
MURRIETA, CA 92563

TO BE POSTED IN A CONSPICUOUS PLACE

NOT TRANSFERABLE and NON-REFUNDABLE

FY 26/27 Community Service Funding (CSF)
Grant Application

27

PROFESSIONAL WOMEN'S
ROUNDTABLE



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Professional Women's
Roundtable

Year Organization Founded: *

1997

Website:

www.pwronline.org

Mailing Address: *

PO Box 387
Murrieta, CA 92564

Number of Paid Staff: *

0

Number of Volunteers: *

20

Contact Name: *

Laurie Provost

Contact Title: *

CEO

Contact Email: *

lprovost@expbooksvc.com

Contact Phone: *

9512650457

Alternate Contact Name:

Nikki Davis

Alternate Contact Email:

[REDACTED]

Alternate Contact Phone:

[REDACTED]

**Does the nonprofit have a current City of Temecula
Business License? ***

☐ Yes ☒ No

Geographic Area(s) the Organization Serves: *

Temecula and Murrieta Valley

**A current City of Temecula Business License may be
required to submit prior to fund disbursement. ***

☒ Understand

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Project/Program

Amount Requested: *

\$5,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Professional Womens Roundtable Unity Event

Start Date: *

2026-07-01

End Date: *

2026-11-30

Physical Address of Project/Program *

Pechanga, 45000 Pechanga Parkway, Temecula, CA 92592

Preferred Payment Method:

(If grant is awarded.)

☒ Check Mailed ☐ Check Picked Up

☐ Electronic File Transfer

Make Check Payable to: *

Professional Women's Roundtable

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

06/19/1997

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☐ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

IRS Employer Identification Number (EIN): *

33-0772376

Attach IRS Tax Exempt Determination Letter: *

To find IRS Tax Exempt Determination Letter,

2024 990N.PG (PROFESSIONAL WOMENS RO).pdf

3.78KB

click the link below:

<https://apps.irs.gov/app/eos/>

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,

STATEMENT OF INFO - 2025.pdf

131.37KB

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☒ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990 *

You might find IRS Form 990

2025 990N.PG (PROFESSIONAL WOMENS RO).pdf

3.58KB

on the link below:

(990, 990-EZ, 990-PF, 990-T)

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

State Registry Search Tool:

Attach State Registry Document/Info *

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Charity Status.pdf

1.1MB

Application Authorization

Has the organization or any members of the **Board of Directors** of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a **Temecula City Council Member** during the past 12 months? *

☐ Yes ☒ No

Is a **Temecula City Council Member** a member of the **Board of Directors** or an **Officer** of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☐ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

Our Mission: To empower and unite professional women motivated to succeed, through relationships, networking, and community involvement. In order to succeed in today's competitive market we must continue to enhance our careers by improving our professional and business proficiencies. The Professional Women's Roundtable is dedicated to helping women enhance their professional careers by providing access to business training and other educational resources necessary to succeed. We are an organization of over 100 dynamic and professional women from many different fields of industry, which give us a wide range of service to the Temecula & Murrieta Valley. In addition to the professional support, training, networking, and resources we provide, PWR is a unique professional organization in that it is a non-profit. We gather together to benefit our community.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Project/Program Description

Project/Program Title: Professional Womens Roundtable Unity Event

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

The purpose of this event is deeply rooted in PWR's mission to empower and unite professional women motivated to succeed through relationships, networking & community involvement. We strive to break barriers and pave the way for the next generation of female leaders.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

Venue and event production costs at Pechanga Resort & Casino

Audio/visual equipment and technical support

Entertainment expenses for the Candlelight Concert Experience by Fever

Event program printing and promotional materials

Recognition awards for Unity Award nominees and recipient

Décor and event enhancements that create an engaging community experience

Recognition awards and materials for Unity Award nominees and recipients

Educational and informational materials highlighting community service and leadership accomplishments

Outreach and promotional materials used to engage and recognize local community leaders and volunteers

Volunteer coordination and event support materials

Administrative and operational expenses associated with implementing the Unity Awards Program, including insurance, supplies, and other eligible organizational costs

Funding will help PWR expand community participation and recognition efforts while continuing to celebrate and honor local women who make a positive impact throughout the Temecula Valley.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

The Joan Sparkman Unity Awards Program recognizes women whose volunteerism, leadership, mentorship, and community service have positively impacted the Temecula Valley. Many of the nominees, sponsors, volunteers, and attendees are Temecula residents and business owners.

The program encourages civic engagement, celebrates community leadership, and shines a spotlight on individuals who are actively improving the quality of life for others. By recognizing these women and sharing their stories, PWR inspires future leaders and strengthens connections among residents, businesses, nonprofits, and community organizations.

Grant funding will help expand outreach and recognition efforts, ensuring that more Temecula residents can participate in and benefit from this community-centered program.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

*

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

*

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

City grant funding will support eligible event expenses for the Professional Women's Roundtable Joan Sparkman Unity Awards Program, including venue and event production costs, audio/visual equipment and technical support, educational and informational materials, program printing, outreach and promotional materials, recognition awards, volunteer coordination materials, décor, insurance, supplies, and other eligible operational expenses. These purchases will help expand community participation, recognize local women leaders and volunteers, and provide a high-quality community event that benefits approximately 200 Temecula residents.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$5,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$0.00
Other grants or funding already awarded for Project/Program, if any sponsorships	* \$29,500.00
In-Kind match amount or volunteer credit hours estimated amount	* \$7,333.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
AV Equipment and support	\$6,287.00
Facilities/Rent/Insurance *	* \$12,000.00
Facility and entertainment	
Supplies *	* \$9,346.00
Printing, promo materials, recog mat,	
Services *	* \$0.00
n/a	
Food *	* \$10,000.00
Unity event food	
Other (i.e. Informational Outreach, etc) *	* \$4,200.00
Event support material,	
Staffing Expense	* \$0.00
TOTAL REVENUE: \$41,833.00	TOTAL EXPENSES \$41,833.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Professional Women's Roundtable

Requested Amount:

\$5,000.00

President/Authorized Officer Name: *

Laurie Provost

President/Authorized Officer Title: *

CEO

E-mail: *

lprovost@expbooksvs.com

Phone: *

951-265-0457

President/Authorized Officer Signature *

Laurie Provost

Submission Date:

2026-06-30 10:02:57 AM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:



BA20250323391



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20250323391

Date Filed: 2/14/2025

B3445-2239 02/14/2025 10:23 AM Received by California Secretary of State

Entity Details			
Corporation Name	PROFESSIONAL WOMEN'S ROUNDTABLE		
Entity No.	1986509		
Formed In	CALIFORNIA		
Street Address of California Principal Office of Corporation			
Street Address of California Office	None		
Mailing Address of Corporation			
Mailing Address	P. O. BOX 387 MURRIETA, CA 92564		
Attention			
Officers			
Officer Name	Officer Address	Position(s)	
☒ C RATH	P. O. BOX 387 MURRIETA, CA 92564	Chief Financial Officer	
L. PROVOST	P. O. BOX 387 MURRIETA, CA 92564	Chief Executive Officer	
☒ A Blackwell	PO BOX 387 MURRIETA, CA 92564	Secretary	
Additional Officers			
Officer Name	Officer Address	Position	Stated Position
None Entered			
Agent for Service of Process			
Agent Name	Lisa DeWitt		
Agent Address	25220 HANCOCK AVENUE SUITE 350 MURRIETA, CA 92562		
Email Notifications			
Opt-in Email Notifications	Yes, I opt-in to receive entity notifications via email.		
Electronic Signature			
☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.			
Laurie A Provost		02/14/2025	
Signature		Date	

FY 26/27 Community Service Funding (CSF)
Grant Application

28

RENEWING HOPE STRATEGIES



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Renewing Hope Strategies

Year Organization Founded: *

2021

Website:

www.renewinghopestrategies.org

Mailing Address: *

41551 Date Street, Murrieta, CA
92562

Number of Paid Staff: *

5

Number of Volunteers: *

8

Contact Name: *

Ashley Cunningham

Contact Title: *

Community Engagement Coordinator

Contact Email: *

acunningham@renewing-hope.org

Contact Phone: *

9514653665

Alternate Contact Name:

Cassandra Rose

Alternate Contact Email:

crose@renewing-hope.org

Alternate Contact Phone:

**Does the nonprofit have a current City of Temecula
Business License? ***

☐ Yes ☒ No

Geographic Area(s) the Organization Serves: *

Riverside and San Bernardino Counties

**A current City of Temecula Business License may be
required to submit prior to fund disbursement. ***

☒ Understand

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Move With Hope

Start Date: *

2026-07-01

End Date: *

2027-07-01

Physical Address of Project/Program *

28910 Pujol St, Temecula, CA 92590

Preferred Payment Method:

(If grant is awarded.)

☒ Check Mailed ☐ Check Picked Up

☐ Electronic File Transfer

Make Check Payable to: *

Renewing Hope Strategies

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

01/01/2021

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☐ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

IRS Employer Identification Number (EIN): *

86-1524800

Attach IRS Tax Exempt Determination Letter: *

To find IRS Tax Exempt Determination Letter,

501c3 Letter.pdf

311.01KB

click the link below:

<https://apps.irs.gov/app/eos/>

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,

SOL.pdf

125.76KB

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990 *

You might find IRS Form 990

990 2024.pdf

606.5KB

on the link below:

(990, 990-EZ, 990-PF, 990-T)

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☐ Yes ☒ No

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☐ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

Mission Statement

Renewing Hope Strategies is dedicated to improving access to high-quality, compassionate, and culturally responsive behavioral health services for individuals and families throughout Temecula. Through our Move With Hope Mobile Shower and Mental Health Program, we bring mental health care and hygiene directly into neighborhoods, schools, community events, and underserved areas, reducing barriers to treatment and ensuring residents receive support when and where they need it most. Our mission is to promote emotional wellness, strengthen families, prevent crises, and improve overall quality of life through early intervention, outreach, education, and integrated behavioral health services.

Organizational Goals

The program will provide access to safe shower facilities, hygiene supplies, basic needs engagement, outreach support, resource navigation, and linkage to behavioral health, medical, housing, and social service resources.

Increase Access to Mental Health Care

Expand community-based and mobile behavioral health services to reach Temecula residents who may face barriers related to transportation, cost, stigma, or limited provider availability.

Improve Community Wellness

Provide preventative mental health education, screenings, counseling, and support services that help individuals and families address challenges before they become crises.

Support Underserved and Vulnerable Populations

Focus outreach efforts on youth, seniors, veterans, low-income families, individuals experiencing homelessness, and those with limited access to traditional healthcare services.

Reduce Behavioral Health Disparities

Ensure equitable access to mental health services for diverse populations through culturally competent care and community partnerships.

Program Objectives

Deliver mobile behavioral health, hygiene and shower services throughout Temecula, including mental health screenings, case management, therapy, psychiatric support, and referrals.

Increase early identification of mental health concerns through community outreach events, wellness fairs, and school-based partnerships.

Connect residents to ongoing behavioral health care, social services, housing resources, and healthcare providers.

Provide education and stigma-reduction campaigns that encourage residents to seek support when needed.

Improve outcomes related to anxiety, depression, stress, trauma, and social isolation through evidence-based interventions.

Strengthen collaboration with local schools, healthcare providers, nonprofits, faith-based organizations, and city leaders to create a coordinated behavioral health support network.

As Temecula continues to grow, with a population exceeding 113,000 residents and increasing demand for accessible healthcare services, Renewing Hope Strategies is committed to ensuring that every resident has access to the mental health resources and basic hygiene needed to thrive. Our work supports the City's commitment to maintaining a high quality of life while addressing emerging behavioral health needs among families, youth, working adults, veterans, and older adults.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Project/Program Description

Project/Program Title: Move With Hope

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

Renewing Hope Strategies will provide mobile shower services in partnership with the City of Temecula one day per week for one full year. The mobile shower team will include one Driver/Outreach Support staff member and one Community Health Worker. Services will focus on individuals experiencing homelessness, housing instability, and high-acuity needs within the City of Temecula.

The program will provide access to safe shower facilities, hygiene supplies, basic needs engagement, outreach support, resource navigation, and linkage to behavioral health, medical, housing, and social service resources.

The City of Temecula grant funding will support Move With Hope, Renewing Hope Strategies' community-based mobile behavioral health program designed to increase access to mental health services for residents throughout Temecula. The program utilizes a fully equipped mobile mental health unit that brings behavioral health care directly into neighborhoods, schools, community centers, senior living communities, parks, and local events.

Grant funding will help expand access to critical services including mental health screenings, individual and family counseling, case management, crisis intervention, psychiatric support, care coordination, and referrals to community resources. The program specifically focuses on reaching individuals and families who face barriers to accessing traditional clinic-based care, including youth, seniors, low-income households, veterans, individuals experiencing homelessness, and residents struggling with transportation, financial, or stigma-related challenges.

Through proactive outreach and early intervention, Move With Hope aims to identify mental health concerns before they escalate into crises, reduce unnecessary emergency room visits, connect residents to ongoing care, and improve overall community wellness. Funding will support staffing, outreach activities, clinical supplies, transportation costs, educational materials, and the operation of the mobile unit within the City of Temecula.

By bringing services directly into the community, Renewing Hope Strategies helps ensure that Temecula residents have access to timely, compassionate, and culturally responsive behavioral health support regardless of their circumstances. The project will strengthen the local behavioral health safety net while promoting resilience, stability, and improved quality of life for individuals and families throughout the city.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

Grant funding will be used to purchase supplies and operational necessities that directly support the delivery of services through the Move With Hope Mobile Mental Health Program, including:

Fuel for the mobile mental health unit to conduct outreach throughout Temecula
Vehicle maintenance and operational expenses

Hygiene kits for community members, including soap, shampoo, conditioner, deodorant, toothbrushes, toothpaste, feminine hygiene products, razors, and wipes
 Socks, undergarments, and basic clothing essentials for individuals in need
 Bottled water and healthy snacks distributed during outreach activities
 Mental health educational materials and wellness resource guides
 Office and program supplies, including clipboards, forms, printing, pens, and outreach materials
 Personal protective equipment and sanitation supplies
 Basic first-aid and wellness supplies
 Client engagement and comfort items used during outreach and community events
 Emergency assistance items that help connect vulnerable residents to services and supports
 Technology and communication supplies necessary for field-based care coordination and client follow-up

These purchases will enable Renewing Hope Strategies to provide accessible, community-based behavioral health services and hygiene services while addressing immediate needs that often prevent individuals from engaging in care and support services.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

This funding will directly benefit Temecula residents by increasing access to mental health and supportive services for individuals and families who may otherwise go without care and hygiene services through mobile shower units and hygiene supplies. Through the Move With Hope Mobile Mental Health Program, services are brought directly into the community, reducing barriers such as transportation challenges, financial limitations, lack of awareness of available resources, and the stigma often associated with seeking behavioral health support.

The funding will allow Renewing Hope Strategies to provide mental health screenings, care coordination, resource navigation, hygiene supplies, wellness education, and referrals to residents where they live, work, learn, and gather. This proactive approach helps identify concerns early, connect individuals to appropriate services, and prevent situations from escalating into crises that may require emergency intervention.

Temecula youth, seniors, veterans, low-income families, and individuals experiencing housing instability will particularly benefit from increased access to support and resources. In addition to addressing immediate needs through outreach and hygiene assistance, the program promotes long-term stability, emotional wellness, and community connectedness.

By investing in prevention, early intervention, and community-based care, this funding will help improve quality of life for Temecula residents, strengthen families, reduce social isolation, and create a healthier, more resilient community overall.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

*

150

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

*

30

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

Grant Funds Will Be Used to Purchase:

Fuel for the Move With Hope mobile mental health unit
Vehicle maintenance and operational costs
Hygiene kits (soap, shampoo, conditioner, deodorant, toothbrushes, toothpaste, feminine hygiene products, razors, wipes)
Socks, underwear, and basic clothing essentials
Bottled water and healthy snacks for outreach participants
Mental health education materials and resource guides
Outreach and program supplies (printing, forms, clipboards, pens, brochures)
Sanitation and cleaning supplies
Personal protective equipment (PPE)
Basic first-aid and wellness supplies
Client engagement and comfort items
Emergency assistance supplies for vulnerable residents
Shower unit operations
Communication and technology supplies needed for mobile outreach and care coordination

These purchases will support community outreach, mobile behavioral health services, and basic needs assistance for Temecula residents, particularly underserved and vulnerable populations.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$150,000.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$0.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
Shower Unit Operations	\$18,600.00
Facilities/Rent/Insurance *	* \$3,600.00
Insurance	
Supplies *	* \$14,400.00
Shower Supplies and Hygiene Items	
Services *	* \$0.00
NA	
Food *	* \$0.00
NA	
Other (i.e. Informational Outreach, etc) *	* \$5,000.00
Program Management/Supervision	
Staffing Expense	* \$25,500.00
TOTAL REVENUE:	TOTAL EXPENSES
\$160,000.00	\$41,600.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Renewing Hope Strategies

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Cassondra Rose

President/Authorized Officer Title: *

President

E-mail: *

crose@renewing-hope.org

Phone: *

9514653665

President/Authorized Officer Signature *

Cassondra Rose

Submission Date:

2026-06-16 02:35:58 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

Ashley Cunningham, Grant Writer, Renewing Hope Strategies

Name, Title, & Organization

If you have any questions, please contact: Betsy.Lowrey@TemeculaCA.gov (951) 693-3959 or Stacey.Brown@TemeculaCA.gov (951) 694-6413



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

RENEWING HOPE STRATEGIES
C/O CASSONDRA ROSE
1845 CHICAGO AVE STE B
RIVERSIDE, CA 92507

Date: 02/23/2022
Employer ID number: 86-1524800
Person to contact:
Name: Customer Service
ID number: 31954
Telephone: (877) 829-5500
Accounting period ending: December 31
Form 990-PF required: Yes
Effective date of exemption: January 01, 2021
Addendum applies: No
DLN: 26053404003642

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 private foundation within the meaning of Section 509(a).

You're required to file Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation, annually, whether or not you have income or activity during the year. 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. Enter "4221-PF" in the search bar to view Publication 4221-PF, Compliance Guide for 501(c)(3) Private Foundations, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Stephen A. Martin

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/23/2026

ESL ID: 7704829506

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 4675583

Entity Name: RENEWING HOPE STRATEGIES

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☐ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 .
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20261115732

B4706-7958 05/24/2026 9:54 PM Received by California Secretary of State



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20261115732

Date Filed: 5/24/2026

Entity Details

Corporation Name RENEWING HOPE STRATEGIES
Entity No. 4675583
Formed In CALIFORNIA

Street Address of California Principal Office of Corporation

Street Address of California Office 41551 DATE ST
MURRIETA, CA 92562

Mailing Address of Corporation

Mailing Address 41551 DATE ST
MURRIETA, CA 92562

Attention

Officers

Officer Name	Officer Address	Position(s)
Hope Smith	41551 DATE ST MURRIETA, CA 92562	Secretary
CASSONDRA MARIE ROSE	41551 DATE ST MURRIETA, CA 92562	Chief Executive Officer
 KALYSTA ROSE	41551 DATE ST MURRIETA, CA 92562	Chief Financial Officer

☒ The entity's bylaws allow the CEO (President) to be the Secretary or CFO (Treasurer).

Additional Officers

Officer Name	Officer Address	Position	Stated Position
Leticia M Sarinana	41551 DATE ST MURRIETA, CA 92562	Vice President	
Kara Garibay	41551 DATE ST MURRIETA, CA 92562	Chairperson of Board	

Agent for Service of Process

Agent Name CASSONDRA MARIE ROSE
Agent Address 41551 DATE ST
MURRIETA, CA 92562

Email Notifications

Opt-in Email Notifications Yes, I opt-in to receive entity notifications via email.

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

CASSONDRA ROSE

05/24/2026

Signature

Date

FY 26/27 Community Service Funding (CSF)
Grant Application

29

ROCK YOUR RED



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Rock Your Red

Year Organization Founded: *

2015

Website:

www.rockyourred.info

Mailing Address: *

[REDACTED]
Temecula, CA. 92592

Number of Paid Staff: *

0

Number of Volunteers: *

22

Contact Name: *

Denyse Wilson

Contact Title: *

CEO/Founder

Contact Email: *

heart2heart282020@gmail.com

Contact Phone: *

9092243984

Alternate Contact Name:

Jan Duran

Alternate Contact Email:

[REDACTED]

Alternate Contact Phone:

[REDACTED]

**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Temecula, Murrieta, Winchester, Lake Elsinore

Business License No. *

054184

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

2026 License - Rock Your Red.pdf

94.79KB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$5,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Rock Your Red for Heart & Stroke awareness and CPR free certification

Start Date: *

2027-02-19

End Date: *

2027-02-19

Physical Address of Project/Program *

45000 Pechanga Parkway, Temecula, CA 92592

Preferred Payment Method:

(If grant is awarded.)

- ☒ Check Mailed ☐ Check Picked Up
☐ Electronic File Transfer

Make Check Payable to: *

 Temecula, CA 92592

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

05/01/2020

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

4590840

Attach State of California Entity Status Letter: *

To find State of California Entity Status Letter,

California Entity Status Letter 2026.pdf

392.52KB

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

IRS Employer Identification Number (EIN): *

852536062

Attach IRS Tax Exempt Determination Letter: *

To find IRS Tax Exempt Determination Letter,

Determination FinalLetter_85-2536062_ROCKYOURR
ED_07202022_00.tif

684.42KB

click the link below:

<https://apps.irs.gov/app/eos/>

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,

Statement of Information 2026.pdf

124.34KB

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990*

You might find IRS Form 990

SCAN0004.PDF

107.65KB

on the link below:

(990, 990-EZ, 990-PF, 990-T)

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Application Authorization

Has the organization or any members of the **Board of Directors** of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a **Temecula City Council Member** during the past 12 months? *

☐ Yes ☒ No

Is a **Temecula City Council Member** a member of the **Board of Directors** or an **Officer** of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☐ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

MISSION: To significantly improve the cardiovascular health and wellbeing of our community through education, training, support services to reduce the lives lost to cardiovascular diseases.

GOAL: To provide preventable educational services to our Heart & Stroke community to reduce the overall death rate by 20% with education, health fairs, CPR certification, and support groups.

Objective: Promote a healthy way of eating and living free of heart and stroke diseases where each person has a chance to make a healthier choice.

Our organization works very hard in our community to make this happen

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☒ Yes ☐ No

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT * OR SPONSORSHIP	AMOUNT: *	MONTH + YEAR FUNDING RECEIVED *	NAME OF CITY GRANT OR SPONSORSHIP
Rock Your Red	\$2,500.00	2026	Community Service Funding

Project/Program Description

Project/Program Title: Rock Your Red for Heart & Stroke awareness and CPR free certification

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

1. Purchasing CPR hands-only training mannequins to have available at all health fairs, workshops, etc. with brochures to take-away.
2. Support outreach community programs to teach warning signs of heart and stroke disease with snacks and lunch.
3. Provide blood pressure tool kits, pamphlets, health screening in underrepresented areas in our community.
4. Host Rock Your Red annual health event at Pechanga to provide free health screening from vendors, blood pressure checks, one-on-one question sessions with Cardiologists, Nurses, healthcare administrators.
5. Rock your Red annual Heart Walk in Temecula.
6. Temecula can food drive for give back to our community
7. Partner with AHA, schools and TVH to spread awareness of cardiovascular diseases.
8. Start a "Heart Support Group" with Temecula school district for students
9. Provide free CPR certification and stop-the-bleed training to our community.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

1. Purchase BP & Emergency medical kits (for resident training) and give-away BP kits to those who can not afford them.
2. Purchase portable AED and educational materials for training-Portion of the proceeds will go towards helping small business in Temecula purchase an AED machine for their business.
3. Marketing materials, Free Health & Wellness seminars
4. Provide free snacks and lunch to Temecula residents who attend training class and seminars.
5. Discount Temecula residents' admission to our annual Rock Your Red at Pechanga event.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

Each program, workshop, training, webinar, heart walk, Rock your Red event, can food drive, blood pressure screening, CPR certification will be customized to accommodate our diverse community in the city limits of

Temecula. The programs will be held within Temecula. These programs will include, but not limited to our seniors, military, special needs, adults, homeless etc. Our services will consist of those who live in Temecula areas of 92590, 92592, 92591. These services will benefit our residents of Temecula. Temecula residents will also have priority at every event help. They are our priority.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

*

250

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

*

22

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

Heart and Stroke diseases continue to be the #1 and #3 leading cause of death in the USA, killing more of our loved ones than all forms of cancer. The AHA estimates that more than 90 million Americans are living with some form of heart disease or effects of stroke. This grant will be used for our Temecula resident's primary to provide free programs, health events, seminars, workshops, information, Free CPR certification, Stop-the-bleed training and first-aid to improve their quality of life and education them on how to have a healthier life free of cardiovascular diseases. Our goal is one-heart-beat-at-a-time for Temecula Residents.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$5,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$1,500.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$0.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
CPR equipment for adults and infants, heart monitors for walking, Blood Pressure screening equipment, Portable health screening equipment, Stroke symptom demonstration kits, table top kiosks	\$2,500.00
Facilities/Rent/Insurance *	* \$1,000.00
Local park rental with electricity, insurance for events coverage	
Supplies *	* \$1,250.00
Ink, paper, printing, binders, clipboards, marketing flyers, postcards, t-shirts	
Services *	* \$1,500.00
Instructor for CPR, stop-the-bleed training, room rentals, speakers for events	
Food *	* \$2,000.00
Lunch for CPR/AED certification class, snacks and give-a-ways at events, water, gatorade,	
Other (i.e. Informational Outreach, etc) *	* \$1,800.00
Marketing brochures, social media, IT and marketing company, letterhead, hand sanitizer, stress balls, marketing materials for youth and adults	
Staffing Expense	* \$0.00
TOTAL REVENUE:	TOTAL EXPENSES
\$6,500.00	\$10,050.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Rock Your Red

Requested Amount:

\$5,000.00

President/Authorized Officer Name: *

Denyse Wilson

President/Authorized Officer Title: *

CEO/Founder

E-mail: *

heart2heart282020@gmail.com

Phone: *

9092243984

President/Authorized Officer Signature *

Denyse Wilson

Submission Date:

2026-06-23 05:10:25 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

ROCK YOUR RED
C/O SHARON DENYSE WILSON
[REDACTED]
TEMECULA, CA 92592

Date:
09/02/2022
Employer ID number:
85-2536062
Person to contact:
Name: Suzanne Richey
ID number: 50750
Telephone: 877-829-5500
Accounting period ending:
December 31
Public charity status:
509(a)(2)
Form 990 / 990-EZ / 990-N required:
Yes
Effective date of exemption:
May 1, 2020
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053603004162

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. 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,

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/23/2026

ESL ID: 3218572183

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 4590840

Entity Name: ROCK YOUR RED

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20261063673



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20261063673

Date Filed: 5/16/2026

B4684-0367 05/16/2026 4:30 PM Received by California Secretary of State

Entity Details			
Corporation Name		ROCK YOUR RED	
Entity No.		4590840	
Formed In		CALIFORNIA	
Street Address of California Principal Office of Corporation			
Street Address of California Office		[REDACTED] TEMECULA, CA 92592	
Mailing Address of Corporation			
Mailing Address		[REDACTED] TEMECULA, CA 92592	
Attention		SHARON DENYSE WILSON	
Officers			
Officer Name		Officer Address	Position(s)
STEVEN WILSON		[REDACTED] TEMECULA, CA 92592	Chief Financial Officer
JAN DURAN		[REDACTED] TEMECULA, CA 92592	Secretary
SHARON DENYSE WILSON		[REDACTED] TEMECULA, CA 92592	Chief Executive Officer
☒ The entity's bylaws allow the CEO (President) to be the Secretary or CFO (Treasurer).			
Additional Officers			
Officer Name	Officer Address	Position	Stated Position
None Entered			
Agent for Service of Process			
Agent Name		SHARON DENYSE WILSON	
Agent Address		[REDACTED] TEMECULA, CA 92592	
Email Notifications			
Opt-in Email Notifications		Yes, I opt-in to receive entity notifications via email.	
Electronic Signature			
☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.			
SHARON GRIFFIN		05/16/2026	
Signature		Date	

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate (pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California) to engage in, carry on or conduct, in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California; nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.

BUSINESS NAME: Rock Your Red

BUSINESS LOCATION: 45571 Ponderosa Ct, Temecula, CA 92592

BUSINESS OWNER: Sharon Denyse Wilson

ROCK YOUR RED
45571 PONDEROSA CT
TEMECULA, CA 92592

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

DESCRIPTION: Consulting

Business License Number: 054184

License Fee: \$4.00

Effective Date: December 09, 2025

Expiration Date: January 31, 2027

Fees paid in accordance with City Ordinance

TO BE POSTED IN A CONSPICUOUS PLACE

NOT TRANSFERABLE and NON-REFUNDABLE

FY 26/27 Community Service Funding (CSF)
Grant Application

30

ROLLING FOR A CAUSE CORP

Note about transcribed forms: this format exists to remove accessibility barriers, but some recipients prefer the original printed format. If you'd like help moving your entries into the original form, please use the live assistance options in the sidebar or contact the author.

City of Temecula logo

Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

Organization information

Check the box to confirm you have read Community Service Funding Grant Program Policy (link above) *

☒ Confirm

Applicant Organization Name: *

Rolling For A Cause, Corp

Year Organization Founded: *

2019

Website: RollingForACause.com

Mailing Address: *

Temecula CA
92592

Include City, State, and Zip

Number of Paid Staff: *

0

Number of Volunteers: *

10

Contact Name: *

Dorothy Hawthorne

Contact Title: *

President

Contact Email: * RollingForACause@gmail.com

Contact Phone: * XXX-XXX-XXXX

Alternate Contact Name:

Lori Smith

Alternate Contact Email:

Alternate Contact Phone:

XXX-XXX-XXXX

Does the nonprofit have a current City of Temecula Business License? *

☒ Yes

☐ No

Business License No. *

84-4301412

Geographic Area(s) the Organization Serves: *

Temecula

Geographic Area(s) the Project/Program Serves: *

CSF grant must be exclusively used to serve Temecula.

Copy of Business License * No file chosen

Drag and drop up to 1 files here to upload or Choose File

<https://css.temeculaca.gov>

Community Service Funding Application

Temecula logo

Project/Program

Amount Requested: *

\$

0.00 10,000

MAX: \$10,000 PER ORG

Start Date: * mm/dd/yyyy

08/01/2026

Project/Program Title: *

Rolling For A Cause Outreach

End Date: * mm/dd/yyyy

07/30/2027

Physical Address of Project/Program *

Temecula CA 92592

Preferred Payment Method:

(If grant is awarded.)

- ☐ Check Mailed
☒ Check Picked Up
☐ Electronic File Transfer

Make Check Payable to: *

Rolling For A Cause, Corp

Page 2 of 10

Community Service Funding Application

City of Temecula logo with stylized building icon and the word Temecula in script.

Nonprofit Status

Is the organization incorporated as a nonprofit?

*

☒ Yes ☐ No

Date of Incorporation: *

mm/dd/yyyy

12/23/2019

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

- ☒ State of California Entity Status Letter
- ☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

4643327

**To find State of California Entity Status Letter,
click the link below:**

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

IRS Employer Identification Number (EIN): *

**To find IRS Tax Exempt Determination Letter,
click the link below:**

<https://apps.irs.gov/app/eos/>

Attach State of California Entity Status Letter: *

Drag and drop up to 1 files here to upload or

Choose File

Choose File No file chosen

Drag and drop up to 1 files here to upload or
Choose File

Attach IRS Tax Exempt Determination Letter: *

Drag and drop up to 1 files here to upload or

Choose File

Choose File No file chosen

Drag and drop up to 1 files here to upload or
Choose File

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

**To find Nonprofit Statement of Information,
click the link below:**

<https://bizfileonline.sos.ca.gov/search/business>

Attach Nonprofit Statement of Information: *

Drag and drop up to 1 files here to upload or

Choose File

Choose File No file chosen

Drag and drop up to 1 files here to upload or
Choose File

Provide further verification as follows: *

(one required, both preferred)

- ☐ First Page of most recent IRS Form 990
- ☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Page 3 of 10

Community Service Funding Application

Temecula logo

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☒ Yes ☐ No

If Yes, Briefly Describe: *

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☒ Yes ☐ No

If Yes, Provide Council Member's Name and Title Within The Organization: *

This Application has been authorized by the organization's: *

☒ Executive Committee ☐ Board of Directors ☐ Members-at-Large

Community Service Funding Application

City of Temecula logo with the word Temecula in script and a small building icon above it

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

Provide with the needs of those faced with tragic loss, abuse and assisting homeless veterans

Upon request, copies of the organization's current budget/financial statements (balance statement and income statement), and if available CPA's audit, may be needed to demonstrate sound financial management. Do not submit now. *

☒ Understand

City of Temecula logo with stylized script reading Temecula

Community Service Funding Application

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☒ Yes ☐ No

Name of program/project funded by the city grant or sponsorship *	Amount: *	Month + year funding received *	Name of city grant or sponsorship	Remove entry
Name of program/project funded by the city grant or sponsorship, row 1 Bunch in the Vines	Amount, row 1\$ \$1,000	Month and year funding received, row 1 NOV 2023	Name of city grant or sponsorship, row 1 Community Improvement	☐
Name of program/project funded by the city grant or sponsorship, row 2 Bunch in the Vines	Amount, row 2\$ \$2,000	Month and year funding received, row 2 NOV 2025	Name of city grant or sponsorship, row 2 Community Improvement	☐
Name of program/project funded by the city grant or sponsorship, row 3	Amount, row 3\$	Month and year funding received, row 3	Name of city grant or sponsorship, row 3	☐

+Add

Temecula logo

Community Service Funding Application

Project/Program Description

Page 7 of 10

Project/Program Title:

Rolling For A Cause outread

1. Describe the project/program the Temecula grant funding will support. *

Short term immediate emergency assistance typically ranging from \$1,000 - \$2,500. For Food housing and transportation.

2. List the items the organization will purchase using the city's grant funding, if awarded. *

Food, hotel rooms, clothing, hygiene supplies.

Paid invoices/receipts will be required for purchases listed in this application *

☒ Understand

3. Explain how this grant funding specifically benefits Temecula residents. *

Temecula residents must benefit from this program/project if awarded city funding.

Most recipients are residents of Temecula

3b. Estimated number of people from Temecula expected to benefit from this project/program: *

35

3c. Estimated number of volunteers involved in this project/program: *

3

4. Summary statement – summarize answers 1 – 3 listing only what the city grant funds will be used to buy. *

Grant Funds will be used to purchase Food, clothing, hygiene supplies, lodging. For residents in short term emergent need.

Community Service Funding Application

Temecula logo

Project/Program Budget

List revenues/income for project/program

Amount requested from this City of Temecula
Community Services Grant (refer to page 2) *

Revenues *

\$

0.00 \$ 10,000

*

\$

0.00 \$ 15,000

Amount contributed to the Project/Program by
the Applicant Organization

*

\$

0.00

Other grants or funding already awarded for
Project/Program, if any

*

\$

0.00

In-Kind match amount or volunteer credit hours
estimated amount

List of expenses for project/program

Expenses *

\$

0.00 \$ 1,000

Tools/Equipment *

*

\$

0.00 \$ 10,000

Facilities/Rent/Insurance *

All rent is to assist recipients

*

\$

0.00 \$ 3,000

Supplies *

All supplies provided to recipients

*

\$

0.00

Services *

*

\$

0.00 \$ 8,000

Food *

All Food provided to recipients

*

\$

0.00

Other (i.e. Informational Outreach, etc) *

*

\$

0.00

Staffing Expense

INELIGIBLE FOR GRANT FUNDING; HOWEVER

0.00

\$

Total Revenue:

\$ 25,000

0.00

Total Expenses

\$ 22,000

0.00

Community Service Funding Application

City of Temecula logo with stylized script reading Temecula and a small building icon above the text.

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Fiscal Year 2026-2027 Expenditure Compliance Report

If your organization is awarded a Community Service Funding (CSF) Grant in Fiscal Year 2026-2027 by the City of Temecula, all grant funds received must be expended on or between July 1, 2026, and June 30, 2027.

To substantiate that funds received from the City were spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City for grant compliance. **It is strongly encouraged that all purchases that are funded by this grant be made within the City of Temecula to support our local businesses.**

Organization and project information

Nonprofit Organization:

Rolling For A Cause, Corp.

Project/Program:

Rolling For A Cause Outroad ✓

Total Amount of CSF Grant Awarded:

\$

Number of beneficiaries living in 92590, 92591,
92592 that directly benefitted from this
Project/Program:

(Approximate number of beneficiaries if do not
have precise number)

Attachment number	Name of Company on Receipt/Paid Invoice Attached	Date on Receipt/Invoice Must be dated on or between 7/1/2026 and 6/30/2027	Expenditure Must support project/program described in application	
			Amount	Items Purchased
1		mm/dd/yyyy	\$	
2		mm/dd/yyyy	\$	
3		mm/dd/yyyy	\$	
4		mm/dd/yyyy	\$	
5		mm/dd/yyyy	\$	
6		mm/dd/yyyy	\$	
7		mm/dd/yyyy	\$	
8		mm/dd/yyyy	\$	
Expenditure total			\$	

I hereby certify the information in this expenditure compliance report is true & correct.

President / Authorized Officer:

Print name

Title

Signature:

Date:

mm/dd/yyyy

Community Service Funding Application

City of Temecula logo

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Rolling For A Cause, Corp

Requested Amount:

\$

0.00 \$10,000

President/Authorized Officer Name: *

Dorothy Hawthorne

President/Authorized Officer Title: *

President

E-mail: *

Doughawhorne

Phone: *

555-555-5555

President/Authorized Officer Signature *

Sign

Dorothy Hawthorne

Submission Date:

Date and time will be captured on form submission

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

☐ **President/Officer Confirmation: * Verified and Confirmed**

If different than above, application prepared by:

Name, Title, & Organization

If you have any questions, please contact: Betsy.Lowrey@TemeculaCA.gov (951) 693-3959 or
Stacey.Brown@TemeculaCA.gov (951) 694-6413

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

DEPARTMENT OF THE TREASURY

Date:

APR 21 2020

ROLLING FOR A CAUSE

TEMECULA, CA 92592-0000

Employer Identification Number:

84-4301412

DLN:

26053483005860

Contact Person:

CUSTOMER SERVICE

ID# 31954

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:

December 23, 2019

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. 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.

ROLLING FOR A CAUSE

Sincerely,

Stephen E. Martin

Director, Exempt Organizations
Rulings and Agreements

FY 26/27 Community Service Funding (CSF)
Grant Application

31

ROSE AGAIN FOUNDATION



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Rose Again Foundation

Year Organization Founded: *

2013

Website:

roseagainfoundation.org

Mailing Address: *

27555 Ynez Rd Ste 110
Temecula CA 92591

Number of Paid Staff: *

1

Number of Volunteers: *

10

Contact Name: *

Julie Ngo

Contact Title: *

Executive Director

Contact Email: *

julie@roseagainfoundation.org

Contact Phone: *

951-970-2518

Alternate Contact Name:

Alternate Contact Email:

Alternate Contact Phone:

Does the nonprofit have a current City of Temecula Business License?

☐ Yes ☒ No

*

Geographic Area(s) the Organization Serves: *

Southwest Riverside County

A current City of Temecula Business License may be required to submit prior to fund disbursement.

*

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

☒ Understand

Project/Program

Amount Requested: *

\$7,500.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Kids Soar Tutoring and Emancipated Foster young adults

Start Date: *

2026-07-01

End Date: *

2027-06-30

Physical Address of Project/Program *

27555 Ynez Rd Ste 110

Preferred Payment Method:

(If grant is awarded.)

☐ Check Mailed ☒ Check Picked Up

☐ Electronic File Transfer

Make Check Payable to: *

Rose Again Foundation

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

06/03/2014

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☐ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

46-3224116

Attach State of California Entity Status Letter: *

To find State of California Entity Status Letter,

Scan.pdf

273.54KB

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,

51196240801Z084.pdf

82.53KB

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☒ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990 *

You might find IRS Form 990

Y9950-1480602-1571990.pdf

1.75MB

on the link below:

(990, 990-EZ, 990-PF, 990-T)

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

State Registry Search Tool:

Attach State Registry Document/Info *

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Certificate of Status_1782859671445.pdf

292.52KB

Application Authorization

Has the organization or any members of the **Board of Directors** of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a **Temecula City Council Member** during the past 12 months? *

☐ Yes ☒ No

Is a **Temecula City Council Member** a member of the **Board of Directors** or an **Officer** of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☒ Executive Committee ☐ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

The Rose Again Foundation exists to support foster kids, foster families, and young adults aging out of foster care by providing resources, encouragement, and opportunities that help them build brighter futures. Through caring relationships and the support of our community, we strive to bring hope, create a support system and remind every child and young adult that they are valued.

We believe every child deserves the chance to succeed, no matter where they started in life. Our purpose is to help meet the educational, emotional, and everyday needs of children and young adults in the foster care system—needs that aren't always covered by the county.

We are proud to serve Temecula by working alongside local agencies, schools, businesses, civic organizations, and volunteers. Together, we provide programs that strengthen foster families, help children succeed in school, and give young adults the support they need as they begin living independently.

Whether it's providing one-on-one tutoring for a child who is struggling in school or helping a young adult with interview clothes and transportation to a new job, we believe small acts of support can make a lasting difference.

We can't change what these children and young adults have been through, but we can walk beside them as they build their future. Our goal is to help them believe in themselves, reach their full potential, and know they have a community that cares.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Project/Program Description

Project/Program Title: Kids Soar Tutoring and Emancipated Foster young adults

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT.*

The Kids SOAR Tutoring Program was created because we saw the need. Many of our foster kids have fallen behind in school. Frequent moves, trauma, and instability often leave them struggling to read, write, or keep up with their classmates. Some are several grade levels behind, and many of the older kids have lost confidence in their ability to learn.

Our program provides one-to-one, in-home tutoring that meets each child where they are. We currently provide approximately 20–30 hours of tutoring each month. Grant funding will help us continue paying our tutors and purchase books and educational supplies that support each child's individual learning needs.

What makes this program special isn't just the tutoring—it's the relationships. Our tutors become trusted, consistent adults in a child's life. They are patient, encouraging, and know how to challenge each student while celebrating every success, no matter how small. Because the tutoring takes place in the child's home, there is no fear of being embarrassed in front of classmates or feeling like they're falling behind. It's a safe place to ask questions, make mistakes, and grow.

The program also provides support for foster parents. They are often juggling school meetings, medical appointments, therapy, court dates, and family visitation while trying to create stability for the children in their home. Knowing their child is receiving individualized academic support gives them one less thing to worry about and one more reason to believe their child can succeed.

For our Aged Out Foster Kids:

When young adults age out of foster care, many are suddenly expected to figure life out on their own. They may not have family to help them with the little things that most of us take for granted, like buying clothes for a job interview or having gas in the car to get to work.

Our Aged-Out Youth Support Program helps fill those gaps. The grant will allow us to provide interview and work clothes, gas cards, Uber gift cards, and other basic necessities that help these young adults take the next step toward independence.

Sometimes the only thing standing between a young person and a job is a ride to the interview or having something appropriate to wear. By removing those barriers, we're giving them the opportunity to succeed. We want them to feel confident, prepared, and know that someone believes in them.

Our hope is that this support gives them a strong start as they begin building a life on their own. We can't replace the family they may not have, but we can be there to encourage them, help them through the difficult moments, and remind them they are worth investing in.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED.*

One-to-one tutor wages/contracted tutoring services
Books (reading, chapter books, leveled readers)
Workbooks and curriculum materials
Reading intervention materials
Math curriculum and manipulatives
Writing journals and composition books
Pencils, pens, markers, crayons, colored pencils
Paper, notebooks, binders, folders
Flash cards and educational games
Printer paper and printer ink
Dry erase boards, markers, and erasers
School supplies
Learning aids for children with special educational needs
Incentives and rewards (books, educational prizes, certificates)

Interview clothing (shirts, pants, socks, underwear, bras, undershirts)
Work clothing See Above
Professional shoes/work boots
Uniforms required for employment
Belts, ties, and professional accessories
Hygiene and grooming items for interviews and employment
Haircuts or basic grooming assistance
Gas gift cards
Uber/Lyft gift cards
Public transportation passes
Driver's license or state ID fees
driving class for new drivers
Resume printing supplies
Employment-related office supplies
Basic work tools or equipment required for employment (when appropriate)
Emergency assistance directly related to obtaining or maintaining employment

calculators
Educational apps
Workbooks
Interview portfolio folders
Work gloves or safety gear for trade jobs
Bus passes
Grocery gift cards (if your program includes emergency stabilization)
Laundry supplies or laundry vouchers for interview clothes

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

Rose Again Foundation is committed to serving children and foster families who live in Temecula. This grant will directly benefit Temecula residents by providing one-to-one tutoring, books, and educational supplies that help foster children build confidence and succeed academically.

When children receive the support they need to succeed in school, the impact reaches far beyond the classroom. They gain confidence, begin to believe in themselves, and are better prepared for future success. Foster parents also benefit from knowing their child has a caring, consistent tutor who provides individualized support while they navigate the many medical appointments, therapy sessions, school meetings, and family visitations that often come with foster care.

By investing in these children today, we are investing in the future of our community. Every child who gains the skills and confidence to succeed is another step toward building a stronger, healthier Temecula for all of us.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

25

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

5

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

Rose Again Foundation is committed to helping foster children, foster families, and young adults aging out of foster care find hope, support, and opportunities to build a brighter future. We believe every child deserves someone who believes in them and every young adult deserves the chance to succeed.

Serving Temecula, we partner with local agencies, schools, businesses, volunteers, and community members to provide programs that make a real difference. From one-on-one tutoring that helps children gain confidence in school to providing transportation, interview clothing, and other essentials that help young adults find employment, our focus is on removing barriers and creating opportunities.

Our goal is simple—to walk alongside children and young adults as they overcome challenges, build confidence, and take the next step toward a successful and independent future. Together with our community, we are helping create brighter futures for the foster families we serve.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$7,500.00
Amount contributed to the Project/Program by the Applicant Organization	* \$1,500.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$1,000.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment * NONE	EXPENSES * \$0.00
Facilities/Rent/Insurance * NONE	* \$0.00
Supplies * See List	* \$2,000.00
Services * Tutoring	* \$6,000.00
Food * NONE	* \$0.00
Other (i.e. Informational Outreach, etc) * Clothing See List	* \$2,000.00
Staffing Expense	* \$0.00
TOTAL REVENUE: \$10,000.00	TOTAL EXPENSES \$10,000.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

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To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Rose Again Foundation

Requested Amount:

\$7,500.00

President/Authorized Officer Name: *

Julie Ngo

President/Authorized Officer Title: *

Executive Director

E-mail: *

julie@roseagainfoundation.org

Phone: *

9519702518

President/Authorized Officer Signature *



Submission Date:

2026-06-30 08:38:47 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

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

COPY

DEPARTMENT OF THE TREASURY

Date: JUN 03 2014

ROSE AGAIN FOUNDATION
C/O NATALIE ROSE SHADLE
[REDACTED]
TEMECULA, CA 92592

Employer Identification Number:
46-3224116

DLN:

17053351322023

Contact Person:

CUSTOMER SERVICE

ID# 31954

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

June 30

Public Charity Status:

170(b)(1)(A)(vi)

Form 990 Required:

Yes

Effective Date of Exemption:

July 18, 2013

Contribution Deductibility:

Yes

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.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

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

Sincerely,

Tamara Rippanda

Director, Exempt Organizations

Enclosure: Publication 4221-PC

Letter 947



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 7/9/2026

ESL ID: 2878693830

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 3590173

Entity Name: ROSE AGAIN FOUNDATION

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20260113450

B4330-5485 01/15/2026 3:13 PM Received by California Secretary of State



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20260113450

Date Filed: 1/15/2026

Entity Details

Corporation Name ROSE AGAIN FOUNDATION
Entity No. 3590173
Formed In CALIFORNIA

Street Address of California Principal Office of Corporation

Street Address of California Office 27555 YNEZ RD STE 110
TEMECULA, CA 92591

Mailing Address of Corporation

Mailing Address 27555 YNEZ RD STE 110
TEMECULA, CA 92591
Attention Julie Ngo

Officers

Officer Name	Officer Address	Position(s)
Julie Ngo	27555 YNEZ RD STE 110 TEMECULA, CA 92591	Chief Executive Officer, Secretary
Jerry Konchar	27555 YNEZ RD STE 110 TEMECULA, CA 92591	Chief Financial Officer

☒ The entity's bylaws allow the CEO (President) to be the Secretary or CFO (Treasurer).

Additional Officers

Officer Name	Officer Address	Position	Stated Position
None Entered			

Agent for Service of Process

Agent Name JULIE NGO
Agent Address 27555 YNEZ RD STE 110
TEMECULA, CA 92591

Email Notifications

Opt-in Email Notifications No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

Jerry Konchar

Signature

01/15/2026

Date

FY 26/27 Community Service Funding (CSF)
Grant Application

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ROTARY CLUB OF TEMECULA



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Rotary Club of Temecula

Year Organization Founded: *

1974

Website:

www.rotarycluboftemecula.com

Mailing Address: *

P.O. Box 64. Temecula, CA 92593

Number of Paid Staff: *

1

Number of Volunteers: *

135

Contact Name: *

Jami Fencel

Contact Title: *

Club President 2026-2027

Contact Email: *

Contact Phone: *

Alternate Contact Name:

Jennifer Evans

Alternate Contact Email:

Alternate Contact Phone:

Does the nonprofit have a current City of Temecula Business License? *

☒ Yes ☐ No

Business License No. *

054545

Geographic Area(s) the Organization Serves: *

Temecula

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

Business License 013127 (2).pdf

234.62KB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Holiday Food Baskets for Low Income TVUSD students

Start Date: *

2026-10-01

End Date: *

2026-12-31

Physical Address of Project/Program *

41888 Motor Car Pkwy, Temecula CA 92591

Preferred Payment Method:

(If grant is awarded.)

☒ Check Mailed ☐ Check Picked Up

☐ Electronic File Transfer

Make Check Payable to: *

Rotary Club of Temecula

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Date of Incorporation: *

07/30/1999

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

0776714

To find State of California Entity Status Letter,

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

Attach State of California Entity Status Letter: *

Entity Status Letter - Foundation 061226.pdf

479.67KB

IRS Employer Identification Number (EIN): *

33-0856109

To find IRS Tax Exempt Determination Letter,

click the link below:

<https://apps.irs.gov/app/eos/>

Attach IRS Tax Exempt Determination Letter: *

501c3.pdf

1.9MB

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

To find Nonprofit Statement of Information,

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Attach Nonprofit Statement of Information: *

Statement of Info-Foundation.pdf

331.85KB

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☐ Detailed info about your charity found on the State Registry Search Tool (link below)

You might find IRS Form 990

on the link below:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Attach First Page of Most Recent Form 990 *

990 Rotary.pdf

770.54KB

(990, 990-EZ, 990-PF, 990-T)

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☐ Yes ☒ No

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☒ Executive Committee ☒ Board of Directors ☒ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization’s mission/goals and objectives: *

The Rotary Club of Temecula's mission is to foster community service, promote goodwill, and advance global understanding through local and international projects. The club's goals are to address critical community needs, such as food insecurity, education, and healthcare, while building strong partnerships with local organizations. Objectives include engaging members in hands-on service projects, supporting youth development, and creating sustainable solutions that improve the quality of life for all. By living the Rotary motto, "Service Above Self," the club aims to make a lasting, positive impact in Temecula and beyond.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*
☒ Understand

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☒ Yes ☐ No

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT * OR SPONSORSHIP	AMOUNT: *	MONTH + YEAR FUNDING RECEIVED *	NAME OF CITY GRANT OR SPONSORSHIP
Food for TVUSD Low income students	\$2,500.00	December 2025	CSF Grant
Food for TVUSD Low income students	\$5,000.00	December 2024	CSF Grant

Project/Program Description

Project/Program Title: Holiday Food Baskets for Low Income TVUSD students

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT.*

The objectives of the Holiday Basket program are to:

1. Identify and support families facing food insecurity within the Temecula Valley School District.
2. Provide nutritious, shelf-stable food to over 300 families during the holiday season.
3. Engage the entire Rotary Club of Temecula in community service by involving members in the packing and distribution of food boxes.
4. Foster a sense of community and well-being by ensuring that families in need receive essential support during the critical months of November and December.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY’S GRANT FUNDING, IF AWARDED.*

The funds will be spent to purchase quality nutritious food such as protein and shelf stable items and gift cards to subsidize any dietary or religious exemptions for the family.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.*

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

The Holiday Basket program directly benefits the community by addressing food insecurity among vulnerable families in the Temecula Valley. By providing essential, nutritious food during the holiday season, the program alleviates stress for over 300 families, ensuring they have the sustenance they need during a time often marked by financial strain. Beyond the immediate relief, the project fosters a sense of community solidarity, demonstrating collective care and support for those in need. Engaging Rotary Club members in hands-on service not only strengthens community bonds but also raises awareness of local challenges, inspiring continued humanitarian efforts. Through these actions, the program significantly improves the lives of the less fortunate by providing both physical nourishment and emotional support during a critical time of year.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

1,200

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

135

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY.*

The Rotary Club of Temecula partners with the Temecula Valley School District to provide over 300 families facing food insecurity with nutritious, shelf-stable food during the holiday season. Through hands-on involvement, Rotarians pack and distribute the boxes, fostering community support and improving the well-being of those in need.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$7,500.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$6,000.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
refrigerated trucks	\$1,500.00
Facilities/Rent/Insurance *	* \$2,500.00
facility for packing and storage and insurance	
Supplies *	* \$2,500.00
bags, printing, boxes	
Services *	* \$0.00
N/a	
Food *	* \$15,000.00
proteins and shelf stable food, gift cards for protien	
Other (i.e. Informational Outreach, etc) *	* \$2,000.00
marketing and outreach to schools	
Staffing Expense	* \$0.00
TOTAL REVENUE:	TOTAL EXPENSES
\$23,500.00	\$23,500.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Rotary Club of Temecula

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Esther Phahla

President/Authorized Officer Title: *

Club President 2025-2026

E-mail: *

[REDACTED]

Phone: *

[REDACTED]

President/Authorized Officer Signature *

Esther Phahla

Submission Date:

2026-06-21 08:28:41 AM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

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

DEPARTMENT OF THE TREASURY

Date:

JUL 30 1999

ROTARY CLUB OF TEMECULA FOUNDATION
27720 JEFFERSON AVE STE 101
TEMECULA, CA 92590

Employer Identification Number:
33-0856109

DLN:

17053159008009

Contact Person:

DALE T SCHABER

ID# 31175

Contact Telephone Number:
(877) 829-5500

Accounting Period Ending:
June 30

Foundation Status Classification:
509(a)(2)

Advance Ruling Period Begins:
May 4, 1999

Advance Ruling Period Ends:
June 30, 2003

Addendum Applies:
No

Dear Applicant:

Based on information you supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably expect to be a publicly supported organization described in section 509(a)(2).

Accordingly, during an advance ruling period you will be treated as a publicly supported organization, and not as a private foundation. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must send us the information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, we will classify you as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, we will classify you as a private foundation for future periods. Also, if we classify you as a private foundation, we will treat you as a private foundation from your beginning date for purposes of section 507(d) and 4940.

Grantors and contributors may rely on our determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you send us the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until we make a final determination of your foundation status.

If we publish a notice in the Internal Revenue Bulletin stating that we

Letter 1045 (DO/CG)

ROTARY CLUB OF TEMECULA FOUNDATION

will no longer treat you as a publicly supported organization, grantors and contributors may not rely on this determination after the date we publish the notice. In addition, if you lose your status as a publicly supported organization, and a grantor or contributor was responsible for, or was aware of, the act or failure to act, that resulted in your loss of such status, that person may not rely on this determination from the date of the act or failure to act. Also, if a grantor or contributor learned that we had given notice that you would be removed from classification as a publicly supported organization, then that person may not rely on this determination as of the date he or she acquired such knowledge.

If you change your sources of support, your purposes, character, or method of operation, please let us know so we can consider the effect of the change on your exempt status and foundation status. If you amend your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, let us know all changes in your name or address.

As of January 1, 1984, you are liable for social security taxes under the Federal Insurance Contributions Act on amounts of \$100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the private foundation excise taxes under Chapter 42 of the Internal Revenue Code. However, you are not automatically exempt from other federal excise taxes. If you have any questions about excise, employment, or other federal taxes, please let us know.

Donors may deduct contributions to you as provided in section 170 of the Internal Revenue Code. Bequests, legacies, devises, transfers, or gifts to you or for your 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.

Donors may deduct contributions to you only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fundraising events may not necessarily qualify as deductible contributions, depending on the circumstances. Revenue Ruling 67-246, published in Cumulative Bulletin 1967-2, on page 104, gives guidelines regarding when taxpayers may deduct payments for admission to, or other participation in, fundraising activities for charity.

You are not required to file Form 990, Return of Organization Exempt From Income Tax, if your gross receipts each year are normally \$25,000 or less. If you receive a Form 990 package in the mail, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally \$25,000 or less, and sign the return. Because you will be treated as a public charity for return filing purposes during your entire advance ruling period, you should file Form 990 for each year in your advance ruling period that you exceed the \$25,000 filing threshold even if your sources of support do not satisfy the public support test specified in the heading of this letter.

ROTARY CLUB OF TEMECULA FOUNDATION

If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of \$20 a day is charged when a return is filed late, unless there is reasonable cause for the delay. However, the maximum penalty charged cannot exceed \$10,000 or 5 percent of your gross receipts for the year, whichever is less. For organizations with gross receipts exceeding \$1,000,000 in any year, the penalty is \$100 per day per return, unless there is reasonable cause for the delay. The maximum penalty for an organization with gross receipts exceeding \$1,000,000 shall not exceed \$50,000. This penalty may also be charged if a return is not complete. So, please be sure your return is complete before you file it.

You are not required to file federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

The law requires you to make your annual return available for public inspection without charge for three years after the due date of the return. You are also required to make available for public inspection a copy of your exemption application, any supporting documents and this exemption letter to any individual who requests such documents in person or in writing. You can charge only a reasonable fee for reproduction and actual postage costs for the copied materials. The law does not require you to provide copies of public inspection documents that are made widely available, such as by posting them on the Internet (World Wide Web). You may be liable for a penalty of \$20 a day for each day you do not make these documents available for public inspection (up to a maximum of \$10,000 in the case of an annual return).

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, we will assign a number to you and advise you of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

This determination is based on evidence that your funds are dedicated to the purposes listed in section 501(c)(3) of the Code. To assure your continued exemption, you should keep records to show that funds are spent only for those purposes. If you distribute funds to other organizations, your records should show whether they are exempt under section 501(c)(3). In cases where the recipient organization is not exempt under section 501(c)(3), you must have evidence that the funds will remain dedicated to the required purposes and that the recipient will use the funds for those purposes.

If you distribute funds to individuals, you should keep case histories showing the recipients' names, addresses, purposes of awards, manner of selection, and relationship (if any) to members, officers, trustees or donors of

ROTARY CLUB OF TEMECULA FOUNDATION

funds to you, so that you can substantiate upon request by the Internal Revenue Service any and all distributions you made to individuals. (Revenue Ruling 56-304, C.B. 1956-2, page 306.)

If we said in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

Because this letter could help us resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,


District Director

Enclosure(s):
Form 872-C



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/12/2026

ESL ID: 6543049348

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 2163211

Entity Name: ROTARY CLUB OF TEMECULA FOUNDATION

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20251040943



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20251040943

Date Filed: 5/8/2025

B3670-8109 05/08/2025 2:43 PM Received by California Secretary of State

Entity Details			
Corporation Name		ROTARY CLUB OF TEMECULA FOUNDATION	
Entity No.		2163211	
Formed In		CALIFORNIA	
Street Address of California Principal Office of Corporation			
Street Address of California Office		None	
Mailing Address of Corporation			
Mailing Address		P.O. BOX 64 TEMECULA, CA 92593	
Attention			
Officers			
Officer Name	Officer Address	Position(s)	
Julie Ngo	██████████ Temecula, CA 92592	Chief Financial Officer	
+ Esther Phahla	27475 YNEZ ROAD 378 TEMECULA, CA 92591	Chief Executive Officer	
+ Lisa Locke	██████████ TEMECULA, CA 92592	Secretary	
Additional Officers			
Officer Name	Officer Address	Position	Stated Position
None Entered			
Agent for Service of Process			
Agent Name		Esther Phahla	
Agent Address		27475 YNEZ ROAD 378 TEMECULA, CA 92591	
Email Notifications			
Opt-in Email Notifications		Yes, I opt-in to receive entity notifications via email.	
Electronic Signature			
☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.			
Esther Phahla		05/08/2025	
Signature		Date	

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California, to engage in, carry on or conduct in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California, nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

BUSINESS NAME: Rotary Club of Temecula

BUSINESS LOCATION: 41888 Motor Car Pky, Temecula, CA 92591

BUSINESS OWNER: Julie Ngo

ROTARY CLUB OF TEMECULA
PO BOX 64
TEMECULA, CA 92593

DESCRIPTION: Non-Profit Organization

Business License Number: 054545

License Fee: \$4.00

Effective Date: January 14, 2026

Expiration Date: January 31, 2027

Fees paid in accordance with City Ordinance

TO BE POSTED IN A CONSPICUOUS PLACE

NOT TRANSFERABLE and NON-REFUNDABLE

FY 26/27 Community Service Funding (CSF)
Grant Application

33

SAFE FAMILY JUSTICE CENTERS



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

SAFE Family Justice Centers

Year Organization Founded: *

1998

Website:

www.safefjc.org

Mailing Address: *

28910 Pujol St. Temecula CA
92590

Number of Paid Staff: *

22

Number of Volunteers: *

29

Contact Name: *

Marshall Hamilton

Contact Title: *

Executive Director

Contact Email: *

marshallh@safefjc.org

Contact Phone: *

[REDACTED]

Alternate Contact Name:

Krista Shaw

Alternate Contact Email:

kristas@safefjc.org

Alternate Contact Phone:

951-587-3900

**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Riverside County, CA

Business License No. *

056943

Geographic Area(s) the Project/Program Serves: *

Temecula, CA

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

City of Temecula license .pdf

742.88KB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Temecula SAFE & Healthy Families

Start Date: *

2026-07-01

End Date: *

2027-06-30

Physical Address of Project/Program *

28910 Pujol St. Temecula CA 92590

Preferred Payment Method:

(If grant is awarded.)

- ☐ Check Mailed ☐ Check Picked Up
☒ Electronic File Transfer

Make Check Payable to: *

SAFE Family Justice Centers

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

12/10/1998

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

2041277

Attach State of California Entity Status Letter: *

To find State of California Entity Status Letter,

SAFE FJC_FTB Status Letter 06.26.pdf

392.55KB

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

IRS Employer Identification Number (EIN): *

911962947

Attach IRS Tax Exempt Determination Letter: *

To find IRS Tax Exempt Determination Letter,

5013c Letter.pdf

640.19KB

click the link below:

<https://apps.irs.gov/app/eos/>

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,

Certificate of Status_1780023506779.pdf

292.52KB

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990*

You might find IRS Form 990

990 1st page.pdf

96.2KB

on the link below:

(990, 990-EZ, 990-PF, 990-T)

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☐ Yes ☒ No

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☒ Executive Committee ☒ Board of Directors ☒ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

SAFE Family Justice Centers operates a co-located, multidisciplinary service model designed to reduce barriers for survivors of violence and abuse. At our Temecula Family Justice Center, survivors can access multiple services in one location, including victim advocacy, restraining order assistance, counseling, law enforcement partnerships, child and youth services, legal resources, and connections to community-based support programs. By bringing partner agencies together under one roof, we reduce the need for survivors to navigate multiple systems, repeat their traumatic experiences, or travel to numerous locations to receive help. Our goal is to provide coordinated, trauma-informed services that increase safety, improve outcomes, and help individuals and families move from crisis toward long-term stability and healing.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☒ Yes ☐ No

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT * OR SPONSORSHIP	AMOUNT: *	MONTH + YEAR FUNDING RECEIVED *	NAME OF CITY GRANT OR SPONSORSHIP
Sponsorship of programming at Mary Phillips Senior Center	\$22,050.00	March 26, 2026	Mary Phillips Senior Center Rental Fees

Project/Program Description

Project/Program Title: Temecula SAFE & Healthy Families

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

The requested funding will support SAFE Family Justice Centers' Temecula SAFE & Healthy Families Program, which provides immediate assistance and support to Temecula residents experiencing domestic violence, sexual assault, child abuse, elder abuse, human trafficking, and other forms of victimization. Funding will be used to address urgent safety and stabilization needs through emergency hotel assistance and flexible victim support vouchers, while also enhancing the trauma-informed environment at SAFE FJC's Temecula location.

As demand for services continues to increase, SAFE FJC has converted a former storage area into a dedicated intake room to accommodate a growing number of walk-in clients seeking assistance. Grant funding will help create a welcoming, trauma-informed space where residents can safely disclose victimization, receive crisis intervention, and access coordinated services. Together, these resources will improve access to safety, reduce barriers to services, support victims in crisis, and strengthen outcomes for Temecula residents and their families.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

Emergency Assistance (\$6,000)

- Emergency hotel stays for Temecula residents fleeing violence or abuse (\$2,500)
- Victim assistance vouchers for transportation, food, clothing, hygiene items, replacement documents, safety-related needs, and other stabilization expenses (\$3,500)

Trauma-Informed Facility Improvements (\$4,000)

- Comfortable trauma-informed seating for intake and lobby areas
- Side tables and functional furnishings for client meeting spaces
- Area rugs and soft furnishings to create a welcoming environment
- Calming artwork and décor
- Privacy and sound-reduction enhancements for intake conversations
- Storage and organizational furnishings to support efficient service delivery

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

The requested funding will directly benefit Temecula residents who are experiencing violence, abuse, trauma, or crisis by providing immediate access to safety, stabilization, and supportive services. Emergency hotel assistance will help individuals and families fleeing dangerous situations secure temporary shelter when no other safe options are available. Victim assistance vouchers will address urgent needs such as transportation, food, clothing, hygiene items, and other expenses that often create barriers to safety, employment, court participation, and ongoing engagement in services.

Additionally, funding will support improvements to SAFE Family Justice Centers' Temecula intake and reception areas, creating a more welcoming and trauma-informed environment for residents seeking help. As the number of walk-in clients has increased, SAFE FJC recently converted a former storage space into a dedicated intake room to better serve community members in crisis. Enhancing this space will help reduce anxiety, increase comfort, and promote meaningful engagement with services during what is often one of the most difficult moments in a person's life.

By investing in these resources, the City of Temecula will help ensure that residents have access to immediate safety, critical support services, and a compassionate environment that promotes healing, stability, and long-term well-being. The funding will contribute to stronger families, safer neighborhoods, and a healthier community overall.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

200

*

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

15

*

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

City of Temecula grant funding will be used to purchase emergency hotel stays for Temecula residents fleeing violence or abuse; victim assistance vouchers for transportation, food, clothing, hygiene items, replacement documents, and other immediate stabilization needs; and trauma-informed furnishings and equipment for SAFE Family Justice Centers' Temecula intake and reception areas, including seating, tables, décor, child-friendly furnishings, privacy enhancements, and other items that create a safe and welcoming environment for residents seeking services.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$2,500.00
Other grants or funding already awarded for Project/Program, if any Community Contributions	* \$3,000.00
In-Kind match amount or volunteer credit hours estimated amount	* \$16,800.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
Trauma-Informed Facility Improvements	\$4,000.00
Facilities/Rent/Insurance *	*
N/A	\$0.00
Supplies *	*
Vouchers for Victims (purchased locally when possible)	\$3,500.00
Services *	*
Hotel Stays for Victims	\$2,500.00
Food *	*
N/A	\$0.00
Other (i.e. Informational Outreach, etc) *	*
N/A	\$0.00
Staffing Expense	*
	\$59,462.00
TOTAL REVENUE:	TOTAL EXPENSES
\$32,300.00	\$10,000.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

SAFE Family Justice Centers

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Marshall Hamilton

President/Authorized Officer Title: *

Executive Director

E-mail: *

marshallh@safefjc.org

Phone: *

[REDACTED]

President/Authorized Officer Signature *



Submission Date:

2026-06-15 02:37:00 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

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

DEPARTMENT OF THE TREASURY

Date: **DEC 30 2003**

SAFE ALTERNATIVES FOR EVERYONE INC
30520 RANCHO CALIFORNIA RD 107
TEMECULA, CA 92591-0000

Employer Identification Number:
91-1962947
DLN:
17053291735043
Contact Person:
KAREN CHAO ID# 31003
Contact Telephone Number:
(877) 829-5500
Public Charity Status:
170(b)(1)(A)(vi)

Dear Applicant:

Our letter dated May 1999, stated you would be exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, and you would be treated as a public charity during an advance ruling period.

Based on our records and on the information you submitted, we are pleased to confirm that you are exempt under section 501(c)(3) of the Code, and you are classified as a public charity under the Code section listed in the heading of this letter.

Publication 557, Tax-Exempt Status for Your Organization, provides detailed information about your rights and responsibilities as an exempt organization. You may request a copy by calling the toll-free number for forms, (800) 829-3676. Information is also available on our Internet Web Site at www.irs.gov.

If you have general questions about exempt organizations, please call our toll-free number shown in the heading between 8:00 a.m. - 6:30 p.m. Eastern time.

Please keep this letter in your permanent records.

Sincerely yours,



Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements

Letter 1050 (DO/CG)

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

DEPARTMENT OF THE TREASURY

Date:

Employer Identification Number:
91-1962947

DLN:

17053120023019

SAFE ALTERNATIVES FOR EVERYONE INC
C/O ALICEN WONG
PO BOX 1070
MURRIETA, CA 92564

Contact Person:

REBECCA S BOWDEN

ID# 31183

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

September 30

Foundation Status Classification:

509(a)(1)

Advance Ruling Period Begins:

December 10, 1998

Advance Ruling Period Ends:

September 30, 2003

Addendum Applies:

No

Dear Applicant:

Based on information you supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably expect to be a publicly supported organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, during an advance ruling period you will be treated as a publicly supported organization, and not as a private foundation. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must send us the information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, we will classify you as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, we will classify you as a private foundation for future periods. Also, if we classify you as a private foundation, we will treat you as a private foundation from your beginning date for purposes of section 507(d) and 4940.

Grantors and contributors may rely on our determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you send us the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until we make a final determination of your foundation status.

If we publish a notice in the Internal Revenue Bulletin stating that we



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/14/2026

ESL ID: 7362284848

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 2041277

Entity Name: SAFE FAMILY JUSTICE CENTERS

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: ftb.ca.gov
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



Secretary of State

Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: SAFE FAMILY JUSTICE CENTERS
Entity No.: 2041277
Registration Date: 12/10/1998
Entity Type: Nonprofit Corporation - CA - Public Benefit
Formed In: CALIFORNIA
Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 28, 2026.

SHIRLEY N. WEBER, PH.D.
Secretary of State

Certificate No.: 463550824

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at bizfileOnline.sos.ca.gov.

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California, to engage in, carry on or conduct in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California, nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.

BUSINESS NAME: SAFE Family Justice Centers

BUSINESS LOCATION: 28910 Pujol St, Temecula, CA 92590

BUSINESS OWNER: Dennis Vrooman
Adriana Moreno
SAFE FAMILY JUSTICE CENTERS
28910 PUJOL ST
TEMECULA, CA 92590

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

DESCRIPTION: Non-Profit Organization

Business License Number: 056943

License Fee: \$4.00

Effective Date: November 17, 2025

Expiration Date: January 31, 2027

Fees paid in accordance with City Ordinance

NOT TRANSFERABLE and NON-REFUNDABLE

TO BE POSTED IN A CONSPICUOUS PLACE

FY 26/27 Community Service Funding (CSF)
Grant Application

34

SKYROCKET
PEDIATRIC THERAPY FOUNDATION



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Skyrocket Pediatric Therapy
Foundation

Year Organization Founded: *

2021

Website:

<https://www.skyrockettherapy.org/>

Mailing Address: *

[REDACTED] Temecula,
CA 92592

Number of Paid Staff: *

7

Number of Volunteers: *

7

Contact Name: *

Rachel Troccoli, M.A., CCC-SLP

Contact Title: *

Founder & Executive Director

Contact Email: *

rachel@skyrockettherapy.org

Contact Phone: *

909-475-7002

Alternate Contact Name:

Lizzie Buck

Alternate Contact Email:

grants@skyrockettherapy.org

Alternate Contact Phone:

[REDACTED]

**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Inland Empire and Orange County

Business License No. *

054962

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

Skyrocket-Temecula_Business_License 2026-202
7.pdf

419.49KB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$5,300.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Stellar Start Program: Equipping Families to Fuel Early Learning and Growth

Start Date: *

2026-09-01

End Date: *

2027-06-30

Physical Address of Project/Program *

We will hold our workshops at an accessible venue, such as Ronald J. Parks Community Recreation Center or a local library.

Preferred Payment Method:

(If grant is awarded.)

- ☒ Check Mailed ☐ Check Picked Up
☐ Electronic File Transfer

Make Check Payable to: *

Rachel Troccoli

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

08/04/2021

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

4773558

Attach State of California Entity Status Letter: *

To find State of California Entity Status Letter,

Skyrocket-Entity_Status_Letter-6.2026.pdf

392.59KB

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

IRS Employer Identification Number (EIN): *

87-2744121

Attach IRS Tax Exempt Determination Letter: *

To find IRS Tax Exempt Determination Letter,

Skyrocket-IRS_Tax_Exempt_Letter.pdf

674.43KB

click the link below:

<https://apps.irs.gov/app/eos/>

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,

Skyrocket-Nonprofit_Statement_of_Information.pdf

124.52KB

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☒ Detailed info about your charity found on the State Registry Search Tool (link below)

You might find IRS Form 990

on the link below:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

State Registry Search Tool:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Attach First Page of Most Recent Form 990*

Skyrocket-2025_Tax_Return.pdf

3.66MB

(990, 990-EZ, 990-PF, 990-T)

Attach State Registry Document/Info*

Skyrocket-State_Registry_Form_6.15.26.pdf

176.42KB

Application Authorization

Has the organization or any members of the **Board of Directors** of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a **Temecula City Council Member** during the past 12 months? *

☐ Yes ☒ No

Is a **Temecula City Council Member** a member of the **Board of Directors** or an **Officer** of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☐ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

The mission of Skyrocket Pediatric Therapy Foundation is to support children with developmental disabilities by sponsoring pediatric therapy clinics, including clinics providing speech-language therapy, occupational therapy, and physical therapy and to provide educational and social programs for children with developmental disabilities and their families. Our vision is to create a world where children of all abilities can participate fully in the community.

Founded by pediatric therapists, our organization 1) builds awareness, skills, and capabilities of the families and community to access developmental supports for kids; 2) provides high-quality developmental services as well as comprehensive one-on-one case management to families; and 3) provides financial assistance to families of children with developmental disabilities who have barriers to accessing care. We provide these supports to children and their families in Riverside and Orange Counties.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☒ Yes ☐ No

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT * OR SPONSORSHIP	AMOUNT: *	MONTH + YEAR FUNDING RECEIVED *	NAME OF CITY GRANT OR SPONSORSHIP
Rocket to Success: Developmental Screenings	\$2,500.00	December 2024	Temecula Community Service Funding
Mission Independence: OT Services for Temecula Kids	\$2,500.00	December 2024	Temecula Community Service Funding

Project/Program Description

Project/Program Title: Stellar Start Program: Equipping Families to Fuel Early Learning and Growth

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT.*

With your grant, we will develop and deliver a set of family education workshops that equip families to navigate special education services, support their children's development, and engage more confidently in the community. Locally, there is a scarcity of available providers who deliver developmental services, such as speech, occupational, and behavioral therapy. Long waitlists or inability to locate therapy services means that children and their families cannot access critical earlier intervention—delays that can have lifelong impact on children.

A grant of \$5,300 will bridge critical service gaps for Temecula families who have children with developmental differences. Skyrocket's proposed project will focus on parent and family education and training to bridge the knowledge and skill gap that many families face. We plan to develop and offer a series of workshops designed for families who are waiting to receive therapy services for their children and who are looking for practical tools for their daily lives.

Workshop 1: IEP Orbit — Navigating School District Systems Without Losing Gravity

This workshop helps parents walk into Individualized Education Program (IEP) meetings as confident, equal partners. An educational advocate explains complex school district guidelines and terminology while a speech-language pathologist (SLP) and occupational therapist (OT) demonstrate how to identify clear, data-driven developmental goals. Additionally, a Licensed Marriage and Family Therapist (LMFT) provides essential psychological grounding techniques and communication scripts to help caregivers manage the emotional vulnerability of these meetings.

Workshop 2: First Signals — Decoding and Powering Up Your Late Talker

Led by an SLP, this session targets early communication milestones to help families catch and address speech-language delays in toddlers. Parents learn to differentiate between a child's understanding of language versus their spoken words while receiving practical strategies to encourage talking during ordinary daily routines and transform passive screen time into language-rich moments. The class also addresses modern digital challenges by providing realistic boundaries to transform passive screen time into interactive, language-rich moments.

Workshop 3: Atmospheric Pressure — Decoding Sensory Processing and Household Meltdowns

An OT and a Board Certified Behavioral Analyst (BCBA) team up to help parents uncover what is driving intense childhood emotional outbursts at home. Parents walk away with tools to distinguish neurological sensory overload or testing behavioral boundaries and co-regulation strategies to calm a fight-or-flight crisis.

Workshop 4: The Public Spacewalk — Behavioral Strategies for Successful Community Outings

This workshop gives families a roadmap to confidently leave the house. A BCBA teaches parents how to set up clear boundaries and positive reinforcement structures, while an OT helps families scan public spaces for intense sensory triggers.

Workshop 5: Preserving the Crew — Protecting Parent Mental Health and Sibling Dynamics

Dedicated entirely to the family ecosystem, this compassionate session led by an LMFT addresses chronic caregiver burnout and household relationship health. The curriculum normalizes the unique emotional tolls of parenting a high-support child and offers practical communication frameworks to help couples stay unified. Finally, the workshop provides actionable strategies to nurture neurotypical siblings, reduce household isolation, and connect families with local county respite resources.

We plan to host 20-25 Temecula parents and caregivers at each workshop. We anticipate that some families may attend multiple workshops, while others may only attend one. Our estimate is that we can reach approximately 75 unique, or unduplicated, attendees.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

If awarded funding from the City of Temecula, Skyrocket would utilize the funds toward the following costs:

1. Workshop Venue: Hourly rental for a local venue (e.g., room rental via Temecula Community Services Department or local facilities) and liability insurance as required by city-owned venues.
2. Family Toolkits: Individualized sensory tools or developmental aids given to each attending family to implement the workshop's strategies at home (e.g., visual schedule board components, calming sensory items, or specific developmental strategy cards). This includes workbook and reference printing costs to provide high-quality, bound printouts of the presentation slides, actionable home strategy guides, and local Temecula resource directory packets.
3. On-Site Hospitality & Environment: This includes a) water, coffee, and healthy snacks/light refreshments for 20-25 participants and b) tabletop signs, directional posters for the venue, and participant name tags to facilitate peer connections.
4. Marketing & Outreach: This includes funded local social media push restricted strictly to the Temecula geographical area to reach parents and caregivers and informational flyers to distribute directly to local pediatricians, preschools, and the Temecula Public Library.

Skyrocket will fund the cost of expert facilitation from a local Speech-Language Pathologist, Occupational Therapist, Licensed Marriage and Family Therapist, Board Certified Behavioral Analyst, and educational advocate.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

In California in 2022, 39% of families reported difficulties getting referrals for their children. We see this playing out in Temecula as well. When surveying local pediatric therapy clinics, a majority have waitlists that are 6-9 months long, or they have closed their waitlists due to the shortage of providers. Furthermore, even if a child is receiving services, many parents want more information about how to implement structure or activities at home that further support their child's growth and learning.

Skyrocket's proposed project "Stellar Start Program" will support local families of children with developmental differences. Emphasizing foundational information and practical strategies intended to be applied in the home and community, our workshops will equip parents and caregivers with tools and empower them to make small, achievable changes that could have significant positive impact on their child and their family. Additionally, they will walk away with practical tools to advocate for their child in the school and community. Families will also be encouraged to ask questions and initiate discussions, utilizing the knowledge of the expert therapists and also the experiences of the other families. In this way we aim to make the information easily accessible and relatable.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

75

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

4

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

Skyrocket Pediatric Therapy Foundation will host a workshop series estimated to reach at least 75 unduplicated parents and caregivers of children with developmental differences. Funding from the City of Temecula will cover non-personnel costs including facilities costs, materials, marketing, and family toolkit costs. With this grant, families will gain tools to navigate special education services, support their children's development, and engage more confidently in the community.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$5,300.00
Amount contributed to the Project/Program by the Applicant Organization	* \$5,175.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$0.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment * n/a	EXPENSES * \$0.00
Facilities/Rent/Insurance * This includes a) hourly rental rate for a local venue (e.g., room rental via Temecula Community Services Department or local facilities) for three hours (3 hours x \$125/hour x 5 workshops) and b) Liability Insurance/Permitting: One-time special event rider required by a city-owned venue (\$100 x 5 workshops).	* \$2,375.00
Supplies * This includes the costs to create and provide StrategyToolkits given to each attending family to implement the workshop's strategies at home (e.g., visual schedule board components, calming sensory items, or specific developmental strategy cards) along with printing costs for printouts of the presentation slides, actionable home strategy guides, and local Temecula resource directory packets. Costs calculated at \$19 (\$15 per toolkit and \$4 per printout) x 25 families x 5 workshops.	* \$2,375.00
Services * n/a	* \$0.00
Food * Coffee, water, and healthy snacks/light refreshments for 20–25 participants at a cost of \$60 per workshop.	* \$300.00
Other (i.e. Informational Outreach, etc) *	* \$250.00

An estimated cost of \$50 per workshop (\$50 x 5 workshops) includes a) tabletop signs, directional posters for the venue, and participant name tags to facilitate peer connections; b) targeted digital outreach including local social media push restricted strictly to the Temecula geographical area to reach parent groups; and c) informational flyers to distribute directly to local pediatricians, preschools, and the Temecula Public Library.

Staffing Expense

*
\$5,175.00

TOTAL REVENUE:

\$10,475.00

TOTAL EXPENSES

\$5,300.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Skyrocket Pediatric Therapy Foundation

Requested Amount:

\$5,300.00

President/Authorized Officer Name: *

Rachel Troccoli

President/Authorized Officer Title: *

Founder and Executive Director

E-mail: *

rachel@skyrockettherapy.org

Phone: *

909-475-7002

President/Authorized Officer Signature *



Submission Date:

2026-06-29 09:12:38 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

Lizzie Buck, Grants Writer, Skyrocket Pediatric Therapy Foundation

Name, Title, & Organization

If you have any questions, please contact: Betsy.Lowrey@TemeculaCA.gov (951) 693-3959 or Stacey.Brown@TemeculaCA.gov (951) 694-6413



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

SKYROCKET PEDIATRIC THERAPY FOUNDATION
[REDACTED]
TEMECULA, CA 92592

Date:
02/08/2022
Employer ID number:
87-2744121
Person to contact:
Name: Customer Service
ID number: 31954
Telephone: 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 04, 2021
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053716002031

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. 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,

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/12/2026

ESL ID: 3189519409

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 4773558

Entity Name: SKYROCKET PEDIATRIC THERAPY FOUNDATION

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20251144388



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20251144388

Date Filed: 5/25/2025

B3718-1795 05/25/2025 7:28 PM Received by California Secretary of State

Entity Details			
Corporation Name	SKYROCKET PEDIATRIC THERAPY FOUNDATION		
Entity No.	4773558		
Formed In	CALIFORNIA		
Street Address of California Principal Office of Corporation			
Street Address of California Office	██████████ TEMECULA, CA 92592-3834		
Mailing Address of Corporation			
Mailing Address	██████████ TEMECULA, CA 92592		
Attention			
Officers			
Officer Name	Officer Address	Position(s)	
Katie Oien	██████████ NEWPORT BEACH, CA 92663	Secretary	
Christopher Chisom	██████████ TERRACE PARK, OH 45174	Chief Financial Officer	
RACHEL TROCCOLI	██████████ TEMECULA, CA 92592	Chief Executive Officer	
Additional Officers			
Officer Name	Officer Address	Position	Stated Position
None Entered			
Agent for Service of Process			
Agent Name	RACHEL TROCCOLI		
Agent Address	██████████ TEMECULA, CA 92592		
Email Notifications			
Opt-in Email Notifications	Yes, I opt-in to receive entity notifications via email.		
Electronic Signature			
☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.			
Rachel Troccoli		05/25/2025	
Signature		Date	

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California, to engage in, carry on or conduct in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California, nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.

BUSINESS NAME: Skyrocket Pediatric Therapy Foundation

BUSINESS LOCATION: [REDACTED], Temecula, CA 92592

BUSINESS OWNER: Rachel Troccoli
Katie Olen

SKYROCKET PEDIATRIC THERAPY FOUNDATION
SKYROCKET PEDIATRIC THERAPY FOUNDATION

[REDACTED]
TEMECULA, CA 92592

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

DESCRIPTION: Non-Profit Organization

Business License Number: 054962

License Fee: \$4.00

Effective Date: December 29, 2025

Expiration Date: January 31, 2027

Fees paid in accordance with City Ordinance

TO BE POSTED IN A CONSPICUOUS PLACE

NOT TRANSFERABLE and NON-REFUNDABLE

FY 26/27 Community Service Funding (CSF)
Grant Application

35

SPECIAL OLYMPICS
SOUTHERN CALIFORNIA



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Special Olympics Southern
California - Inland Empire

Year Organization Founded: *

1969

Website:

www.sosc.org/inlandempire

Mailing Address: *

41880 Kalmia Street, #140
Murrieta, CA 92562

Number of Paid Staff: *

6

Number of Volunteers: *

250

Contact Name: *

Jennifer Evans

Contact Title: *

Director of Development, Region 3

Contact Email: *

jevans@sosc.org

Contact Phone: *

[REDACTED]

Alternate Contact Name:

Kevin Nguyen

Alternate Contact Email:

grants@sosc.org

Alternate Contact Phone:

[REDACTED]

**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Riverside and San Bernadino Counties

Business License No. *

062212

Geographic Area(s) the Project/Program Serves: *

City of Temecula and surrounding communities

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

Temecula Business License.png

44.75KB

CSF Grant Application Form
Version 1.0 (2019)
This form is for informational purposes only.
It is not a contract and does not constitute an offer.
It is subject to change without notice.
For more information, please contact the City of Temecula.
City of Temecula, CA

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Special Olympics Southern California - Temecula

Start Date: *

2026-07-01

End Date: *

2027-06-30

Physical Address of Project/Program *

Various locations in Temecula

Preferred Payment Method:

(If grant is awarded.)

☒ Check Mailed ☐ Check Picked Up

☐ Electronic File Transfer

Make Check Payable to: *

Special Olympics Southern California

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

05/15/1995

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

1898240

To find State of California Entity Status Letter,

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

Attach State of California Entity Status Letter: *

2026 CaliforniaEntity Status Letter.pdf

392.58KB

IRS Employer Identification Number (EIN): *

95-4538450

To find IRS Tax Exempt Determination Letter,

click the link below:

<https://apps.irs.gov/app/eos/>

Attach IRS Tax Exempt Determination Letter: *

501c3 Affirmation Letter 2025.pdf

77.87KB

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

To find Nonprofit Statement of Information,

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Attach Nonprofit Statement of Information: *

SOSC_Statement of Information.pdf

200.29KB

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☒ Detailed info about your charity found on the State Registry Search Tool (link below)

You might find IRS Form 990

on the link below:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

State Registry Search Tool:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Attach First Page of Most Recent Form 990*

SPECIAL OLYMPICS SOUTHERN CA 2024 FORM 990 Page 1.pdf

147.64KB

(990, 990-EZ, 990-PF, 990-T)

Attach State Registry Document/Info*

CA DOJ Registry Details - SOSC 2026.pdf

732.68KB

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☐ Yes ☒ No

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☒ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

The mission of Special Olympics Southern California is to provide year-round sports training and athletic competitions in a variety of Olympic-type sports for children and adults with intellectual disabilities, giving them continuing opportunities to develop physical fitness, demonstrate courage, experience joy, and participate in sharing gifts, skills and friendship with families, other Special Olympics athletes and the community.

Special Olympics is founded on the belief that all persons with intellectual disabilities can, with proper instruction and encouragement, learn, enjoy, and benefit from participation in individual and team sports. Benefits include physical fitness, heightened self-esteem, and increased independence. In addition, we believe sports can serve as a unifying force to achieve acceptance and inclusion of people with intellectual disabilities within their communities.

Our goal is to help individuals with intellectual disabilities participate as productive and respected members of society by offering them fair opportunities to develop and compete, and by increasing the public's awareness of their capabilities and needs.

The City of Temecula is a valued collaborative partner, promoting our movement of inclusion and acceptance for all in the community as well as providing grant funding to support our programs since 2010. We look forward to continuing this partnership and are grateful for the City's support.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Project/Program Description

Project/Program Title: Special Olympics Southern California - Temecula

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

Funding from the City of Temecula will support our Community Sports Programming in Temecula Valley. Sports are the foundation of our work. We offer individuals with intellectual disabilities (ages 8+) the opportunity to train and compete in Olympic-style sports with weekly sports instruction and training from volunteer coaches. Teams attend local and regional competitions. Some may even compete nationally and internationally depending on how they perform.

Our sports are offered free of charge for our athletes and families with the support of training volunteers and funding from community champions like the City of Temecula and the Riverside County Sheriff's Department.

Sports offered will include Golf, Soccer, Softball, and Tennis in the Fall and Athletics (Track & Field), Basketball, Bocce, and Swimming in the Spring.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

The grant funding will support direct program expenses and growth in Temecula, including athlete uniforms, equipment, and facility rental fees.

Athlete Uniforms – are essential so that all of our athletes are united and feel part of a team at each competition. One of our goals is to increase the number of participants from the past year, so we have budgeted accordingly.

Facilities – Although training and competitions are hosted at facilities for in-kind or discounted rates, it remains one of our highest expenses.

Equipment – There is constant wear and tear on sports equipment after each season. New equipment must be purchased every season to ensure our athletes' safety.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

Special Olympics serves children and adults with intellectual disabilities living in or within 10 miles of the City of Temecula. Over 80% of our athletes are classified as low-income. SOSOC is the only organization in Southern California that provides sports training and supplemental health and fitness education for people with intellectual disabilities, of all ages and ability levels, at no cost to participants. The overwhelming majority of our athletes could not afford the costs associated with participation in sports program if fees were charged.

Special Olympics is able to provide our programs at no cost through the support of sports coaches and

volunteers from the community. Special Olympics has partnered with the City of Temecula for over fifteen years to serve individuals with intellectual disabilities. Residents volunteer to coach and train children and adults with intellectual disabilities. The community raises funds and awareness through the Law Enforcement Torch Run, local businesses sponsoring events and civic groups staffing competitions.

Although physical fitness is the most direct need addressed by SOSC, our programs also create communities of support and inclusion by bringing together athletes of all abilities to play together. On-going training in sports teaches more than physical fitness. Athletes learn time management, medication compliance, healthy living habits, responsibility, adaptability, and teamwork. All these skills increase a person's ability to maintain employment, live independently, and be a productive member of society regardless of whether they have a disability. For some athletes, Special Olympics is their only opportunity to interact in an accepting and inclusive environment.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

120

*

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

50

*

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

The City of Temecula Community Service Funding will be used to support Special Olympics Temecula Fall and Spring Seasons for individuals with intellectual disabilities. Funds will be used for training facilities and associated fees, to replace worn uniforms and purchase needed sports equipment. Participation in Special Olympics programming improves health and well-being through physical activity and social connection.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$15,735.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$0.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
Sports Equipment for athletics, basketball, golf, flag football, soccer, softball, swimming, and tennis	\$1,660.00
Facilities/Rent/Insurance *	*
Training Facilities Spring and Fall Sports	\$6,545.00
Supplies *	*
Athlete Uniforms	\$4,880.00
Services *	*
Lifeguards for Swimming Training	\$2,500.00
Food *	*
Healthy Meals for Athletes and Volunteers at Local Competitions	\$1,400.00
Other (i.e. Informational Outreach, etc) *	*
Championship Events Transportation/Mileage, Games Registration Fees	\$8,750.00
Staffing Expense	*
	\$0.00
TOTAL REVENUE:	TOTAL EXPENSES
\$25,735.00	\$25,735.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
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- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
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- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Special Olympics Southern California - Inland Empire

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Janet Rose

President/Authorized Officer Title: *

Chief Financial Officer

E-mail: *

jrose@sosc.org

Phone: *



President/Authorized Officer Signature *

Janet Rose

Submission Date:

2026-06-24 12:46:12 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

President/Officer Confirmation: *

☒ Verified and Confirmed

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

Kevin Nguyen, Grants Manager, Special Olympics Southern California

Name, Title, & Organization

If you have any questions, please contact: Betsy.Lowrey@TemeculaCA.gov (951) 693-3959 or Stacey.Brown@TemeculaCA.gov (951) 694-6413

PHILADELPHIA PA 19255

In reply refer to: 3552861031
Jan. 13, 2025 LTR 4168C 0
95-4538450 000000 00
00014268
BODC: TE




SPECIAL OLYMPICS SOUTHERN
CALIFORNIA INC
1600 FORBES WAY STE 200
LONG BEACH CA 90810-1833

023538

Employer ID number: 95-4538450
Form 990 required: YES

Dear Taxpayer:

We're responding to your request dated Jan. 02, 2025, about your tax-exempt status.

We issued you a determination letter in May 1996, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period:

- Form 990, Return of Organization Exempt From Income Tax
- Form 990EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990-EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m.,



Department of the Treasury
Internal Revenue Service

PHILADELPHIA PA 19255

023538.641727.377085.23530 1 AB 0.593 532



SPECIAL OLYMPICS SOUTHERN
CALIFORNIA INC
1600 FORBES WAY STE 200
LONG BEACH CA 90810-1833

023538

CUT OUT AND RETURN THE VOUCHER AT THE BOTTOM OF THIS PAGE IF YOU ARE MAKING A PAYMENT.



The IRS address must appear in the window.

3552861031

BODCD-

Use for payments

Letter Number: LTR4168C

Letter Date : 2025-01-13

Tax Period : 000000



INTERNAL REVENUE SERVICE

KANSAS CITY MO 64999-0202



SPECIAL OLYMPICS SOUTHERN

CALIFORNIA INC

1600 FORBES WAY STE 200

LONG BEACH CA 90810-1833

954538450 FD SPEC 00 2 000000 670 000000000000



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 1/5/2026

ESL ID: 2632052503

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 1898240

Entity Name: SPECIAL OLYMPICS SOUTHERN CALIFORNIA, INC.

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: ftb.ca.gov
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



California Secretary of State Electronic Filing

FILED

Secretary of State
State of California

Corporation - Statement of Information

Entity Name: SPECIAL OLYMPICS SOUTHERN
CALIFORNIA, INC.

Entity (File) Number: C1898240

File Date: 01/25/2021

Entity Type: Corporation

Jurisdiction: CALIFORNIA

Document ID: GN95900

Detailed Filing Information

1. Entity Name: SPECIAL OLYMPICS SOUTHERN
CALIFORNIA, INC.
2. Business Addresses:
 - a. Street Address of Principal
Office in California: 1600 Forbes Way, Suite 200
Long Beach, California 90810
United States of America
 - b. Mailing Address: 1600 Forbes Way, Suite 200
Long Beach, California 90810
United States of America
3. Officers:
 - a. Chief Executive Officer: Calvin Lyons
1600 Forbes Way, Suite 200
Long Beach, California 90810
United States of America
 - b. Secretary: William Vogt
1600 Forbes Way, Suite 200
Long Beach, California 90810
United States of America

Document ID: GN95900



California Secretary of State Electronic Filing

Officers (Cont'd):

c. Chief Financial Officer:

Janet Rose
1600 Forbes Way, Suite 200
Long Beach, California 90810
United States of America

4. Agent for Service of Process:

Janet Rose
1600 Forbes Way, Suite 200
Long Beach, California 90810
United States of America

By signing this document, I certify that the information is true and correct and that I am authorized by California law to sign.

Electronic Signature: Janet Rose

Use bizfile.sos.ca.gov for online filings, searches, business records, and resources.

Document ID: GN95900

FY 26/27 Community Service Funding (CSF)
Grant Application

36

SPERO VINEYARDS



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

SPERO VINEYARDS

Year Organization Founded: *

2014

Website:

WWW.SPEROVINEYARDS.ORG

Mailing Address: *

2076 LINCOLN AVE
PASADENA, CA 91103

Number of Paid Staff: *

1

Number of Volunteers: *

40

Contact Name: *

MARK WOODSMALL

Contact Title: *

PRESIDENT

Contact Email: *

LAM@WOODSMALLLAWGROUP.COM

Contact Phone: *

[REDACTED]

Alternate Contact Name:

Alternate Contact Email:

Alternate Contact Phone:

Does the nonprofit have a current City of Temecula Business License?

☐ Yes ☒ No

*

Geographic Area(s) the Organization Serves: *

TEMECULA

A current City of Temecula Business License may be required to submit prior to fund disbursement.

*

Geographic Area(s) the Project/Program Serves: *

TEMECULA

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

☒ Understand

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Roots of Resilience: Sustainable Agriculture Workforce Training for Adults with Disabilities

Start Date: *

2026-07-01

End Date: *

2027-06-30

Physical Address of Project/Program *

32250 VISTA DEL MONTE TEMECULA, CA 92591

Preferred Payment Method:

(If grant is awarded.)

☒ Check Mailed ☐ Check Picked Up

☐ Electronic File Transfer

Make Check Payable to: *

SPERO VINEYARDS, INC

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

02/14/2014

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

3647270

To find State of California Entity Status Letter,

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

Attach State of California Entity Status Letter: *

Spero Vineyards Entity Status Letter.pdf

392.56KB

IRS Employer Identification Number (EIN): *

46-5288314

To find IRS Tax Exempt Determination Letter,

click the link below:

<https://apps.irs.gov/app/eos/>

Attach IRS Tax Exempt Determination Letter: *

IRS Determination Letter.pdf

637.21KB

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

To find Nonprofit Statement of Information,

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Attach Nonprofit Statement of Information: *

Spero Vineyards SOI.pdf

124.38KB

Provide further verification as follows: *

(one required, both preferred)

☐ First Page of most recent IRS Form 990

☒ Detailed info about your charity found on the State Registry Search Tool (link below)

State Registry Search Tool:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Attach State Registry Document/Info *

Details.pdf

212.72KB

Mission Statement

Briefly describe the nonprofit organization’s mission/goals and objectives: *

Spero Vineyards is a nonprofit organization dedicated to empowering young adults and adults with disabilities through workforce development, education, and hands-on training in sustainable agriculture, viticulture, and regenerative farming practices. Our mission is to create meaningful pathways to employment, independence, and community inclusion for individuals with disabilities while promoting environmental stewardship and agricultural sustainability.

Through partnerships with local schools, regional centers, colleges, agricultural organizations, and community employers, Spero Vineyards provides real-world vocational experiences that build confidence, job readiness, and transferable employment skills. We strive to bridge the gap between school transition services and long-term workforce opportunities by equipping participants with practical experience, mentorship, and support in inclusive, community-based environments.

Our goals are to improve quality of life, expand employment opportunities, foster self-sufficiency, and demonstrate the valuable contributions individuals with disabilities can make to the workforce and broader community.

UPON REQUEST, COPIES OF THE ORGANIZATION’S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA’S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*
☒ Understand

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☒ Yes ☐ No

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT * OR SPONSORSHIP	AMOUNT: *	MONTH + YEAR FUNDING RECEIVED *	NAME OF CITY GRANT OR SPONSORSHIP
Vines of Opportunity: Empowering Through Viticulture	\$5,000.00	11/2025	CSF Grant
Cultivating Knowledge: Student-Assisted Research on Water Use, Stock Development, and Fruit Composition	\$5,000.00	01/2025	CSF Grant

Project/Program Description

Project/Program Title: Roots of Resilience: Sustainable Agriculture Workforce Training for Adults with Disabilities

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

Spero Vineyards seeks Community Service Funding support for Roots of Resilience, an innovative workforce development program that equips young adults and adults with disabilities in Temecula with practical job skills through sustainable and regenerative agriculture training.

The program is designed to address a significant employment gap faced by individuals with disabilities while simultaneously supporting environmental stewardship and agricultural sustainability in the Temecula Valley region. Through hands-on training experiences, participants will learn foundational workforce skills within a real-world agricultural setting, with an emphasis on regenerative farming principles and sustainable land management.

Participants will engage in structured, experiential learning focused on soil health, composting, water conservation, vineyard and crop maintenance, biodiversity practices, regenerative growing techniques, harvest preparation, equipment safety, and environmentally responsible agricultural methods. In addition to agricultural instruction, the program will incorporate workplace readiness skills including teamwork, communication, time management, responsibility, and task completion.

Spero Vineyards will collaborate with local schools, regional centers, disability service providers, agricultural partners, and wineries to provide pathways for long-term employment and vocational advancement. Partnerships with local agricultural organizations and wineries will help expose participants to employment opportunities within Temecula's thriving agricultural and hospitality economy.

The program directly supports individuals with disabilities who often face limited post-graduation or adult employment opportunities. By integrating workforce development with sustainability education, Roots of Resilience empowers participants to gain confidence, independence, and transferable job skills while contributing meaningfully to the Temecula community.

Grant funding will enable Spero Vineyards to expand training opportunities, provide adaptive tools and supplies, strengthen accessibility supports, and increase participant capacity to ensure more Temecula residents with disabilities benefit from meaningful vocational experiences.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

If awarded, Community Service Funding will be used to implement and strengthen the Roots of Resilience program through the following investments:

Sustainable Farming Equipment and Adaptive Tools

Grant funds will support the purchase of regenerative agriculture equipment, adaptive gardening tools, irrigation materials, composting systems, raised planting beds, safety gear, and accessibility accommodations. These materials are essential for providing participants with hands-on learning

experiences while ensuring activities remain inclusive and physically accessible for individuals with varying abilities.

Program Supplies and Demonstration Materials

Funding will support seeds, soil amendments, compost materials, cover crop supplies, vineyard and garden maintenance tools, educational materials, and sustainability-focused curriculum resources. These materials allow participants to engage directly in regenerative farming practices and environmental stewardship.

Transportation and Accessibility Support

Many participants face transportation barriers that limit workforce participation. A portion of funding will assist with transportation coordination and accessibility accommodations to ensure consistent participation by Temecula residents with disabilities.

Workforce Readiness and Employer Engagement

Funding will also support employer outreach, vocational workshops, and relationship-building with local farms, vineyards, nurseries, and hospitality partners to create pathways toward future volunteer, internship, and employment opportunities for participants.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*
☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

This program directly benefits Temecula residents by expanding workforce development opportunities for individuals with disabilities while supporting the City's agricultural heritage and sustainability goals.

Temecula residents with disabilities frequently encounter limited employment pathways after leaving school-based transition programs. Roots of Resilience addresses this service gap by providing local, hands-on vocational training that builds independence, confidence, and practical employment skills in an inclusive environment.

The program strengthens Temecula's local workforce by preparing participants for opportunities in agriculture, landscaping, vineyard operations, hospitality, environmental stewardship, and related industries that are central to the regional economy. Participants gain real-world experience while local employers benefit from access to a motivated and trained workforce.

Additionally, the program promotes sustainable and regenerative farming practices that support environmental health and responsible land stewardship in Temecula. By teaching conservation-minded agricultural methods, Spero Vineyards helps foster a stronger, more resilient community while creating opportunities for individuals with disabilities to become active contributors to local economic and community life.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

100

*

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

40

*

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

Spero Vineyards' Roots of Resilience program provides Temecula residents with disabilities hands-on workforce development through sustainable and regenerative agriculture training. Funding supports accessible vocational experiences, environmental stewardship, and employment readiness while strengthening Temecula's agricultural community and expanding inclusive workforce opportunities.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$10,000.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$3,000.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
Adaptive Agricultural Equipment & Irrigation Tools	\$5,500.00
Facilities/Rent/Insurance *	*
Program Site Use, Liability Insurance & Utilities	\$4,000.00
Supplies *	*
Sustainable Farming & Educational Supplies	\$4,500.00
Services *	*
Vocational Training, Accessibility Support & Employer Engagement	\$5,000.00
Food *	*
Participant & Volunteer Meals/Refreshments	\$1,000.00
Other (i.e. Informational Outreach, etc) *	*
Community Outreach & Program Recruitment	\$1,000.00
Staffing Expense	*
	\$2,000.00
TOTAL REVENUE:	TOTAL EXPENSES
\$23,000.00	\$21,000.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

SPERO VINEYARDS

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

MARK WOODSMALL

President/Authorized Officer Title: *

PRESIDENT

E-mail: *

SPEROVINEYARDS@GMAIL.COM

Phone: *

[REDACTED]

President/Authorized Officer Signature *

Mark Woodsmall

Submission Date:

2026-06-02 09:31:40 AM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

SPERO VINEYARDS INC
C/O MARK WOODSMALL
2076 LINCOLN AVENUE
PASADENA, CA 91103

Date:
02/11/2022
Employer ID number:
46-5288314
Person to contact:
Name: Customer Service
ID number: 31954
Telephone: 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:
May 15, 2021
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053742004861

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 retroactive to your date of revocation.

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. 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,

A handwritten signature in cursive script that reads "Stephen A. Martin".

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/2/2026

ESL ID: 7739823846

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 3647270

Entity Name: SPERO VINEYARDS, INC.

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

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Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20260196164

B4357-2874 01/26/2026 10:33 AM Received by California Secretary of State



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20260196164

Date Filed: 1/26/2026

Entity Details			
Corporation Name		SPERO VINEYARDS, INC.	
Entity No.		3647270	
Formed In		CALIFORNIA	
Street Address of California Principal Office of Corporation			
Street Address of California Office		2076 LINCOLN AVE PASADENA, CA 91103	
Mailing Address of Corporation			
Mailing Address		2076 LINCOLN AVE. PASADENA, CA 91103	
Attention			
Officers			
Officer Name		Officer Address	Position(s)
Eva Woodsmall		2076 LINCOLN AVE. Pasadena, CA 91103	Secretary, Chief Financial Officer
MARK EDWARD WOODSMALL		2076 LINCOLN AVE. PASADENA, CA 91103	Chief Executive Officer
☒ The entity's bylaws allow the CEO (President) to be the Secretary or CFO (Treasurer).			
Additional Officers			
Officer Name	Officer Address	Position	Stated Position
None Entered			
Agent for Service of Process			
Agent Name		MARK EDWARD WOODSMALL	
Agent Address		2076 LINCOLN AVE. PASADENA, CA 91103	
Email Notifications			
Opt-in Email Notifications		No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.	
Electronic Signature			
☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.			
MARK WOODSMALL		01/26/2026	
Signature		Date	

FY 26/27 Community Service Funding (CSF)
Grant Application

37

TEMECULA VALLEY ALANO CLUB



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Temecula Valley Alano Club

Year Organization Founded: *

2009

Website:

thetvac.org

Mailing Address: *

27470 Commerce Center Dr
Ste C

Number of Paid Staff: *

0

Number of Volunteers: *

35

Contact Name: *

Melynda Perkosi

Contact Title: *

Treasurer

Contact Email: *

tvacmanager@gmail.com

Contact Phone: *

951-225-8483

Alternate Contact Name:

Eric Gurzi

Alternate Contact Email:

Alternate Contact Phone:



**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Temecula

Business License No. *

034798

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

Business License 2026.heic

1.16MB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$5,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Temecula Valley Alano Club

Start Date: *

2019-01-01

End Date: *

2027-01-01

Physical Address of Project/Program *

27470 Commerce Center Drive #C

Preferred Payment Method:

(If grant is awarded.)

☒ Check Mailed ☐ Check Picked Up

☐ Electronic File Transfer

Make Check Payable to: *

Temecula Valley Alano Club

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

11/15/2010

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☐ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

IRS Employer Identification Number (EIN): *

800488892

Attach IRS Tax Exempt Determination Letter: *

To find IRS Tax Exempt Determination Letter,
click the link below:

<https://apps.irs.gov/app/eos/>

FinalLetter_80-0488892_TEMECULAVALLEYALANOCL
UB_12302017.tif

65.76KB

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,
click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Statement of Information_2026.pdf

123.94KB

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990 *

You might find IRS Form 990

on the link below:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

2026 990EZ.jpg

556.05KB



(990, 990-EZ, 990-PF, 990-T)

Application Authorization

Has the organization or any members of the **Board of Directors** of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a **Temecula City Council Member** during the past 12 months? *

☐ Yes ☒ No

Is a **Temecula City Council Member** a member of the **Board of Directors** or an **Officer** of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☐ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

The Temecula Valley Alano Club is a non profit organization whose purpose is to provide a safe environment for those that have a desire to recover from addiction, alcoholism, codependency and other compulsive behaviors. We are supported through community contributions, club members and fundraisers. Our primary purpose is to help others achieve a new freedom of live.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Project/Program Description

Project/Program Title: Temecula Valley Alano Club

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT.*

The Temecula Valley Alano Club provides guidance and support for those Temecula residents coming out of rehabilitation centers whether it be for drug addiction or alcoholism. We help them to bridge the gap between recovery and being a productive member of society. The club empowers people to reclaim their lives and give back to lost and hurting. A computer is available to help with job searching, filling out online work applications as well as a place to do school work. Those who volunteer here get work experience as well as community service hours.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED.*

Pay partial rent, new flooring and paint, a new front counter, supplies such as coffee, toilet paper, cleaning supplies, new pamphlets, books on recovery, board games, karaoke machine, cornhole,

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.*

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

Helping those who struggle with addiction of all kinds to have a better attitude and find hope helps improve the number of people living on the streets in Temecula. Helping families better understand and deal with their loved ones condition can help relieve the homeless population. The Temecula Valley Alano club spreads positive energy throughout Temecula and provides a safe environment for these people and their families this grant helps us to keep our doors open

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

*

1,400

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

*

50

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY.*

The Temecula Valley Alano Club provides guidance and support for those Temecula residents trying to obtain or maintain sobriety and recover from addiction. The funds will be used to pay partial rent, new flooring and paint, a new front counter, supplies such as coffee, toilet paper, cleaning supplies, new pamphlets, books on recovery, board games, karaoke machine, cornhole. This will provide a safe space along with resources for those wishing to maintain sobriety

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$5,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$0.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$0.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment * n/a	EXPENSES * \$0.00
Facilities/Rent/Insurance * rent	* \$1,500.00
Supplies * coffee, water, toilet paper, paper towels, cleaning supplies	* \$300.00
Services * n/a	* \$0.00
Food * n/a	* \$0.00
Other (i.e. Informational Outreach, etc) * Paint, new flooring, new front counter, books, pamphlets, board games, karaoke machine, corn hole, literature	* \$3,200.00
Staffing Expense	* \$0.00
TOTAL REVENUE: \$5,000.00	TOTAL EXPENSES \$5,000.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Temecula Valley Alano Club

Requested Amount:

\$5,000.00

President/Authorized Officer Name: *

Melynda Perkoski

President/Authorized Officer Title: *

CFO

E-mail: *

tvacmanager@gmail.com

Phone: *



President/Authorized Officer Signature *

Melynda Perkoski

Submission Date:

2026-06-16 10:48:55 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

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

DEPARTMENT OF THE TREASURY

Date: JUN 28 2018

TEMECULA VALLEY ALANO CLUB
27470 COMMERCE CENTER DR STE C
TEMECULA, CA 92590

Employer Identification Number:
80-0488892
DLN:
17053003340028
Contact Person:
ROGER W VANCE ID# 31173
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
509(a)(2)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
May 15, 2012
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 in 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 retroactive to your date of revocation.

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. Enter "4221-PC" in the search bar

Letter 947

TEMECULA VALLEY ALANO CLUB

to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

We sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

Stephen a. martin

Director, Exempt Organizations
Rulings and Agreements



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/25/2026

ESL ID: 4024454844

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 3227878

Entity Name: TEMECULA VALLEY ALANO CLUB

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20260466097



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20260466097

Date Filed: 2/27/2026

B4455-0317 02/27/2026 11:58 AM Received by California Secretary of State

Entity Details

Corporation Name TEMECULA VALLEY ALANO CLUB
Entity No. 3227878
Formed In CALIFORNIA

Street Address of California Principal Office of Corporation

Street Address of California Office 27470 COMMERCE CENTER DR
STE C
TEMECULA, CA 92590

Mailing Address of Corporation

Mailing Address 27470 COMMERCE CENTR DR. #C
TEMECULA, CA 92590

Attention

Officers

Officer Name	Officer Address	Position(s)
■ Richard Eric Gurzi	27470 COMMERCE CENTER DR STE C TEMECULA, CA 92590	Chief Executive Officer
■ Jenna Lindsey	27470 COMMERCE CENTER DR STE C TEMECULA, CA 92590	Secretary
■ Melynda Perkoski	27470 COMMERCE CENTER DR STE C TEMECULA, CA 92590	Chief Financial Officer

☒ The entity's bylaws allow the CEO (President) to be the Secretary or CFO (Treasurer).

Additional Officers

Officer Name	Officer Address	Position	Stated Position
None Entered			

Agent for Service of Process

Agent Name JULIE PEREZ
Agent Address 27470 COMMERCE CENTER DR. #C
TEMECULA, CA 92590

Email Notifications

Opt-in Email Notifications Yes, I opt-in to receive entity notifications via email.

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

Julie Perez

02/27/2026

Signature

Date

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California, to engage in, carry on or conduct in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California, nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

BUSINESS NAME: Temecula Valley Alano Club

BUSINESS LOCATION: 27470 Commerce Center Dr, C, Temecula, CA 92590

DESCRIPTION: Business Services

BUSINESS OWNER: Dana Rosales
Cameron Veatch

TEMECULA VALLEY ALANO CLUB
27470 COMMERCE CENTER DR, C
TEMECULA, CA 92590

Business License Number: 034798

License Fee: \$35.00

Effective Date: March 09, 2026

Expiration Date: January 31, 2027

Fees paid in accordance with City Ordinance

TO BE POSTED IN A CONSPICUOUS PLACE

NOT TRANSFERABLE and NON-REFUNDABLE

FY 26/27 Community Service Funding (CSF)
Grant Application

38

TEMECULA VALLEY
CONSERVATORY OF THE ARTS



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Temecula Valley Conservatory
of the Arts

Year Organization Founded: *

2014

Website:

tvartsconservatory.org

Mailing Address: *

28780 Old Town Front St., C1
Temecula, CA 92590

Number of Paid Staff: *

0

Number of Volunteers: *

4

Contact Name: *

Susan Miyamoto

Contact Title: *

President

Contact Email: *

[REDACTED]

Contact Phone: *

[REDACTED]

Alternate Contact Name:

Mark Masters

Alternate Contact Email:

[REDACTED]

Alternate Contact Phone:

[REDACTED]

**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Temecula Valley

Business License No. *

054559

Geographic Area(s) the Project/Program Serves: *

Temecula Unified School District

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

Business License.pdf

274.75KB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$2,200.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Temecula Band/String Projects

Start Date: *

2026-09-07

End Date: *

2027-09-07

Physical Address of Project/Program *

31350 Rancho Vista Rd., Temecula 92592

Preferred Payment Method:

(If grant is awarded.)

- ☐ Check Mailed ☒ Check Picked Up
☐ Electronic File Transfer

Make Check Payable to: *

Temecula Valley Conservatory of the Arts

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

09/04/2015

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

3751189

Attach State of California Entity Status Letter: *

To find State of California Entity Status Letter,

State of CA Entity Status Lettter.pdf

392.6KB

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

IRS Employer Identification Number (EIN): *

47-3595763

Attach IRS Tax Exempt Determination Letter: *

To find IRS Tax Exempt Determination Letter,

TVCA 2015.09.04 IRS Confirmation letter for 501(c) exemption.pdf

52.89KB

click the link below:

<https://apps.irs.gov/app/eos/>

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,

CA Secretary of State file 1.19.pdf

101.26KB

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990*

You might find IRS Form 990

on the link below:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

TVCA IRS 990-N 2025.jpg

327.38KB



(990, 990-EZ, 990-PF, 990-T)

Application Authorization

Has the organization or any members of the **Board of Directors** of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a **Temecula City Council Member** during the past 12 months? *

☐ Yes ☒ No

Is a **Temecula City Council Member** a member of the **Board of Directors** or an **Officer** of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☐ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

Mission Statement: To enrich the lives of students and the community through performances, education, and community partnerships and to engage the broader community through meaningful arts outreach.

Vision

TVCA envisions a vibrant arts community where every student has access to music education and where professional and student live music performances contribute to the cultural and economic vitality of the Temecula Valley.

Organizational Overview

The Temecula Valley Conservatory of the Arts serves as a hub for music education, community arts programs, and live performance initiatives in Southwest Riverside County. The organization collaborates with local schools, arts organizations, musicians, and community leaders to provide meaningful music and art experiences for students and residents alike.

TVCA produces concerts, supports educational outreach programs, and provides access to musical instruments and instruction for students who might otherwise be unable to participate in school music programs. We also loan musical instruments to students who are unable to purchase or rent their own due to financial constraints.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Project/Program Description

Project/Program Title: Temecula Band/String Projects

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

The Elementary Beginning Band and String Program introduces 5th grade students to instrumental music for the first time, offering instruction in band instruments (such as flute, clarinet, trumpet, and percussion) and string instruments (such as violin, viola, and cello) during weekly classes held before the school day. The program is taught by qualified instructors and assistants provided by TVCA, who work directly within elementary school campuses in partnership with the Temecula Valley Unified School District. This program helps fill gaps in music education programs where additional instructional support is needed.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

Funds will be used for liability and instrument insurance for the 2026-2027 program. The school district requires a certificate of insurance from TVCA.
\$500 of funds will also be used to purchase replacement supplies for instruments.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*
☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

The 5th Grade Beginning Band and String Programs gives elementary student a first hands-on experience with instrumental music, regardless of family income or prior exposure to the arts. Offered before the school day, the program removes the cost and transportation barriers that often keep families from pursuing private lessons, ensuring equitable access across all Temecula Valley neighborhoods. Early instrumental instruction is linked to improved discipline, coordination, teamwork, and academic performance. Students who start in 5th grade often continue into middle and high school ensembles, feeding the pipeline for Temecula's secondary music programs and community ensembles.

More broadly, these programs raise the status of our community. Cities known for strong school arts programs attract families, businesses, and visitors who associate that commitment with quality of life. Investing in beginning band and strings is an investment in Temecula's cultural identity, civic pride, and long-term economic vitality.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM: *

90

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM: *

0

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

City grant funds will be used to purchase liability insurance and instrument insurance for the 5th Grade Beginning Band and String Programs, providing the certificate of insurance required by the school district for TVCA instructors and assistants to work on campus.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$2,200.00
Amount contributed to the Project/Program by the Applicant Organization	* \$4,820.00
Other grants or funding already awarded for Project/Program, if any none	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$0.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment * replacement strings, bows, reeds	EXPENSES * \$500.00
Facilities/Rent/Insurance * Insurance	* \$1,800.00
Supplies * paper, books, pencils	* \$100.00
Services * instructors	* \$4,620.00
Food * none	* \$0.00
Other (i.e. Informational Outreach, etc) * none	* \$0.00
Staffing Expense	* \$0.00
TOTAL REVENUE: \$7,020.00	TOTAL EXPENSES \$7,020.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

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I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Temecula Valley Conservatory of the Arts

Requested Amount:

\$2,200.00

President/Authorized Officer Name: *

Susan Miyamoto

President/Authorized Officer Title: *

President

E-mail: *

Phone: *

President/Authorized Officer Signature *

Susan Miyamoto

Submission Date:

2026-06-29 10:17:13 AM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

President/Officer Confirmation: *

☒ Verified and Confirmed

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

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

DEPARTMENT OF THE TREASURY

Date:

SEP 04 2015

TEMECULA VALLEY CONSERVATORY OF THE
ARTS
C/O RAYMOND W JOHNSON
[REDACTED]
TEMECULA, CA 92590-3518

Employer Identification Number:

47-3595763

DLN:

17053155325005

Contact Person:

JOSEPH R KENNEDY

ID# 31647

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Public Charity Status:

170(b)(1)(A)(vi)

Form 990 Required:

Yes

Effective Date of Exemption:

January 28, 2015

Contribution Deductibility:

Yes

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.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

For important information about your responsibilities as a tax-exempt 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.

TEMECULA VALLEY CONSERVATORY OF THE

Sincerely,

A handwritten signature in black ink, appearing to read 'J. I. Cooper', with a stylized flourish at the end.

Jeffrey I. Cooper
Director, Exempt Organizations
Rulings and Agreements



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/29/2026

ESL ID: 5703681410

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 3751189

Entity Name: TEMECULA VALLEY CONSERVATORY OF THE ARTS

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



State of California Secretary of State

N

Statement of Information

(Domestic Nonprofit, Credit Union and General Cooperative Corporations)

**Filing Fee: \$20.00. If this is an amendment, see instructions.
IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

G371671**FILED**

In the office of the Secretary of State
of the State of California

JAN-31 2019**1. CORPORATE NAME**

TEMECULA VALLEY CONSERVATORY OF THE ARTS

2. CALIFORNIA CORPORATE NUMBER

C3751189

This Space for Filing Use Only

Complete Principal Office Address (Do not abbreviate the name of the city. Item 3 cannot be a P.O. Box.)**3. STREET ADDRESS OF PRINCIPAL OFFICE IN CALIFORNIA, IF ANY**

CITY

STATE

ZIP CODE

28780 OLD TOWN FRONT ST., C1, TEMECULA, CA 92590

4. MAILING ADDRESS OF THE CORPORATION

CITY

STATE

ZIP CODE

Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)**5. CHIEF EXECUTIVE OFFICER/**

ADDRESS

CITY

STATE

ZIP CODE

SUSAN ANN MIYAMOTO PO BOX 2312, TEMECULA, CA 92593

6. SECRETARY

ADDRESS

CITY

STATE

ZIP CODE

MARK MASTERS PO BOX 5716, PASADENA, CA 91117

7. CHIEF FINANCIAL OFFICER/

ADDRESS

CITY

STATE

ZIP CODE

MIMI CHANG 31537 RANCHO PUEBLO RD., STE. 201, TEMECULA, CA 92592

Agent for Service of Process If the agent is an individual, the agent must reside in California and Item 9 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 9 must be left blank.**8. NAME OF AGENT FOR SERVICE OF PROCESS** [Note: The person designated as the corporation's agent MUST have agreed to act in that capacity prior to the designation.]

SUSAN ANN MIYAMOTO

9. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

CITY

STATE

ZIP CODE

[REDACTED], TEMECULA, CA 92590

Common Interest Developments

10. ☐ Check here if the corporation is an association formed to manage a common interest development under the Davis-Stirling Common Interest Development Act, (California Civil Code section 4000, et seq.) or under the Commercial and Industrial Common Interest Development Act, (California Civil Code section 6500, et seq.). The corporation must file a Statement by Common Interest Development Association (Form SI-CID) as required by California Civil Code sections 5405(a) and 6760(a). Please see instructions on the reverse side of this form.

11. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

01/31/2019

SUSAN ANN MIYAMOTO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California, to engage in, carry on or conduct in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California, nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances

BUSINESS NAME: Temecula Valley Conservatory of the Arts

BUSINESS LOCATION: [REDACTED] Temecula, CA 92028

BUSINESS OWNER: Susan A Miyamoto
Mark Masters

TEMECULA-VALLEY CONSERVATORY OF THE ARTS
28780 OLD TOWN FRONT ST, C1
TEMECULA, CA 92590

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

DESCRIPTION: Non-Profit Organization

Business License Number: 054559

License Fee: \$4.00

Effective Date: January 05, 2026

Expiration Date: January 31, 2027

Fees paid in accordance with City Ordinance

TO BE POSTED IN A CONSPICUOUS PLACE

NOT TRANSFERABLE and NON-REFUNDABLE

FY 26/27 Community Service Funding (CSF)
Grant Application

39

TEMECULA VALLEY POSSE



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Temecula Valley Posse

Year Organization Founded: *

1992

Website:

<https://www.riversidesheriff.org/261/vforcc/unit>

Mailing Address: *

P.O. Box 431
Temecula, CA 92593

Number of Paid Staff: *

0

Number of Volunteers: *

20

Contact Name: *

Danielle Cason

Contact Title: *

Secretary

Contact Email: *

[REDACTED]

Contact Phone: *

[REDACTED]

Alternate Contact Name:

Brenda Cowan

Alternate Contact Email:

[REDACTED]

Alternate Contact Phone:

[REDACTED]

Does the nonprofit have a current City of Temecula Business License? *

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

City of Temecula

Business License No. *

055804

Geographic Area(s) the Project/Program Serves: *

City of Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

doc05188220260617122804.pdf

103.13KB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Advanced Equine Training and Essential Equipment Project

Start Date: *

2026-07-01

End Date: *

2027-06-30

Physical Address of Project/Program *

City of Temecula Old Town Sheriff's Station 28690 Mercedes
Street #B Temecula, CA

Preferred Payment Method:

(If grant is awarded.)

☒ Check Mailed ☐ Check Picked Up

☐ Electronic File Transfer

Make Check Payable to: *

Temecula Valley Posse

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

01/01/1992

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

1989222

To find State of California Entity Status Letter,

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

Attach State of California Entity Status Letter: *

CA Entity Status Letter 2026.pdf

392.55KB

IRS Employer Identification Number (EIN): *

22-3874698

To find IRS Tax Exempt Determination Letter,

click the link below:

<https://apps.irs.gov/app/eos/>

Attach IRS Tax Exempt Determination Letter: *

IRS DEDUCTIBILITY STATUS.jpg

2.51MB



Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statement of Information filed with the State of California

To find Nonprofit Statement of Information,

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Attach Nonprofit Statement of Information: *

STATEMENT OF INFORMATION.jpg

1.09MB



Provide further verification as follows: *

(one required, both preferred)

- ☒ First Page of most recent IRS Form 990
- ☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990 *

You might find IRS Form 990

doc05178120260611131800.pdf

133.78KB

on the link below:

(990, 990-EZ, 990-PF, 990-T)

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☐ Yes ☒ No

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☐ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

The Mission of the Temecula Valley Volunteer Mounted Posse is to strengthen the bond between the residents of Temecula Valley and the Riverside County Sheriff's Office by serving as a bridge between law enforcement and the public. Since the Posse's inception in 1992, our goals have been centered on community relations, public safety, and supporting law enforcement by being the "eyes and ears" for the Riverside Sheriff's Office. We achieve these objectives through a variety of activities, such as community outreach, parades, 3rd grade school trips, special events, patrolling Old Town and search & rescue operations. With Currently 20 Voluteer members, The Posse dedicates upwards of 5,000 volunteer hours annually, using personal resources and horses to fulfill these missions. Our presence in the community not only enhances public safety but also promotes approachability and breaking down barriers between law enforcement and the public. The Temecula Valley Mounted Posse is committed to ensuring a brighter and safer future for all by maintaining strong connections between the City of Temecula, its residents, and law enforcement.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☒ Yes ☐ No

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP *	AMOUNT: *	MONTH + YEAR FUNDING RECEIVED *	NAME OF CITY GRANT OR SPONSORSHIP
Training and Safety Equipment	\$5,000.00	June 2004	Community Service Funding Grant
Training and Supplies	\$5,000.00	Feb 2025	Community Service Funding Grant

Project/Program Description

Project/Program Title: Advanced Equine Training and Essential Equipment Project

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

The Advanced Equine Training and Essential Equipment project focuses on providing the necessary equipment and training to ensure both horse and rider along with the ground crew are fully effective during search and rescue operations, crowd control, parades, and patrolling Old Town. Ultimately, increasing the overall safety and success of the Temecula Valley Volunteer Mounted Posse's operations.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

If awarded, The Temecula Valley Volunteer Mounted Posse would spend the grant funding on essential equipment and advanced training programs. Funds would be used to purchase essential equipment such as first aid kits, leather tack for each horse, horse pads, search and rescue equipment, safety led lights, duty/parade hats, reflective vests and body cams. This essential equipment will be used when performing search & rescue operations, parades, patrolling Old Town and community events. Additionally, funds would be used for clinic fees, travel, facilities rental for advanced Mounted Patrol Courses offered by and not limited to the accredited Western states Mounted Officers Association and Equine scent detection training by accredited instructor Terry Nowacki from the Equine Detection Services. These courses are designed to train and equip Posse volunteers with vital skills in search & rescue, scent detection, horsemanship, mounted patrol tactics and crowd control management. By investing in this advanced equine training and essential equipment, the Posse aims to enhance their operational readiness and continue serving the City of Temecula and the Temecula Valley effectively.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

For the thousands of residents and visitors of the City of Temecula who regularly have positive interactions with the Temecula Valley Mounted Posse, and the thousands more to come, this grant funding specifically benefits by the following:

- . Strengthened Community Connections: The Posse's dedication to serving the community while mounted on horses facilitates approachable interactions between law enforcement and Temecula residents and guests. This accessibility humanizes law enforcement and cultivates a strong bond between Temecula residents and those who serve and protect the community.
- . Enhanced Public Safety: The properly trained and equipped Posse members and Horses are an integral part of maintaining order and safety during events, patrolling Old Town and search & rescue missions. The Posse contributes to a sense of security and trust within the community as well as providing a fun and unique experience for the Temecula residents and guests.
- . Enhanced Search & Rescue: The properly trained Posse members and Horses are an integral part of search & rescue missions due to being able to go on horseback where most humans cannot go safely on foot or in a timely manner. This essential training will be used when performing search & rescue operations. The Temecula Valley Mounted Posse would be one of the few Equine scent detection trained Posse's in Southern California. The Posse will enhance and maintain their operational readiness and continue serving the City of Temecula and the Temecula Valley effectively.
- . Memorial experience: For the thousands of Temecula residents who interact with the Temecula Valley

Mounted Posse every year while patrolling Old Town, parades or at special events. Not only kids, but adult faces light up when they see us, get to pet a horse (some for the first time) or take pictures with us, and the memory for them is priceless and will last a lifetime.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

20,000

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

20

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY.*

ESSENTIAL EQUINE TRAINING AND ESSENTAIL EQUIPMENT: The project will enhance the effectiveness of mounted patrols during search & rescue missions, crowd control, patrolling Old Town, and community events.

ESSENTIAL EQUINE TRAINING: Immersive equine scent detection clinic, search & rescue clinics, horsemanship clinics, included but not limited to Mounted Patrol Courses. Clinic fees, travel, supplies and facilities rental during training clinics.

ESSENTIAL EQUIPMENT: Official Sheriff parade and patrol pads, duty/parade hats, Leather tack, search and rescue equipment, safety led lights, reflective vests, and body cams.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$0.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$0.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
ESSENTIAL EQUIPEMENT	\$5,000.00
Facilities/Rent/Insurance *	* \$1,200.00
TRAINING FACILITIES RENTAL	
Supplies *	* \$0.00
NONE	
Services *	* \$3,000.00
ADVANCED ESSENTIAL TRAINING	
Food *	* \$0.00
NONE	
Other (i.e. Informational Outreach, etc) *	* \$800.00
TRAVEL EXPENSIVES	
Staffing Expense	* \$0.00
TOTAL REVENUE:	TOTAL EXPENSES
\$10,000.00	\$10,000.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required.

*

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Temecula Valley Posse

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Darrell Cowan

President/Authorized Officer Title: *

President

E-mail: *

temeculavalleyposse@yahoo.com

Phone: *

[REDACTED]

President/Authorized Officer Signature *

Darrell Cowan

Submission Date:

2026-06-26 04:46:53 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

Name, Title, & Organization



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/10/2026

ESL ID: 1116094816

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 1989222

Entity Name: TEMECULA VALLEY POSSE

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20261299419

B4778-7865 06/21/2026 7:55 PM Received by California Secretary of State



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20261299419

Date Filed: 6/21/2026

Entity Details

Corporation Name TEMECULA VALLEY POSSE
Entity No. 1989222
Formed In CALIFORNIA

Street Address of California Principal Office of Corporation

Street Address of California Office
[REDACTED]
AGUANGA, CA 92536

Mailing Address of Corporation

Mailing Address PO BOX 431
TEMECULA, CA 92593
Attention Brenda Cowan

Officers

Officer Name	Officer Address	Position(s)
• Danielle Cason	[REDACTED] MURRIETA, CA 92562	Secretary
BRENDA COWAN	[REDACTED] AGUANGA, CA 92536	Chief Financial Officer
+ Darrell Cowan	[REDACTED] AGUANGA, CA 92536	Chief Executive Officer

Additional Officers

Officer Name	Officer Address	Position	Stated Position
Arlene Eyerman	[REDACTED] MURRIETA, CA 92563	Vice President	

Agent for Service of Process

Agent Name Danielle Cason
Agent Address [REDACTED]
MURRIETA, CA 92562

Email Notifications

Opt-in Email Notifications Yes, I opt-in to receive entity notifications via email.

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

Danielle Cason

Signature

06/21/2026

Date

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California, to engage in, carry on or conduct in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California, nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

BUSINESS NAME: Temecula Valley Posse

BUSINESS LOCATION: 28690 Mercedes St Old Town Sheriff'S Station, B,
Temecula, CA 92590

DESCRIPTION: Non-Profit Organization

BUSINESS OWNER:

TEMECULA VALLEY POSSE
PO BOX 431
TEMECULA 92590

Business License Number: 055804

License Fee: \$4.00

Effective Date: December 04, 2025

Expiration Date: January 31, 2027

Fees paid in accordance with City Ordinance

TO BE POSTED IN A CONSPICUOUS PLACE

NOT TRANSFERABLE and NON-REFUNDABLE

FY 26/27 Community Service Funding (CSF)
Grant Application

40

THE FIREHOUSE FAMILY INC.



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

The Firehouse Family Inc

Year Organization Founded: *

2022

Website:

www.thefirehousefamily.org

Mailing Address: *

[REDACTED]
Menifee, CA 92585

Number of Paid Staff: *

0

Number of Volunteers: *

12

Contact Name: *

Matt Hayes

Contact Title: *

CFO

Contact Email: *

matt.hayes@thefirehousefamily.org

Contact Phone: *

~~951-764-4574~~ [REDACTED]

Alternate Contact Name:

Alternate Contact Email:

Alternate Contact Phone:

Does the nonprofit have a current City of Temecula Business License? *

☐ Yes ☒ No

Geographic Area(s) the Organization Serves: *

SW Riverside County, City of Temecula

A current City of Temecula Business License may be required to submit prior to fund disbursement. *

☒ Understand

Geographic Area(s) the Project/Program Serves: *

SW Riverside County, City of Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

2027 Firehouse Family Retreat

Start Date: *

2027-03-18

End Date: *

2027-03-21

Physical Address of Project/Program *

58000 Apple Canyon Rd, Mountain Center, CA 92561

Preferred Payment Method:

(If grant is awarded.)

- ☐ Check Mailed ☒ Check Picked Up
☐ Electronic File Transfer

Make Check Payable to: *

The Firehouse Family Inc.

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

11/02/2023

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

5965035

To find State of California Entity Status Letter,

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

Attach State of California Entity Status Letter: *

Entity Status Letter Firehouse Family Inc 2026.pdf

392.56KB

IRS Employer Identification Number (EIN): *

99-1097178

To find IRS Tax Exempt Determination Letter,

click the link below:

<https://apps.irs.gov/app/eos/>

Attach IRS Tax Exempt Determination Letter: *

FinalLetter_99-1097178_THEFIREHOUSEFAMILYINC_08282024_00 (3).pdf

132.11KB

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

To find Nonprofit Statement of Information,

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Attach Nonprofit Statement of Information: *

Certificate of Status_1780956584604.pdf

292.52KB

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☒ Detailed info about your charity found on the State Registry Search Tool (link below)

You might find IRS Form 990

on the link below:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

State Registry Search Tool:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Attach First Page of Most Recent Form 990*

2025 IRS 990EZ.pdf

234.75KB

(990, 990-EZ, 990-PF, 990-T)

Attach State Registry Document/Info*

Screenshot 2026-06-08 181454.png

180.97KB



Application Authorization

Has the organization or any members of the **Board of Directors** of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a **Temecula City Council Member** during the past 12 months? *

☐ Yes ☒ No

Is a **Temecula City Council Member** a member of the **Board of Directors** or an **Officer** of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☐ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

Firefighters face significant stress and trauma as they work to protect communities. To support these heroes, The Firehouse Family strives to provide resources to promote positive mental health through the whole family approach. The Firehouse Family offers a range of services, including family retreats, group outings, and other brain healthy exercises. These efforts help firefighters to address the emotional and psychological toll of their work, reduce stigma around mental health, and ultimately ensure that firefighters can continue to serve their communities with strength and resilience.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☒ Yes ☐ No

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT * OR SPONSORSHIP	AMOUNT: *	MONTH + YEAR FUNDING RECEIVED *	NAME OF CITY GRANT OR SPONSORSHIP
2025 Firehouse Family Retreat	\$5,000.00	03/2025	City Council Grant, Matt Rahn
2026 Firehouse Family Retreat	\$4,000.00	03/2026	City Council Grant, Matt Rahn

Project/Program Description

Project/Program Title: 2027 Firehouse Family Retreat

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

This grant will support the 2027 Firehouse Family Retreat, which services over 300 firefighters/firefighter family members. This grant helps offset costs to host the retreat, a retreat which include room and food, mental health therapy, team building and other activities provided at the retreat.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

Rental of a 79 room lodge, access to 614 acres of mountain retreat, amenities and food.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

Temecula firefighters are exposed to continued traumas while working to serve the residents and guests of City of Temecula. These retreats allow the off-loading of these continued traumas in a responsible way. By Temecula firefighters having their families joining them during the retreats, it gives continued support. A family that plays together have a tendency to stay together.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

*

320

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

*

32

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

This grant will go to pay for the rental of the Pine Springs Ranch in Mountain Center.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$65,000.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$10,000.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment * N/A	EXPENSES * \$0.00
Facilities/Rent/Insurance * Rental of Pine Springs Ranch	* \$55,000.00
Supplies * Education equipment, amenity supplies	* \$10,000.00
Services * Massage therapist, horse therapy, clinician payments	* \$15,000.00
Food * breakfast, lunch and dinner for 4 days	* \$5,000.00
Other (i.e. Informational Outreach, etc) * N/A	* \$0.00
Staffing Expense	* \$0.00
TOTAL REVENUE: \$85,000.00	TOTAL EXPENSES \$85,000.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

The Firehouse Family Inc

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Matt Hayes

President/Authorized Officer Title: *

CFO

E-mail: *

matt.hayes@thefirehousefamily.org

Phone: *

[REDACTED]

President/Authorized Officer Signature *

Matt Hayes

Submission Date:

2026-06-08 03:33:27 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

THE FIREHOUSE FAMILY INC
[REDACTED]
ROMOLAND, CA 92585

Date:
09/05/2024
Employer ID number:
99-1097178
Person to contact:
Name: Customer Service
ID number: 31954
Telephone: 877-829-5500
Accounting period ending:
December 31
Public charity status:
509(a)(2)
Form 990 / 990-EZ / 990-N required:
Yes
Effective date of exemption:
November 22, 2023
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053643005984

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. 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,

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements



BA20252071936

B4104-5742 10/22/2025 7:05 AM Received by California Secretary of State



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20252071936

Date Filed: 10/22/2025

Entity Details

Corporation Name The Firehouse Family Inc
Entity No. 5965035
Formed In CALIFORNIA

Street Address of California Principal Office of Corporation

Street Address of California Office [REDACTED]
UNIT A
MENIFEE, CA 92585-9544

Mailing Address of Corporation

Mailing Address [REDACTED]
ROMOLAND, CA 92585

Attention

Officers

Officer Name	Officer Address	Position(s)
John Crater	[REDACTED] MENIFEE, CA 92585	Chief Executive Officer
MATTHEW HAYES	[REDACTED] KNOXVILLE, TN 37922	Chief Financial Officer
Patricia Marruffo	[REDACTED] RIVERSIDE, CA 92505	Secretary

Additional Officers

Officer Name	Officer Address	Position	Stated Position
Dante Marruffo	[REDACTED] RIVERSIDE, CA 92505	Vice President	

Agent for Service of Process

Agent Name Edward Shepherd
Agent Address [REDACTED]
UNIT A
MURRIETA, CA 92563

Email Notifications

Opt-in Email Notifications Yes, I opt-in to receive entity notifications via email.

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

Matthew Hayes

Signature

10/22/2025

Date

FY 26/27 Community Service Funding (CSF)
Grant Application

41

THE INSTITUTE OF DEVINE
AUTHENTICITY AND WELLNESS



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

The Institute of Divine
Authenticity and Wellness

Year Organization Founded: *

2026

Website:

Mailing Address: *

43980 Mahlon Vail Road #3906

Number of Paid Staff: *

0

Number of Volunteers: *

1

Contact Name: *

gloria tumbaga

Contact Title: *

director

Contact Email: *

[REDACTED]

Contact Phone: *

[REDACTED]

Alternate Contact Name:

Alternate Contact Email:

Alternate Contact Phone:

**Does the nonprofit have a current City of Temecula
Business License? ***

☐ Yes ☒ No

**A current City of Temecula Business License may be
required to submit prior to fund disbursement. ***

☒ Understand

Geographic Area(s) the Organization Serves: *

Temecula and surrounding communities

Geographic Area(s) the Project/Program Serves: *

City of Temecula residents only. CSF grant funds
will be used exclusively for services, materials, and
program activities benefiting Temecula residents.

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Temecula Wellness & Resilience Program

Start Date: *

2026-07-01

End Date: *

~~2027-12-31~~

Physical Address of Project/Program *

32605 Temecula Parkway, Suite 200 Temecula, CA 92592

Preferred Payment Method:

(If grant is awarded.)

- ☐ Check Mailed ☐ Check Picked Up
☒ Electronic File Transfer

Make Check Payable to: *

The Institute of Divine Authenticity and Wellness

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

~~04/03/2926~~

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

B20260149662

To find State of California Entity Status Letter,

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

Attach State of California Entity Status Letter: *

FTBEntityStatusletter.pdf

392.61KB

IRS Employer Identification Number (EIN): *

41-5374851

To find IRS Tax Exempt Determination Letter,

click the link below:

<https://apps.irs.gov/app/eos/>

Attach IRS Tax Exempt Determination Letter: *

THE INSTITUTE OF DIVINE AUTHENTICITY AND WELLNESS - IRS Determination Letter (1).pdf

133.84KB

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

To find Nonprofit Statement of Information,

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Attach Nonprofit Statement of Information: *

The Institute of Divine Authenticity and Wellness - Filed SOI.pdf

129.15KB

Provide further verification as follows: *

(one required, both preferred)

☐ First Page of most recent IRS Form 990

☒ Detailed info about your charity found on the State Registry Search Tool (link below)

State Registry Search Tool:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Attach State Registry Document/Info*

AG Registry .docx

13.14KB

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☐ Yes ☒ No

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☐ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

The Institute of Divine Authenticity and Wellness is a 501(c)(3) nonprofit public charity dedicated to supporting whole-person wellness, personal development, resilience, and community education. The organization's mission is to help individuals and families build healthier, more authentic, and self-sufficient lives through accessible education, mentorship, wellness resources, and community-based support.

The organization's goals are to provide inclusive programs that promote emotional well-being, stress management, healthy lifestyle awareness, personal growth, and connection to supportive resources. T-DAW's objectives include offering free or low-cost educational programming, creating practical tools and resources for community members, and serving Temecula residents through programs that improve quality of life and overall well-being.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Project/Program Description

Project/Program Title: Temecula Wellness & Resilience Program

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT.*

The Temecula Wellness & Resilience Program is a free community education program designed to support the well-being, resilience, and self-sufficiency of Temecula residents. The program will provide wellness-centered educational resources, personal development tools, stress management education, healthy lifestyle awareness, and community resource materials.

The program will be available exclusively to Temecula residents and will focus on practical, non-medical education that helps participants improve emotional well-being, reduce stress, build resilience, develop healthy habits, and connect with supportive community resources. Services may be provided virtually, through community outreach, and/or at approved Temecula locations.

City grant funding, if awarded, will be used only for direct program expenses such as educational materials, printing, outreach materials, wellness/resource kits, workshop supplies, program operating support, and evaluation/reporting tools. Grant funds will not be used for salaries, debt, scholarships, or fundraiser expenses.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED.*

If awarded, the organization will use City grant funding to purchase educational workbooks, handouts, participant materials, printing, flyers, outreach materials, program packets, community resource guides, workshop supplies, folders, binders, journals, pens, presentation materials, non-medical wellness/resource kit items, light refreshments for program participants, program-related space or operating support, insurance or administrative expenses directly related to the program, and evaluation/reporting tools. Paid invoices and receipts will be maintained and submitted as required. To the extent possible, purchases will be made from Temecula-based businesses.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.*

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

This grant funding will specifically benefit Temecula residents by providing free access to wellness and resilience education, practical self-care tools, stress management resources, healthy lifestyle education, and community resource materials. The program is intended to help residents improve emotional well-being, build resilience, increase self-sufficiency, and become more connected to supportive resources in the community.

The program will be offered exclusively to Temecula residents. Grant funds will be used only for services, materials, supplies, and program activities that directly benefit Temecula residents. The organization will track participation, collect feedback, maintain receipts, and document how the funded items supported the program and benefited Temecula residents.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN

EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

100

THIS PROJECT/PROGRAM:

5

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

City grant funds will be used to purchase educational workbooks, participant handouts, printed outreach materials, program packets, community resource guides, non-medical wellness/resource kit items, workshop supplies, folders, binders, journals, pens, presentation materials, light refreshments for Temecula resident participants, program-related space or operating support, insurance or administrative expenses directly related to the program, and evaluation/reporting tools for the Temecula Wellness & Resilience Program.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$0.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$0.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
Presentation supplies, basic event/program equipment, signage, table materials, clipboards, or reusable program tools.	\$500.00
Facilities/Rent/Insurance *	* \$2,000.00
Program-related space support, insurance, or operational expenses directly connected to running the Temecula program.	
Supplies *	* \$2,500.00
Workbooks, journals, folders, binders, pens, handouts, non-medical wellness/resource kit items, participant materials.	
Services *	* \$1,000.00
Program-related services such as design/printing setup, evaluation support, outreach support, or administrative program support that is not salary.	
Food *	* \$500.00
Light refreshments for Temecula resident participants during workshops or community sessions.	
Other (i.e. Informational Outreach, etc) *	* \$3,500.00
Other expenses include informational outreach, printing, flyers, community resource guides, program packets, website and digital advertising to promote the program to Temecula residents, surveys, reporting tools, and documentation materials.	
Staffing Expense	*

\$0.00

TOTAL REVENUE:

\$10,000.00

TOTAL EXPENSES

\$10,000.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
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- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

The Institute of Divine Authenticity and Wellness

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Gloria Tumbaga

President/Authorized Officer Title: *

Chief Executive Officer / President

E-mail: *

gloria@t-daw.com

Phone: *

9513315555

President/Authorized Officer Signature *

GLORIA TUMBAQA

Submission Date:

2026-06-18 01:49:13 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

President/Officer Confirmation: *

☒ Verified and Confirmed

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

THE INSTITUTE OF DIVINE AUTHENTICITY
AND WELLNESS
C/O GLORIA TUMBAGA
3225 MCLEOD DRIVE SUITE 100
LAS VEGAS, NV 89121

Date:
04/27/2026
Employer ID number:
41-5374851
Person to contact:
Name: Diandi Ramclam
ID number: 5180760
Telephone: 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:
March 27, 2026
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.

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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. 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,

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements

The organization is newly recognized as a 501(c)(3) public charity effective March 27, 2026. Because the organization is newly formed, its first Form 990 has not yet been filed. IRS determination letter, California FTB Entity Status Letter, and California Secretary of State Statement of Information are attached. State Registry information will be provided when available



BA20260748547



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20260748547

Date Filed: 4/3/2026

B4561-5523 04/03/2026 12:51 PM Received by California Secretary of State

Entity Details			
Corporation Name	The Institute of Divine Authenticity and Wellness		
Entity No.	B20260149662		
Formed In	CALIFORNIA		
Street Address of California Principal Office of Corporation			
Street Address of California Office	None		
Mailing Address of Corporation			
Mailing Address	3225 MCLEOD DR. SUITE 100 LAS VEGAS, NV 89121		
Attention			
Officers			
Officer Name	Officer Address	Position(s)	
+ Gloria Tumbaga	3225 MCLEOD DR. SUITE 100 LAS VEGAS, NV 89121	Chief Executive Officer, Chief Financial Officer, Secretary	
☒ The entity's bylaws allow the CEO (President) to be the Secretary or CFO (Treasurer).			
Additional Officers			
Officer Name	Officer Address	Position	Stated Position
None Entered			
Agent for Service of Process			
California Registered Corporate Agent (1505)		ANDERSON REGISTERED AGENTS Registered Corporate 1505 Agent	
Email Notifications			
Opt-in Email Notifications		Yes, I opt-in to receive entity notifications via email.	
Electronic Signature			
☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.			
Jasmine Grayson		04/03/2026	
Signature		Date	

FY 26/27 Community Service Funding (CSF)
Grant Application

42

THEATHER FOUNDATION



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Theater Foundation

Year Organization Founded: *

1998

Website:

temeculatheaterfoundation.org

Mailing Address: *

41391 Kalmia St. #200
Murrieta, CA 92562

Number of Paid Staff: *

0

Number of Volunteers: *

90

Contact Name: *

Joe Arreola Sr,

Contact Title: *

Community Liaison

Contact Email: *

Contact Phone: *

Alternate Contact Name:

Beverly Stephenson

Alternate Contact Email:

Alternate Contact Phone:

**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Temecula and the Temecula Valley

Business License No. *

062356

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

IMG_1440.jpeg

1.97MB



<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$7,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Performing Arts Storage Solution

Start Date: *

2026-10-01

End Date: *

2027-01-31

Physical Address of Project/Program *

39150 Via de Oro

Preferred Payment Method:

(If grant is awarded.)

☐ Check Mailed ☐ Check Picked Up

☒ Electronic File Transfer

Make Check Payable to: *

Theater Foundation

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

04/20/1999

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☐ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

IRS Employer Identification Number (EIN): *

33-0871129

Attach IRS Tax Exempt Determination Letter: *

20260624_161527.jpeg

646.13KB

To find IRS Tax Exempt Determination Letter,

click the link below:

<https://apps.irs.gov/app/eos/>



Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

IMG_0540.png

1,016.02KB

To find Nonprofit Statement of Information,

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>



Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990 *

20260624_162647.jpeg

1,023.69KB

You might find IRS Form 990

on the link below:



(990, 990-EZ, 990-PF, 990-T)

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☐ Yes ☒ No

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☒ Executive Committee ☐ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

Our Mission

Keep the stage lights burning!

The Theater Foundation is dedicated to creating opportunities to develop and enhance the quality of performing arts and those organizations presenting them in Temecula.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Project/Program Description

Project/Program Title: Performing Arts Storage Solution

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

Storage for the performing arts organizations in our City has been a problem for many years. It has now reached a critical point due to the cost of storage space and commercial space that is available. We have sought for many years for a solution and believe that with the grant we have a truly viable alternative. Our solution is to purchase 2 40' box containers (to start) that we will place on land provided for us free of charge (or at a drastically reduced fee) that meets the City and County requirements for containers on property. Several local large land owners are willing to work with us for the space, we just need to purchase and bring the containers to them.

The Theater Foundation has been supporting the local performing arts organizations since its inception in 1999. In 1999, we began the campaign to build a theater in Old Town Temecula. That theater is celebrating its 20th year. From its opening until now, the Theater Foundation has furnished financial support, marketing services, access and fundraising opportunities. The greatest need which has been there ALWAYS is the need for storage space for sets, props and costumes. We believe that this is a start to meet those needs.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

We have researched and found we can purchase 2 40' containers for approximately \$3000 ea, the additional amount will allow us to pick-up, deliver and place the 2 units.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

It benefits our residents in 3 ways. First, it will allow the local organizations to continue to produce and perform top-quality entertainment in the Old Town Theater at a continuing reasonable ticket price by allowing the Resident Companies of the Theater Foundations to preserve and store their costumes, props and sets making them able to reuse the items for future shows.

Second benefit is that the majority of performers are Temecula residents and we can continue our policy to not charge them for the opportunity to participate in a production.

Third benefit it supports Arts Connection by allowing Arts Connection to have storage space for the TTF produced production of Nutcracker the Mousical.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

*

27,000

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

*

400

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

The Theater Foundation will be able to continue its commitment to the local performing arts organizations by providing some needed storage space and a nominal or no cost to the organizations. We will purchase 2 40' containers. The need is greater than the first 2 containers but this is a start.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$7,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$1,200.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$1,000.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
2 containers	\$7,000.00
Facilities/Rent/Insurance *	*
Insurance on containers, offset of rent	\$1,200.00
Supplies *	*
N/a	\$0.00
Services *	*
n/a	\$0.00
Food *	*
n/a	\$0.00
Other (i.e. Informational Outreach, etc) *	*
site prep: \$500 each	\$1,000.00
Staffing Expense	*
	\$0.00
TOTAL REVENUE:	TOTAL EXPENSES
\$9,200.00	\$9,200.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Theater Foundation

Requested Amount:

\$7,000.00

President/Authorized Officer Name: *

Beverly Stephenson/Jan Lunday

President/Authorized Officer Title: *

President/CFO

E-mail: *

Phone: *

President/Authorized Officer Signature *

Jan Lunday & Beverly Stephenson

Submission Date:

2026-06-25 05:01:53 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

President/Officer Confirmation: *

☒ Verified and Confirmed

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

Temecula

...

Theater Foundation

IRS Determination Letter



1 / 1

Fit window

[View plain text](#)

INTERNAL REVENUE SERVICE
P. O. BOX 250
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: FEB 28 2000

THE THEATER FOUNDATION
C/O BILL PAISNER
27740 JEFFERSON AVENUE, SUITE 200
TEMECULA, CA 92590

Employer Identification Number:
22-0871129
DIN:
310039179
Contact Person:
REINDERS - SEPARTED ID# 95124
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Foundation Status Classification:
170(b)(1)(A)(vi)
Advance Ruling Period Begins:
April 20, 1999
Advance Ruling Period Ends:
December 31, 2003
Addendum Applies:
No

Dear Applicant:

Based on information you supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably expect to be a publicly supported organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, during an advance ruling period you will be treated as a publicly supported organization, and not as a private foundation. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must send us the information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, we will classify you as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, we will classify you as a private foundation for future periods. Also, if we classify you as a private foundation, we will treat you as a private foundation from your beginning date for purposes of section 507(d) and 4940.

Grantors and contributors may rely on our determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you send us the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until we make

Letter 1045 (DO/CG)



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/29/2026

ESL ID: 1062174507

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 2162332

Entity Name: THE THEATER FOUNDATION

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)

Temecula ... Nonprofit Statement of Information



1 / 1

Fit window

[View plain text](#)

4:19 PM Thu Jun 25

ca-tei Renewal Tyler Po is the st Bl bizfileonline.sos.ca.gov

BA20261334142

STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION
California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only
-FILED-
File No.: BA20261334142
Date Filed: 6/25/2026

B4792-9054 06/25/2026 3:40 PM Received by California Secretary of State

Entity Details			
Corporation Name	THE THEATER FOUNDATION		
Entity No.	2162332		
Formed In	CALIFORNIA		
Street Address of California Principal Office of Corporation			
Street Address of California Office	42051 MAIN STREET TEMECULA, CA 92590		
Mailing Address of Corporation			
Mailing Address	42051 MAIN ST. TEMECULA, CA 92590		
Attention	Jan Lunday		
Officers			
Officer Name	Officer Address	Position(s)	
JANICE F LUNDAY	38161 CALLE ARREBOL MURRIETA, CA 92563	Chief Financial Officer	
Catherine Cole	42051 MAIN STREET TEMECULA, CA 92590	Secretary	
SHERRY BELINDA WILLIAMS-FLETCHER	45600 CORTE ROYAL TEMECULA, CA 92592	Chief Executive Officer	
Additional Officers			
Officer Name	Officer Address	Position	Stated Position
Beverly Stephenson	41391 KALMIA ST 200 MURRIETA, CA 92562	Chairperson of Board	President
Agent for Service of Process			
Agent Name	JANICE F LUNDAY		
Agent Address	42051 MAIN STREET TEMECULA, CA 92590		
Email Notifications			
Opt-in Email Notifications	Yes, I opt-in to receive entity notifications via email.		
Electronic Signature			
☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.			
Beverly Stephenson		06/25/2026	
Signature		Date	

Page 1 of 1

FY 26/27 Community Service Funding (CSF)
Grant Application

43

THESSALONIKA FAMILY SERVICES INC
dba
MISSION HOPE



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Thessalonika Family Services
(DBA Mission Hope)

Year Organization Founded: *

1983

Website:

<https://www.missionhope.com/>

Mailing Address: *

38950 Mesa Road, Temecula, CA
92592

Number of Paid Staff: *

10

Number of Volunteers: *

384

Contact Name: *

Kristi Piatkowski

Contact Title: *

Development Director

Contact Email: *

Kristi.Piatkowski@missionhope.com

Contact Phone: *

714-260-2699

Alternate Contact Name:

Heather Sanford

Alternate Contact Email:

Heather.Sandford@missionhope.com

Alternate Contact Phone:

562-225-6674

**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Southwest Riverside County

Business License No. *

054787

Geographic Area(s) the Project/Program Serves: *

Temecula, Murrieta

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

Temecula Business License_2026.pdf

95.02KB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Hope Food Pantry

Start Date: *

2026-07-01

End Date: *

2027-06-30

Physical Address of Project/Program *

41760 Rider Way, Temecula, CA 92590

Preferred Payment Method:

(If grant is awarded.)

☒ Check Mailed ☐ Check Picked Up

☐ Electronic File Transfer

Make Check Payable to: *

Mission Hope

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

08/21/1980

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

0995764

Attach State of California Entity Status Letter: *

To find State of California Entity Status Letter,

Certificate of Status_1765478118958.pdf

292.53KB

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

IRS Employer Identification Number (EIN): *

95-3551068

Attach IRS Tax Exempt Determination Letter: *

To find IRS Tax Exempt Determination Letter,

IRS exempt letterTFS.pdf

448.23KB

click the link below:

<https://apps.irs.gov/app/eos/>

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,

Statement of Information 2026.pdf

122.31KB

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990*

You might find IRS Form 990

990 Thessalonika DBA Mission Hope 2023-24.pdf

379.72KB

on the link below:

(990, 990-EZ, 990-PF, 990-T)

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☐ Yes ☒ No

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☒ Executive Committee ☐ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

Mission Hope (DBA of Thessalonika Family Services, Inc.) partners with the community to reduce food insecurity by providing reliable access to healthy food through its Hope Food Pantry. Serving low- and moderate-income families, seniors, veterans, and individuals experiencing hardship, the pantry serves more than 550 households each week, including homebound seniors, families identified by Temecula elementary schools, and unhoused neighbors through day-sack meal distributions. More than a food distribution site, the Hope Food Pantry serves as a gateway to supportive services, connecting individuals with housing resources, employment assistance, and other community programs that promote long-term stability. In 2025/2026, Mission Hope served 316 Temecula households or 655 Temecula residents with access to fresh, healthy food weekly.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☒ Yes ☐ No

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT * OR SPONSORSHIP	AMOUNT: *	MONTH + YEAR FUNDING RECEIVED *	NAME OF CITY GRANT OR SPONSORSHIP
Empowerment Village	\$5,000.00	2025	CSF
Hope Food Pantry	\$10,138.00	2026	CDBG

Project/Program Description

Project/Program Title: Hope Food Pantry

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

Temecula Community Service Fund grant funding will support Mission Hope's Hope Food Pantry, providing low-income Temecula residents with weekly access to fresh, healthy food. During the 2025–2026 fiscal year, the Hope Food Pantry served 655 Temecula residents, including home food delivery for homebound seniors, and partnered with two local elementary schools to provide nutritious food to families facing food insecurity. As the need for assistance continues to grow, the Hope Food Pantry has experienced a 37% increase in demand compared to this time last year.

Beyond food assistance, the Hope Food Pantry serves as a gateway to additional support services. Volunteer Client Advocates assess each household's needs and connect residents with housing resources, employment assistance, healthcare, and other community services that promote long-term stability. By addressing food insecurity while linking residents to supportive resources, the program helps prevent crises from escalating and reduces the risk of homelessness. Grant funding will help ensure Temecula residents continue to have reliable access to healthy food and the resources they need to achieve greater stability and well-being.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

Grant funding will support the ongoing operation of Mission Hope's Hope Food Pantry by helping procure, transport, and distribute healthy food to low-income Temecula residents. Funds will be used to purchase nutritious food, offset utilities necessary for food storage and distribution, support transportation costs for food procurement and home deliveries to seniors.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

City of Temecula grant funding will directly benefit low-income Temecula residents by ensuring they have reliable access to fresh, healthy food and supportive services during times of financial hardship. Conveniently located within the City of Temecula, the Hope Food Pantry is easily accessible, reducing barriers to essential services. Funding will help Mission Hope continue providing weekly food assistance, home deliveries for homebound seniors, and food distributions through two local elementary schools, making it easier for working families to access nutritious food. Volunteer Client Advocates also connect residents with housing, employment, healthcare, and other community resources that promote long-term stability. By addressing food insecurity early, the Hope Food Pantry helps stabilize households, improve health and well-being, and reduce the risk of homelessness.

Mission Hope anticipates serving more than 655 Temecula residents through the Hope Food Pantry during the grant period. A \$10,000 City investment equates to approximately \$15 per resident served, leveraging community partnerships and donated food to maximize impact while providing weekly access

to healthy food and supportive resources. This investment represents a cost-effective approach to reducing hunger, strengthening household stability, and improving quality of life for Temecula residents.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

650

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

384

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY.

City grant funds will be used to purchase nutritious food, support food transportation and home deliveries for homebound seniors, offset utilities required for food storage and distribution.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$278,556.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$1,580,000.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment * vehicles, gasoline, equipment repairs	EXPENSES * \$8,323.00
Facilities/Rent/Insurance * Utilities, insurances, pest control, trash	* \$28,705.00
Supplies * Computer, office supplies, furniture, copier, internet	* \$19,420.00
Services * Housing, utility assistance	* \$131,008.00
Food * Food boxes	* \$1,630,000.00
Other (i.e. Informational Outreach, etc) * Volunteer appreciation, recruitment, misc, printing, outreach	* \$51,100.00
Staffing Expense	* \$201,994.00
TOTAL REVENUE: \$1,868,556.00	TOTAL EXPENSES \$1,868,556.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Thessalonika Family Services (DBA Mission Hope)

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Heather Sanford

President/Authorized Officer Title: *

CEO

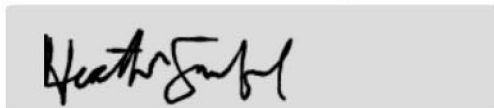
E-mail: *

Heather.Sanford@missionhope.com

Phone: *

562-225-6674

President/Authorized Officer Signature *



Submission Date:

2026-06-29 07:25:35 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

President/Officer Confirmation: *

☒ Verified and Confirmed

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

Kristi Piatkowski, Development Director, Mission Hope

Name, Title, & Organization

If you have any questions, please contact: Betsy.Lowrey@TemeculaCA.gov (951) 693-3959 or Stacey.Brown@TemeculaCA.gov (951) 694-6413



Department of the Treasury
Internal Revenue Service
P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0752153521
June 14, 2018 LTR 4168C 0
95-3551068 000000 00
Input Op: 0752153521 00026968
BODC: TE

THESSALONIKA FAMILY SERVICES
PO BOX 890326
TEMECULA CA 92589-0326



034933

Employer ID number: 95-3551068
Form 990 required: YES

Dear THESSALONIKA FAMILY SERVICES:

We're responding to your request dated June 05, 2018, about your tax-exempt status.

We issued you a determination letter in September 1995, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(03).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period:

- Form 990, Return of Organization Exempt From Income Tax
- Form 990EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990-EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m.,

0752153521
June 14, 2018 LTR 4168C 0
95-3551068 000000 00
Input Op: 0752153521 00026969

THESSALONIKA FAMILY SERVICES
PO BOX 890326
TEMECULA CA 92589-0326

local time, Monday through Friday (Alaska and Hawaii follow Pacific time).

Thank you for your cooperation.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Teri M. Johnson". The signature is fluid and cursive, with the first name "Teri" being more prominent.

Teri M. Johnson
Operations Manager, AM Ops. 3



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 7/9/2026

ESL ID: 2999890971

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 0995764

Entity Name: THESSALONIKA FAMILY SERVICES

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20240746077



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20240746077

Date Filed: 4/11/2024

B2653-9516 04/11/2024 9:53 AM Received by California Secretary of State

Entity Details

Corporation Name THESSALONIKA FAMILY SERVICES
Entity No. 0995764
Formed In CALIFORNIA

Street Address of California Principal Office of Corporation

Street Address of California Office 38950 MESA ROAD
TEMECULA, CA 92592

Mailing Address of Corporation

Mailing Address 38950 MESA ROAD
TEMECULA, CA 92592
Attention Secretary of the Board

Officers

Officer Name	Officer Address	Position(s)
Nicole Albrecht	38950 MESA ROAD #8753 TEMECULA, CA 92592	Chief Financial Officer
Monica Hargis	38950 MESA ROAD #8753 TEMECULA, CA 92592	Secretary
 Heather Sanford	38950 MESA ROAD TEMECULA, CA 92592	Chief Executive Officer

Additional Officers

Officer Name	Officer Address	Position	Stated Position
 Steve Hargis	38950 MESA ROAD TEMECULA, CA 92592	Chairperson of Board	

Agent for Service of Process

Agent Name Nicole Albrecht
Agent Address 41951 REMINGTON AVE
210
TEMECULA, CA 92590

Email Notifications

Opt-in Email Notifications No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

MLH

Signature

04/11/2024

Date

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate (pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California) to engage in, carry on or conduct, in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California; nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

BUSINESS NAME: Thessalonika Family Services

BUSINESS LOCATION: 38950 Mesa Dr, Temecula, CA 92592

BUSINESS OWNER: Steve Hargis
Heather Sanford

DESCRIPTION: Non-Profit Organization

Business License Number: 054787

License Fee: \$4.00

Effective Date: January 24, 2026

Expiration Date: January 31, 2027

Fees paid in accordance with City Ordinance

THESSALONIKA FAMILY SERVICES
38950 MESA DR
TEMECULA, CA 92592

TO BE POSTED IN A CONSPICUOUS PLACE

NOT TRANSFERABLE and NON-REFUNDABLE

FY 26/27 Community Service Funding (CSF)
Grant Application

44

THRIFTING 4 GIFTING

FORMERLY

THE ASSISTANCE LEAGUE



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Thrifting 4 Gifting ("T4G")

Year Organization Founded: *

1989

Website:

thrifting4gifting.org

Mailing Address: *

28720 Via Montezuma
Temecula, CA 92590

Number of Paid Staff: *

0

Number of Volunteers: *

151

Contact Name: *

Diane Sitar

Contact Title: *

Grants Chairman

Contact Email: *

grants@thrifting4gifting.org

Contact Phone: *



Alternate Contact Name:

Denise Lanier

Alternate Contact Email:

president@thrifting4gifting.org

Alternate Contact Phone:



Does the nonprofit have a current City of Temecula Business License? *

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Southwest Riverside County

Business License No. *

061180

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

Temec Business Lic 26-27.pdf

57.07KB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

School Zone

Start Date: *

2026-06-01

End Date: *

2027-05-31

Physical Address of Project/Program *

28720 Via Montezuma, Temecula, CA 92590

Preferred Payment Method:

(If grant is awarded.)

☐ Check Mailed ☐ Check Picked Up

☒ Electronic File Transfer

Make Check Payable to: *

Thrifting 4 Gifting

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

06/15/1989

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

1463456

Attach State of California Entity Status Letter: *

To find State of California Entity Status Letter,

FTB Entity Status Ltr 12-29-25.pdf

371.76KB

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

IRS Employer Identification Number (EIN): *

33-0360419

Attach IRS Tax Exempt Determination Letter: *

To find IRS Tax Exempt Determination Letter,

IRS Non Profit Determination T4G 2026.pdf

19.8KB

click the link below:

<https://apps.irs.gov/app/eos/>

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,

CA Stmt of Information 6-3-26.pdf

127.91KB

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990*

You might find IRS Form 990

T4G 2024-25 Tax Return 6.pdf

260.14KB

on the link below:

(990, 990-EZ, 990-PF, 990-T)

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Application Authorization

Has the organization or any members of the **Board of Directors** of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a **Temecula City Council Member** during the past 12 months? *

☐ Yes ☒ No

Is a **Temecula City Council Member** a member of the **Board of Directors** or an **Officer** of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☐ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

Thriftig 4 Gifting ("T4G") transforms lives and strengthens our communities through philanthropic programs in SW Riverside County. T4G supports six community based philanthropic programs benefiting everyone from infants to adults in SW Riverside County.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☒ Yes ☐ No

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT * OR SPONSORSHIP	AMOUNT: *	MONTH + YEAR FUNDING RECEIVED *	NAME OF CITY GRANT OR SPONSORSHIP
Operation School Bell	\$7,474.00	June 2024	CDBG
School Zone	\$10,138.00	July 2025	CDBG
Foster Youth	\$5,000.00	December 2024	CSF
Foster Youth	\$2,500.00	November 2025	CSF

Project/Program Description

Project/Program Title: School Zone

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT.*

School Zone will provide new school clothes and shoes to extremely low, low- and moderate-income students in the Temecula Unified School District (K-12) . Families with students 5-18 years of age provide documentation showing the total number of household members as well as income source documentation. We partner with Kohl's and/or Target stores to schedule shopping events with each eligible student receiving up to \$150 in tax free school appropriate clothes and shoes. We work closely with Temecula school counselors and staff to ensure that the neediest students are served, including homeless and foster students.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED.*

T4G is a 100% volunteer organization, with no paid staff. We will use 100% of the awarded grant funds to pay for new school appropriate clothes and shoes for students in the Temecula Unified School District. School Zone provides clothing and shoes to five school districts in SW Riverside County. The total program cost for 2026-2027 is estimated to be \$232,500 (1,550 students X \$150/student). We estimate the total cost for the Temecula Unified School District to be \$37,500 (250 students X \$150/student). This grant request would fund 26% of the \$37,500 with the balance paid from T4G's thrift shop revenue.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.*

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

Data shows that the estimated poverty rate for the City of Temecula in 2025 is approximately 7.3%. As was found in a National Institutes of Health study, children who face economic hardship when they are young are at greatest risk for poor outcomes. The effects of poverty increase risks of dropping out of school. School Zone addresses a basic need to encourage school attendance and help keep students in school. By keeping these students engaged in school, we can raise graduation rates allowing the students the opportunity to become productive adults in the City of Temecula.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

*

250

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

*

19

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY.*

Our School Zone program will provide approximately 250 extremely low, low- and moderate-income students in the Temecula Unified School District (K-12) with new school clothes and shoes. Each student will receive up to \$150 in tax free new school clothing and shoes. Every dollar of the requested grant funds will go toward purchase of these clothing items.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$27,500.00
Other grants or funding already awarded for Project/Program, if any None	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$0.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment * NA	EXPENSES * \$0.00
Facilities/Rent/Insurance * N/A	* \$0.00
Supplies * New school clothes and shoes	* \$37,500.00
Services * N/A	* \$0.00
Food * N/A	* \$0.00
Other (i.e. Informational Outreach, etc) * N/A	* \$0.00
Staffing Expense	* \$1,500.00
TOTAL REVENUE: \$37,500.00	TOTAL EXPENSES \$37,500.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Thrifting 4 Gifting ("T4G")

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Denise Lanier

President/Authorized Officer Title: *

President

E-mail: *

president@thrifting4gifting.org

Phone: *



President/Authorized Officer Signature *

Denise Lanier, President

Submission Date:

2026-06-14 11:41:31 AM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

Diane Sitar, Grants Chairman, Thrifting 4 Gifting

Name, Title, & Organization

If you have any questions, please contact: Betsy.Lowrey@TemeculaCA.gov (951) 693-3959 or Stacey.Brown@TemeculaCA.gov (951) 694-6413



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 12/29/2025

ESL ID: 2392523741

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 1463456

Entity Name: THRIFTING 4 GIFTING

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: ftb.ca.gov
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20261185355



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20261185355

Date Filed: 6/3/2026

B4733-1649 06/03/2026 10:11 AM Received by California Secretary of State

Entity Details				
Corporation Name		THRIFTING 4 GIFTING		
Entity No.		1463456		
Formed In		CALIFORNIA		
Street Address of California Principal Office of Corporation				
Street Address of California Office		28720 VIA MONTEZUMA TEMECULA, CA 92590-2510		
Mailing Address of Corporation				
Mailing Address		28720 VIA MONTEZUMA TEMECULA, CA 92590-2510		
Attention		Treasurer		
Officers				
Officer Name		Officer Address	Position(s)	
Fernando A Disla		28720 VIA MONTEZUMA TEMECULA, CA 92590	Chief Financial Officer	
+ Denise Lanier		28720 VIA MONTEZUMA TEMECULA, CA 92590	Chief Executive Officer	
+ Judy Toth		28720 VIA MONTEZUMA TEMECULA, CA 92590	Secretary	
Additional Officers				
Officer Name		Officer Address	Position	Stated Position
None Entered				
Agent for Service of Process				
Agent Name		Fernando Disla		
Agent Address		28720 VIA MONTEZUMA TEMECULA, CA 92590		
Email Notifications				
Opt-in Email Notifications		Yes, I opt-in to receive entity notifications via email.		
Electronic Signature				
☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.				
Fernando Disla		06/03/2026		
Signature		Date		

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California, to engage in, carry on or conduct in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California, nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.

BUSINESS NAME: Thrifting 4 Gifting

BUSINESS LOCATION: 28720 Via Montezuma, Temecula, CA 92590

BUSINESS OWNER: Fernando Disla

THRIFTING 4 GIFTING
28720 VIA MONTEZUMA
TEMECULA, CA 92590

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

DESCRIPTION: Non-Profit Organization

Business License Number: 061180

License Fee: \$35.00

Effective Date: January 29, 2026

Expiration Date: January 31, 2027

Fees paid in accordance with City Ordinance

TO BE POSTED IN A CONSPICUOUS PLACE

NOT TRANSFERABLE and NON-REFUNDABLE

FY 26/27 Community Service Funding (CSF)
Grant Application

45

VETERANS OF FOREIGN WAR
POST 4089



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Veterans of Foreign Wars Post
4089

Year Organization Founded: *

1899

Website:

<https://temeculavalleyvfw.org>

Mailing Address: *

28075 Diaz Rd
Suite 1
Temecula, CA 92590

Number of Paid Staff: *

0

Number of Volunteers: *

532

Contact Name: *

Rolando Martin

Contact Title: *

Adjutant / Secretary

Contact Email: *

rolando.martin.vfw@gmail.com

Contact Phone: *

[REDACTED]

Alternate Contact Name:

Jesse Santillano

Alternate Contact Email:

[REDACTED]

Alternate Contact Phone:

[REDACTED]

**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Temecula

Business License No. *

059456

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

2025-2027 Business License.pdf

95.57KB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

VFW Veterans Serving Veterans

Start Date: *

2026-07-01

End Date: *

2027-06-30

Physical Address of Project/Program *

28075 Diaz Rd Suite 1, Temecula, CA 92590

Preferred Payment Method:

(If grant is awarded.)

- ☐ Check Mailed ☒ Check Picked Up
☐ Electronic File Transfer

Make Check Payable to: *

VFW Post 4089

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

04/26/1984

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☐ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

1245462

Attach State of California Entity Status Letter: *

To find State of California Entity Status Letter,

Certificate of Status.pdf

292.55KB

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESstatus

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,

VFW Statement of Information.pdf

71.76KB

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990 *

You might find IRS Form 990

IRS Tax Exempt Determination Letter pg 1.pdf

108.6KB

on the link below:

(990, 990-EZ, 990-PF, 990-T)

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☐ Yes ☒ No

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☒ Executive Committee ☐ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

To foster camaraderie among United States veterans of overseas conflicts. To serve our veterans, the military, and our communities. To advocate on behalf of all veterans.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Project/Program Description

Project/Program Title: VFW Veterans Serving Veterans

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

The organization provides programs and services that support veterans, military families, and youth within the Temecula community. Funding will help sustain a safe and welcoming gathering place where veterans can connect, build camaraderie, and access peer support through regular community events and activities.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

Programs include veteran-focused social and wellness events such as Steak Nights, Burger Nights, live entertainment, therapeutic activities for veterans experiencing PTSD and related challenges, arts and craft workshops, and attendance at sporting and recreational events. These activities help reduce social isolation, promote emotional well-being, and strengthen community connections among veterans.

Grant funds will also support essential operating expenses necessary to keep the facility open and accessible to veterans, including rent, utilities, insurance, and equipment such as a commercial ice machine. Maintaining the facility ensures veterans have a reliable, safe environment to congregate, socialize, and support one another.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

The organization hosts events recognizing U.S. military branch birthdays and national holidays, preserving military traditions, honoring service members, and bringing together veterans, families, and community members in celebration and remembrance.

In addition, the organization provides resources and supplies for youth programs that promote Americanism, citizenship, civic responsibility, leadership development, and mentorship. Educational activities connect veterans with local youth, fostering respect for military service and encouraging community engagement.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

*

250

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

*

532

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

To support veteran wellness programs, community engagement activities, youth mentorship initiatives, and facility operating expenses that enable ongoing services for veterans and residents of the Temecula area.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$1,200.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$0.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
Ice machine	\$2,000.00
Facilities/Rent/Insurance *	* \$2,400.00
Rent/utilities/insurance	
Supplies *	* \$500.00
Plates, utensils, napkins, cups, bathroom and kitchen supplies, serving containers	
Services *	* \$1,300.00
Sporting activities, Arts & Crafts, entertainment	
Food *	* \$4,500.00
Food, sides, condiments, non-alcoholic beverages, desert	
Other (i.e. Informational Outreach, etc) *	* \$500.00
Military Branch Birthdays, National Holidays celebrations, Youth Programs	
Staffing Expense	* \$0.00
TOTAL REVENUE: \$11,200.00	TOTAL EXPENSES \$11,200.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Veterans of Foreign Wars Post 4089

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Rolando Martin

President/Authorized Officer Title: *

Adjutant / Secretary

E-mail: *

rolando.martin.vfw@gmail.com

Phone: *

3233692759

President/Authorized Officer Signature *



Submission Date:

2026-06-23 05:51:18 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/25/2026

ESL ID: 3423178610

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 1245462

Entity Name: TEMECULA POST NO. 4089 VETERANS OF FOREIGN WARS OF THE UNITED STATES

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 w.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20252401985



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20252401985

Date Filed: 12/11/2025

B4234-9022 12/11/2025 11:41 AM Received by California Secretary of State

Entity Details

Corporation Name TEMECULA POST NO. 4089 VETERANS OF FOREIGN WARS OF THE UNITED STATES
Entity No. 1245462
Formed In CALIFORNIA

Street Address of California Principal Office of Corporation

Street Address of California Office 28075 DIAZ RD
TEMECULA, CA 92590

Mailing Address of Corporation

Mailing Address 28075 DIAZ RD
TEMECULA, CA 92590
Attention Post Commander/Quartermaster

Officers

Officer Name	Officer Address	Position(s)
JESUS R HERNANDEZ	28075 DIAZ ROAD TEMECULA, CA 92590	Chief Financial Officer
ROLANDO R MARTIN	28075 DIAZ ROAD TEMECULA, CA 92590	Secretary
■ JESUS SANTILLANO	28075 DIAZ ROAD TEMECULA, CA 92590	Chief Executive Officer

☒ The entity's bylaws allow the CEO (President) to be the Secretary or CFO (Treasurer).

Additional Officers

Officer Name	Officer Address	Position	Stated Position
None Entered			

Agent for Service of Process

Agent Name ELYSE M BELTZ
Agent Address 30777 LA RAY LANE
MENIFEE, CA 92596

Email Notifications

Opt-in Email Notifications Yes, I opt-in to receive entity notifications via email.

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

Elyse Beltz

Signature

12/11/2025

Date

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate (pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California) to engage in, carry on or conduct, in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California; nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

BUSINESS NAME: Veterans of Foreign Wars Post 4089

BUSINESS LOCATION: 28075 Diaz Rd, Temecula, CA 92590

BUSINESS OWNER: Rolando Martin
Jesus Santillano

DESCRIPTION: Non-Profit Organization

Business License Number: 059456

License Fee: \$4.00

Effective Date: October 31, 2025

Expiration Date: January 31, 2027

Fees paid in accordance with City Ordinance

VETERANS OF FOREIGN WARS POST 4089
28075 DIAZ RD
TEMECULA, CA 92590

TO BE POSTED IN A CONSPICUOUS PLACE

NOT TRANSFERABLE and NON-REFUNDABLE

FY 26/27 Community Service Funding (CSF)
Grant Application

46

VNW CIRCLE OF CARE



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

VNW Circle of Care, Inc.

Year Organization Founded: *

1999

Website:

www.circleofcareministries.org

Mailing Address: *

26090 Ynez Road STE A
Temecula, CA 92591

Number of Paid Staff: *

0

Number of Volunteers: *

50

Contact Name: *

Charles Keim

Contact Title: *

CEO

Contact Email: *

chuck@circleofcareministries.org

Contact Phone: *

9519733581

Alternate Contact Name:

Terri Keim

Alternate Contact Email:

terri@circleofcareministries.org

Alternate Contact Phone:

9519733582

Does the nonprofit have a current City of Temecula Business License? *

☐ Yes ☒ No

Geographic Area(s) the Organization Serves: *

Southwest Riverside County

A current City of Temecula Business License may be required to submit prior to fund disbursement. *

☒ Understand

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Circle of Care Food Ministry

Start Date: *

1999-09-15

End Date: *

2027-06-30

Physical Address of Project/Program *

26090 Ynez Road, Temecula, CA 92591

Preferred Payment Method:

(If grant is awarded.)

☐ Check Mailed ☒ Check Picked Up

☐ Electronic File Transfer

Make Check Payable to: *

VNW Circle of Care Inc.

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

10/02/2003

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

2527781

Attach State of California Entity Status Letter: *

To find State of California Entity Status Letter,

State Of CA.pdf

392.55KB

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

IRS Employer Identification Number (EIN): *

73-1691246

Attach IRS Tax Exempt Determination Letter: *

To find IRS Tax Exempt Determination Letter,

IRS status.pdf

837.02KB

click the link below:

<https://apps.irs.gov/app/eos/>

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

Attach Nonprofit Statement of Information: *

To find Nonprofit Statement of Information,

Board of Directors.docx

13.76KB

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☐ Detailed info about your charity found on the State Registry Search Tool (link below)

Attach First Page of Most Recent Form 990*

You might find IRS Form 990

990 1st page.pdf

58.42KB

on the link below:

(990, 990-EZ, 990-PF, 990-T)

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Application Authorization

Has the organization or any members of the **Board of Directors** of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a **Temecula City Council Member** during the past 12 months? *

☐ Yes ☒ No

Is a **Temecula City Council Member** a member of the **Board of Directors** or an **Officer** of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☐ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Project/Program Description

Project/Program Title: Circle of Care Food Ministry

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

If awarded, the grant from the City of Temecula would help cover daily operations and the transportation of all donations and acquisitions.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

If awarded, the funds from this grant would help cover costs like Penske truck rentals, fuel for donation pickups, liability and vehicle insurance, DMV tags for the Circle of Care van, and warehouse supplies. This could include purchasing new freezers if needed, along with repairs to existing equipment like pallet jacks, the forklift, and the walk-in refrigerator, pallet wrapping, plus totes for picking up food donations and carts for distributing food to our recipients. It would also help fund the purchase of food from Feeding America and other vendors as needed, as well as accounting services.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

Circle of Care supports Temecula residents by providing families and individuals due to food insufficiency to help ease their monthly expenses. This assistance allows them to free up funds for rent, mortgages, prescriptions, and other regular costs. We have many testimonies from our recipients how the assistance they received from Circle of Care help save their homes and, in some cases, their families, helping to alleviate financial stresses.

Numbers below in 3B & C are Annual.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

*

86,112

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

*

2,340

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

Penske Truck Rental, fuel for food transportation, purchase of food from Feeding America or other vendors, Liability insurance, vehicle insurance, DMV registration for Circle of Care van, warehouse supplies including totes, bags, tape, pallet wrapping, cardboard boxes, repairs and or purchase of equipment, such as pallet jack, pallet scales, forklift, walk in refrigerator, new freezers, also accounting services , such as yearly 990.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$24,000.00
Other grants or funding already awarded for Project/Program, if any CID Riverside Chuck Washington	* \$5,000.00
In-Kind match amount or volunteer credit hours estimated amount	* \$1,300,000.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
Penske rentals, fuel, freezers	\$7,600.00
Facilities/Rent/Insurance *	*
Liability Insurance & Van Insurance, DMV	\$5,293.70
Supplies *	*
Totes, packing tape, boxes, pallet wrap	\$1,800.00
Services *	*
accounting 990, CR&R	\$1,900.00
Food *	*
Food purchases	\$2,000.00
Other (i.e. Informational Outreach, etc) *	*
Printing, Ink	\$500.00
Staffing Expense	*
	\$0.00
TOTAL REVENUE:	TOTAL EXPENSES
\$1,339,000.00	\$19,093.70

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
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- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

VNW Circle of Care, Inc.

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Charles P Keim

President/Authorized Officer Title: *

CEO/ Co-Founder

E-mail: *

chuck@circleofcareministries.org

Phone: *

9519733581

President/Authorized Officer Signature *



Submission Date:

2026-05-30 04:01:55 PM

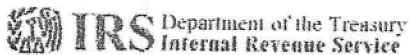
Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:



Department of the Treasury
Internal Revenue Service
P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248153327
Sep. 16, 2015 LTR 4168C 0
73-1691246 000000 00

00009960

BODC: TE

VNW CIRCLE OF CARE
% CHARLES P KEIM
26090 YNEZ RD
TEMECULA CA 92591

Employer Identification Number: 73-1691246
Person to Contact: Ms. Espelage
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Sep. 04, 2015, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in March 2007.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your 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.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 5/30/2026

ESL ID: 1924456991

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 2527781

Entity Name: VNW CIRCLE OF CARE, INC.

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: ftb.ca.gov
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20261205961

B4740-1839 06/05/2026 3:56 PM Received by California Secretary of State



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20261205961

Date Filed: 6/5/2026

Entity Details

Corporation Name VNW CIRCLE OF CARE, INC.
Entity No. 2527781
Formed In CALIFORNIA

Street Address of California Principal Office of Corporation

Street Address of California Office 26090 YNEZ ROAD
TEMECULA, CA 92591

Mailing Address of Corporation

Mailing Address 26090 YNEZ ROAD
SUITE A
TEMECULA, CA 92591

Attention

Officers

Officer Name	Officer Address	Position(s)
CHARLES KEIM	26090 YNEZ ROAD, SUITE A TEMECULA, CA 92591	Chief Executive Officer
Sonia Rodriguez	26090 Ynez Road, Suite A Temecula, CA 92591	Secretary
Terri Keim	28641 MURRIETA RD MENIFEE, CA 92586	Chief Financial Officer

Additional Officers

Officer Name	Officer Address	Position	Stated Position
Brian Jensen	32675 TEMECULA PKWY A TEMECULA, CA 92592	Other	Board member
Kathleen Shaw	42355 SHAW LANE MURRIETA, CA 92562	Other	Board Member
Gary Jones	9430 HILMER DR LA MESA, CA 91942	Other	Board Member

Agent for Service of Process

Agent Name CHARLES KEIM
Agent Address 26090 YNEZ ROAD, SUITE A
TEMECULA, CA 92591

Email Notifications

Opt-in Email Notifications Yes, I opt-in to receive entity notifications via email.

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

Terri Keim

Signature

06/05/2026

Date

FY 26/27 Community Service Funding (CSF)
Grant Application

47

VOICES FOR CHILDREN



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Voices for Children

Year Organization Founded: *

1980

Website:

www.speakupnow.org

Mailing Address: *

P.O. Box 7219, Riverside, CA
92505

Number of Paid Staff: *

71

Number of Volunteers: *

1,390

Contact Name: *

Lovisa Stannow

Contact Title: *

Interim President & CEO

Contact Email: *

LovisaS@speakupnow.org

Contact Phone: *

[REDACTED]

Alternate Contact Name:

Rebecca Rader

Alternate Contact Email:

RebeccaR@speakupnow.org

Alternate Contact Phone:

[REDACTED]

**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Riverside County and San Diego County

Business License No. *

055636

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

VFC City of Temecula Bus Lic Exp. 1.27.pdf

179.83KB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$2,500.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Court Appointed Special Advocate (CASA) Volunteer Recruitment in Temecula

Start Date: *

2026-07-01

End Date: *

2027-06-30

Physical Address of Project/Program *

1 Ridgeway Drive, Ste. 120, Temecula, CA 92590

Preferred Payment Method:

(If grant is awarded.)

☐ Check Mailed ☐ Check Picked Up

☒ Electronic File Transfer

Make Check Payable to: *

Voices for Children

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

12/01/1982

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

1155526

To find State of California Entity Status Letter,

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

Attach State of California Entity Status Letter: *

VFC State of California Entity Status Letter 6.16.26.pdf

205.5KB

IRS Employer Identification Number (EIN): *

95-3786047

To find IRS Tax Exempt Determination Letter,

click the link below:

<https://apps.irs.gov/app/eos/>

Attach IRS Tax Exempt Determination Letter: *

Voices for Children IRS tax-exempt determination letter August 2024.pdf

611.59KB

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

To find Nonprofit Statement of Information,

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Attach Nonprofit Statement of Information: *

VFC stmt of info.pdf

127.51KB

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☒ Detailed info about your charity found on the State Registry Search Tool (link below)

You might find IRS Form 990

on the link below:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

State Registry Search Tool:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Attach First Page of Most Recent Form 990*

VOICES FOR CHILDREN IRS 990 p1.pdf

212.21KB

(990, 990-EZ, 990-PF, 990-T)

Attach State Registry Document/Info*

VFC State Registry Document Info.pdf

2.11MB

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☐ Yes ☒ No

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☒ Executive Committee ☐ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

The mission of Voices for Children (VFC) is to transform the lives of abused, abandoned, or neglected children by providing them with trained, volunteer Court Appointed Special Advocates (CASAs). CASA volunteers serve as consistent, caring advocates who ensure children in foster care have access to education, healthcare, stable housing, and supportive services.

Through its Riverside County CASA program, VFC provides advocacy to children living in foster care who reside in Temecula and surrounding communities. In fiscal year (FY) 2026–27, VFC will provide approximately 20 Temecula children and 750 Riverside County children overall with their own dedicated CASA volunteers. These volunteers advocate for children's needs in court, at school, and in the community, ensuring those needs are identified and addressed in a timely manner.

To meet this objective, VFC recruits, trains, and screens community members to serve as CASA volunteers. CASA volunteers commit to serving for at least one year and dedicate time each month to building relationships with the children they serve, communicating with caregivers and service providers, and submitting objective reports to the Juvenile Court. Through this work, VFC supports the safety, stability, and well-being of children in foster care while strengthening outcomes for Temecula families and the broader community.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☒ Yes ☐ No

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT * OR SPONSORSHIP	AMOUNT: *	MONTH + YEAR FUNDING RECEIVED *	NAME OF CITY GRANT OR SPONSORSHIP
Court Appointed Special Advocate (CASA) Program	\$10,138.00	July 2025	Community Development Block Grant (CDBG)
Court Appointed Special Advocate (CASA) Program	\$7,474.00	July 2024	Community Development Block Grant (CDBG)
Court Appointed Special Advocate (CASA) Volunteer Recruitment in Temecula	\$2,500.00	November 2025	City of Temecula Community Service Funding

Project/Program Description

Project/Program Title: Court Appointed Special Advocate (CASA) Volunteer Recruitment in Temecula

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT.*

VFC respectfully requests \$2,500 to enhance CASA volunteer recruitment efforts focused on Temecula residents. The CASA program depends on trained community volunteers to provide vital advocacy to children in foster care, and Temecula has consistently been one of VFC's strongest sources of engaged volunteers.

Grant funds will be used for Temecula-based volunteer recruitment activities, including community outreach, informational sessions, and marketing materials designed to engage civic-minded residents interested in serving children in foster care. These efforts support the recruitment, screening, and training of new CASA volunteers from Temecula who will be matched with children who have experienced abuse and neglect.

In fiscal year 2025–26, VFC recruited and trained more than 125 new CASA volunteers, including at least 18 from Temecula. Temecula volunteers represented approximately 11% of VFC's active Riverside County CASA volunteers, demonstrating the City's strong tradition of community service. By continuing targeted recruitment in Temecula, VFC seeks to sustain and expand this local volunteer base so that more children in foster care can receive consistent, individualized advocacy from trained CASA volunteers.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED.*

If awarded, City of Temecula Community Service Funding grant funds will be used exclusively to support CASA volunteer recruitment activities in Temecula. Specifically, the grant funding will be allocated as follows:

- a. \$250 — Community Event Vendor Fee: Vendor/exhibitor fee for participation in the All-Chamber Mega Mixer or a similar Temecula-based community event, allowing VFC to engage directly with Temecula residents interested in volunteering as CASA advocates.
- b. \$2,250 — Local Radio Advertising: Purchase of radio advertising on Temecula-area stations to promote the CASA program and encourage Temecula residents to apply to become CASA volunteers.

These outreach efforts are designed to increase awareness of the CASA program within Temecula and recruit additional Temecula residents to serve as CASA volunteers for children residing in foster care.

VFC will utilize non-City funds to support additional outreach activities in Temecula, including participation in other local events and supplemental print, digital, and radio advertising. In the previous fiscal year, VFC participated in or presented at multiple Temecula-based events and organizations, including the Interfaith Council Awards Ceremony, Rotary Club of Old Town Temecula, Rotary Club of Temecula, State of the City event, Temecula Valley Pride, and the Walk of Hope Parade.

Together, these activities strengthen local awareness and support recruitment of volunteers who provide

direct advocacy services to children in foster care. These efforts are ultimately designed to bolster word-of-mouth awareness of VFC and the rewarding experience of being a CASA volunteer to a child in need.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

If awarded, City of Temecula Community Service Funding will directly benefit Temecula residents by strengthening CASA volunteer recruitment efforts focused on serving Temecula children involved in the foster care system.

First, this funding will benefit local children in foster care by increasing the number of trained CASA volunteers available to advocate on their behalf. Children in foster care often experience frequent changes in placement, school, and caregivers. A CASA volunteer provides consistent, ongoing advocacy to ensure that a child's educational, health, and placement needs are identified and addressed. For many children, a CASA volunteer is the only stable adult presence during a time of significant disruption. By recruiting additional Temecula-based CASA volunteers, this grant helps ensure that more local children receive timely, individualized advocacy.

Second, this funding will benefit Temecula residents who serve as CASA volunteers. Temecula has a strong tradition of civic engagement, and residents have historically made up a meaningful portion of VFC's volunteer base. Grant-supported outreach activities will engage Temecula community members interested in volunteering, providing them with a structured opportunity to serve vulnerable children and contribute positively to the local community.

Finally, this funding benefits the broader Temecula community by helping reduce long-term challenges associated with foster care, including educational disruption, housing instability, and involvement with the justice system. CASA advocacy supports better outcomes for children, which in turn helps strengthen families, schools, and neighborhoods within Temecula.

All City grant funds will be used exclusively for Temecula-based outreach and recruitment activities, ensuring that the benefits of this program are localized, measurable, and aligned with the City's Community Service Funding priorities.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

*

70

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

*

49

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

VFC respectfully requests \$2,500 to support CASA volunteer recruitment efforts in Temecula. Funding will support local outreach events and advertising to engage Temecula residents as CASA volunteers, increasing advocacy capacity for Temecula children entering foster care while offering Temecula residents meaningful opportunities to give back to their community.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$2,500.00
Amount contributed to the Project/Program by the Applicant Organization	* \$6,000.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$0.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment * N/A	EXPENSES * \$0.00
Facilities/Rent/Insurance * N/A	* \$0.00
Supplies * N/A	* \$0.00
Services * N/A	* \$0.00
Food * N/A	* \$0.00
Other (i.e. Informational Outreach, etc) * Event registration, advertising, etc.	* \$6,000.00
Staffing Expense	* \$2,500.00
TOTAL REVENUE: \$8,500.00	TOTAL EXPENSES \$6,000.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

Voices for Children

Requested Amount:

\$2,500.00

President/Authorized Officer Name: *

James Scoffin

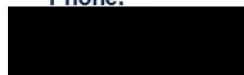
President/Authorized Officer Title: *

Chief Financial Officer

E-mail: *

JamesS@speakupnow.org

Phone: *



President/Authorized Officer Signature *

James Scoffin

Submission Date:

2026-06-25 04:57:20 PM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

Brian Hutchins, Grants Officer, Voices for Children

Name, Title, & Organization

If you have any questions, please contact: Betsy.Lowrey@TemeculaCA.gov (951) 693-3959 or Stacey.Brown@TemeculaCA.gov (951) 694-6413



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
PO Box 2508
Cincinnati, OH 45201

VOICES FOR CHILDREN
2851 MEADOW LARK DR
SAN DIEGO, CA 92123-2709

Date:
August 13, 2024
Employer ID number:
95-3786047
Form 990 required:
990
Person to contact:
Name: Jeffery Miller
ID number: 1001731108

Dear Sir or Madam:

We're responding to your request dated July 19, 2024, about your tax-exempt status.

We issued you a determination letter in December 1982, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC .

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax-deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period.

- Form 990, Return of Organization Exempt From Income Tax
- Form 990-EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific time).

Thank you for your cooperation.

Sincerely,

Stephen A. Martin

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/16/2026

ESL ID: 4226036856

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 1155526

Entity Name: VOICES FOR CHILDREN

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20260770625



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20260770625

Date Filed: 4/7/2026

B4570-5295 04/07/2026 10:46 AM Received by California Secretary of State

Entity Details				
Corporation Name		VOICES FOR CHILDREN		
Entity No.		1155526		
Formed In		CALIFORNIA		
Street Address of California Principal Office of Corporation				
Street Address of California Office		2851 MEADOWLARK DR SAN DIEGO, CA 92123		
Mailing Address of Corporation				
Mailing Address		2851 MEADOWLARK DR SAN DIEGO, CA 92123		
Attention		James Scoffin		
Officers				
Officer Name		Officer Address	Position(s)	
Joshua Kim		2851 MEADOW LARK DR SAN DIEGO, CA 92123	Secretary	
James R Scoffin		2851 Meadowlark Dr San Diego, CA 92123	Chief Financial Officer	
+ Lovisa Stannow		2851 MEADOWLARK DR SAN DIEGO, CA 92123	Chief Executive Officer	
Additional Officers				
Officer Name		Officer Address	Position	Stated Position
None Entered				
Agent for Service of Process				
Agent Name		JAMES SCOFFIN		
Agent Address		2851 MEADOWLARK DR SAN DIEGO, CA 92123		
Email Notifications				
Opt-in Email Notifications		No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.		
Electronic Signature				
☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.				
<u>james scoffin</u>		<u>04/07/2026</u>		
Signature		Date		

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate (pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California) to engage in, carry on or conduct, in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California; nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

BUSINESS NAME: Voices for Children

BUSINESS LOCATION: 1 Ridgeway Dr, 120, Temecula, CA 92590

DESCRIPTION: Non-Profit Organization

BUSINESS OWNER: James Scoffin

Business License Number: 055636

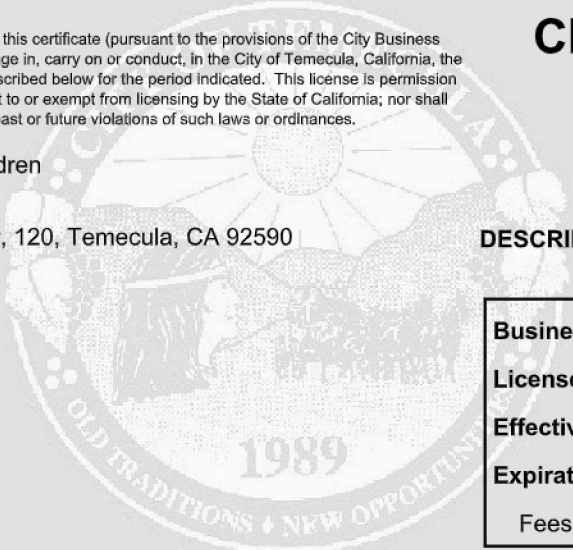
License Fee: \$4.00

Effective Date: October 27, 2025

Expiration Date: January 31, 2027

Fees paid in accordance with City Ordinance

VOICES FOR CHILDREN
9370 CHESAPEAKE DR., 210
SAN DIEGO, CA 92123



TO BE POSTED IN A CONSPICUOUS PLACE

NOT TRANSFERABLE and NON-REFUNDABLE

FY 26/27 Community Service Funding (CSF)
Grant Application

48

VSSN

VETERANS SUPPLEMENTAL
SUPPORT NETWORK



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

VSSN

Year Organization Founded: *

2010

Website:

vetsupportnet.org

Mailing Address: *

41593 Winchester Rd
Ste 200
Temecula CA 92590

Number of Paid Staff: *

2

Number of Volunteers: *

247

Contact Name: *

Daisy Tate

Contact Title: *

Board Chair

Contact Email: *

dtate@vetsupportnet.org

Contact Phone: *

415-779-8776

Alternate Contact Name:

Marcellus Benton

Alternate Contact Email:

mbenton@vetsupportnet.org

Alternate Contact Phone:

415-779-8776

**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

Geographic Area(s) the Organization Serves: *

Temecula, Murrieta, Wildomar, Menifee

Business License No. *

054652

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

2026-2027 VSSN.Temecula Business License.pdf

95.52KB

<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Veteran & Military Family Healthcare Workforce Mobility Initiative

Start Date: *

2026-07-01

End Date: *

2027-06-30

Physical Address of Project/Program *

41593 Winchester Rd St 200

Preferred Payment Method:

(If grant is awarded.)

☐ Check Mailed ☐ Check Picked Up

☒ Electronic File Transfer

Make Check Payable to: *

VETERANS SUPPLEMENTAL SUPPORT NETWORK

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

09/11/2013

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

CT0260255

To find State of California Entity Status Letter,

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

Attach State of California Entity Status Letter: *

VSSN Entity Status Letter.pdf

392.56KB

IRS Employer Identification Number (EIN): *

46-2705469

To find IRS Tax Exempt Determination Letter,

click the link below:

<https://apps.irs.gov/app/eos/>

Attach IRS Tax Exempt Determination Letter: *

Copy of vssn tax exempt0001.pdf

501.19KB

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

To find Nonprofit Statement of Information,

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Attach Nonprofit Statement of Information: *

Certificate of Status_1781632767040.pdf

292.53KB

Provide further verification as follows: *

(one required, both preferred)

☒ First Page of most recent IRS Form 990

☒ Detailed info about your charity found on the State Registry Search Tool (link below)

You might find IRS Form 990

on the link below:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Attach First Page of Most Recent Form 990*

A1 - MOST RECENT FORM 990.pdf

5.37MB

(990, 990-EZ, 990-PF, 990-T)

State Registry Search Tool:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Attach State Registry Document/Info*

VSSN Registry Info.pdf

730.11KB

Application Authorization

Has the organization or any members of the **Board of Directors** of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a **Temecula City Council Member** during the past 12 months? *

☐ Yes ☒ No

Is a **Temecula City Council Member** a member of the **Board of Directors** or an **Officer** of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☐ Executive Committee ☒ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

VSSN's mission is to end and prevent suicide, homelessness, and hardship within military and veteran communities.

VSSN strengthens the well-being, community connection, and career mobility of veterans, service members, military families, and the organizations that serve them. VSSN provides training, convening, resource navigation, and community partnership opportunities that help military-connected residents connect with education, employment, healthcare, and civic resources.

Through this project, VSSN will focus on healthcare workforce mobility and provider/employer readiness by offering yearlong training access through VSSN Learn and quarterly Discussions in Healthcare convenings at MSJC Temecula Valley Campus. MSJC Temecula Valley Campus will serve as the local venue for the convenings. Training will be delivered through VSSN Learn and other invited education or workforce resources as appropriate.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Project/Program Description

Project/Program Title: Veteran & Military Family Healthcare Workforce Mobility Initiative

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT.*

The City of Temecula grant will support VSSN's Veteran & Military Family Healthcare Workforce Mobility Initiative, a yearlong program serving Temecula residents through quarterly in-person Discussions in Healthcare convenings at MSJC Temecula Valley Campus and ongoing training access through VSSN Learn.

MSJC Temecula Valley Campus will serve as the local venue for the quarterly convenings. MSJC may be invited to share information about its own student or workforce programs when appropriate, but MSJC is not being presented as the training provider or the sole healthcare pathway for this initiative. The yearlong training component will be delivered through VSSN Learn and other invited education or workforce resources as appropriate.

The initiative will bring together Temecula veterans, military-family residents, students and adult learners, healthcare professionals, providers, employers, business owners, practitioners, and healthcare-related organizations across the local healthcare field. Participants may include representatives from start-ups, small practices, clinics, nonprofit providers, education organizations, workforce organizations, and larger healthcare employers. The purpose is to strengthen healthcare workforce mobility, improve employer and provider readiness, and better understand the needs of military-connected families in healthcare settings.

Each quarterly convening will include a focused healthcare workforce discussion, military culture and workplace competency learning, employer/provider engagement, resource sharing, and a short participant survey. VSSN will collect practical program data such as Temecula residency or connection, participant role, military connection, healthcare sector, workforce needs, training interests, and employer/provider priorities. VSSN will not collect protected health information, medical history, diagnosis, or confidential employment records.

Grant funding will help VSSN expand an existing healthcare discussion effort into a structured, measurable, yearlong workforce mobility initiative with direct benefit to Temecula residents.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED.*

City grant funds will be used to purchase the following documented program expenses for VSSN's Veteran & Military Family Healthcare Workforce Mobility Initiative:

*MSJC Temecula Valley Campus facility rental
(lecture room, classroom space, audio/visual support, technology setup, and campus technical assistance costs for quarterly Discussions in Healthcare convenings)

*Annual software-as-a-service access through VSSN Learn
(yearlong training access for military culture, healthcare workforce readiness, workplace communication, and interpersonal competency content)

*Local catering for quarterly convenings

(light breakfast, refreshments, and participant hospitality for quarterly Discussions in Healthcare sessions)

*Participant materials

(printed agendas, discussion guides, survey forms, sign-in/check-in sheets, printed training or resource copies, folders, pens, and participant handouts)

*Survey and check-in materials

(QR code signage, registration materials, survey access signs, table signs, clipboards, and related supplies used to collect participant feedback)

*Name badges and lanyards

(identification for participants, employers, providers, volunteers, presenters, and resource partners)

*Resource packets

(printed local resource lists, healthcare workforce information, VSSN Learn access instructions, employer/provider contact sheets, and folders or binders for participant use)

VSSN will prioritize Temecula-based vendors whenever possible. Paid invoices and receipts will be maintained for all grant-funded purchases. City funds will not be used for salaries, scholarships, debt, fundraising, or political activity.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

This project benefits Temecula residents by creating a local healthcare workforce mobility network for veterans, military-family residents, students and adult learners, healthcare professionals, job seekers, business owners, and practitioners.

Through VSSN's community outreach and survey feedback, military-connected residents and healthcare participants have identified barriers to entering, advancing, or connecting with healthcare education and employment opportunities. This initiative gives residents a local opportunity to meet healthcare employers, learn about healthcare workforce education and training opportunities, access competency training through VSSN Learn, and participate in discussions about how healthcare systems can better serve military-connected families.

The project also benefits Temecula healthcare providers, employers, and service organizations by creating a structured setting to hear directly from residents, learners, veterans, military families, and healthcare professionals about workforce barriers, training needs, recruitment challenges, and service gaps. This local feedback will help VSSN guide future training, employer engagement, and community partnerships that are responsive to Temecula's healthcare workforce needs.

VSSN will track Temecula ZIP code or Temecula connection, participant role, military connection, healthcare sector, training interests, employer/provider participation, and survey feedback. This will allow VSSN to report clearly to the City who was served, what needs were identified, and how grant funds supported Temecula residents. VSSN also intends to prepare a final outcome summary for the City and, if appropriate, share project highlights at the annual Temecula Veterans Breakfast, where VSSN has previously participated.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

150

*

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

10

*

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY.*

City grant funds will be used to buy documented program expenses for VSSN's Veteran & Military Family Healthcare Workforce Mobility Initiative, including MSJC Temecula Valley Campus facility rental for quarterly Discussions in Healthcare convenings, lecture room/classroom space, audio/visual and technical assistance costs, annual software-as-a-service access through VSSN Learn, local catering and refreshments for four quarterly convenings, printed participant packets, discussion guides, survey and check-in materials, QR code signage, table identification materials, name badges, lanyards, folders or binders, resource lists, VSSN Learn access instructions, and employer/provider materials.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$500.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$2,000.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment *	EXPENSES *
Survey/check-in tools, QR code signage, name badges, lanyards, table identification, and data collection materials	\$450.00
Facilities/Rent/Insurance *	* \$2,880.00
MSJC Temecula Valley Campus facility, lecture room, event administration, or campus support costs for quarterly convenings	
Supplies *	* \$790.00
Printed participant packets, resource guides, survey forms, folders, handouts, table supplies, and employer/provider materials	
Services *	* \$3,000.00
Yearlong VSSN training platform access, military culture/workplace and other core competency training access, and survey/reporting support	
Food *	* \$2,880.00
Local catering/refreshments for four quarterly convenings, estimated at up to 60 participants per session	
Other (i.e. Informational Outreach, etc) *	* \$2,500.00
VSSN-funded outreach and final reporting materials, including printed invitation sheets, participant follow-up materials, final outcome summary copies, and report/presentation materials.	
Staffing Expense	* \$12,000.00

TOTAL REVENUE:

\$12,500.00

TOTAL EXPENSES

\$12,500.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

VSSN

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Daisy Tate

President/Authorized Officer Title: *

Executive Director

E-mail: *

dtate@vetsupportnet.org

Phone: *

415-779-8776

President/Authorized Officer Signature *

Daisy Tate

Submission Date:

2026-06-16 11:26:32 AM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

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

DEPARTMENT OF THE TREASURY

Date: SEP 11 2013

VETERANS SUPPLEMENTAL SUPPORT
NETWORK
23705 KATHRYN
MURRIETA, CA 92562

Employer Identification Number:
46-2705469
DLN:
17053184319003
Contact Person:
JERRY FIERRO ID# 31119
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
April 2, 2013
Contribution Deductibility:
Yes
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.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

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

Sincerely,



Director, Exempt Organizations

Enclosure: Publication 4221-PC

Letter 947 (DO/CG)



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 6/16/2026

ESL ID: 2602945033

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 3557670

Entity Name: VETERANS SUPPLEMENTAL SUPPORT NETWORK

- ☒ 1. The entity is in good standing with the Franchise Tax Board.
- ☐ 2. The entity is **not** in good standing with the Franchise Tax Board.
- ☒ 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- ☐ 4. We do not have current information about the entity.
- ☐ 5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: **ftb.ca.gov**
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

California

Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)



BA20261321920

B4787-8803 06/24/2026 10:22 AM Received by California Secretary of State



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20261321920

Date Filed: 6/24/2026

Entity Details

Corporation Name VETERANS SUPPLEMENTAL SUPPORT NETWORK
Entity No. 3557670
Formed In CALIFORNIA

Street Address of California Principal Office of Corporation

Street Address of California Office 41593 WINCHESTER RD
200
TEMECULA, CA 92590

Mailing Address of Corporation

Mailing Address 41593 WINCHESTER RD
STE 200
TEMECULA, CA 92590
Attention Daisy Tate

Officers

Officer Name	Officer Address	Position(s)
DAISY TATE	41593 WINCHESTER RD STE 200 TEMECULA, CA 92590	Chief Executive Officer
Constance Carlisle	41593 Winchester Rd ste 200 Temecula, CA 92590	Chief Financial Officer
Dexter Jasper	41593 Winchester Rd ste 200 Temecula, CA 92590	Secretary

Additional Officers

Officer Name	Officer Address	Position	Stated Position
■ Herman Noah	41593 WINCHESTER RD STE 200 TEMECULA, CA 92590	Vice President	
Kevin Birkinsha	41593 WINCHESTER RD 200 TEMECULA, CA 92590	Other	Managing Member
■ Daisy Tate	23705 KATHRYN ST MURRIETA, CA 92590	Chairperson of Board	CEO, Chair
■ Constance Carlisle	41593 WINCHESTER RD 200 TEMECULA, CA 92590	Assistant Secretary	Treasurer

Agent for Service of Process

Agent Name DAISY TATE
Agent Address 23705 KATHRYN ST
MURRIETA, CA 92562

Email Notifications

Opt-in Email Notifications Yes, I opt-in to receive entity notifications via email.

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

Daisy Tate

Signature

06/24/2026

Date

BUSINESS LICENSE CERTIFICATE

The person, firm or corporation named below is hereby granted this certificate (pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California) to engage in, carry on or conduct, in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California; nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.

CITY OF TEMECULA

Finance Department
41000 Main Street
Temecula, CA 92590

BUSINESS NAME: Veterans Supplemental Support Network

BUSINESS LOCATION: 41593 Winchester Rd, 200, Temecula, CA 92590

DESCRIPTION: Non-Profit Organization

BUSINESS OWNER: Dexter Jasper
Daisy Tate

Business License Number: 054652
License Fee: \$4.00
Effective Date: November 23, 2025
Expiration Date: January 31, 2027
Fees paid in accordance with City Ordinance

VETERANS SUPPLEMENTAL SUPPORT NETWORK
41593 WINCHESTER RD, 200
TEMECULA, CA 92590

TO BE POSTED IN A CONSPICUOUS PLACE

NOT TRANSFERABLE and NON-REFUNDABLE

FY 26/27 Community Service Funding (CSF)
Grant Application

49

WORKS OF MERCY



Community Service Funding Application

Organization

<https://temeculaca.gov/grants>

CHECK THE BOX TO CONFIRM YOU HAVE READ COMMUNITY SERVICE FUNDING GRANT PROGRAM POLICY (link above) *

☒ Confirm

Applicant Organization Name: *

Works of Mercy

Year Organization Founded: *

2026

Website:

worksofmercy.net

Mailing Address: *

41875 C Street
Temecula, CA 92592

Number of Paid Staff: *

0

Number of Volunteers: *

128

Contact Name: *

Bob Valdillez

Contact Title: *

President

Contact Email: *

scaworksofmercy@sbdiocese.org

Contact Phone: *

(951) 676-2348

Alternate Contact Name:

Ana Rafferty

Alternate Contact Email:

[REDACTED]

Alternate Contact Phone:

[REDACTED]

**Does the nonprofit have a current City of Temecula
Business License? ***

☒ Yes ☐ No

*

Geographic Area(s) the Organization Serves: *

Riverside County

Business License No. *

058231

Geographic Area(s) the Project/Program Serves: *

Temecula

CSF GRANT MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Copy of Business License *

City Business license exp Jan2027.jpg

79.66KB



<https://css.temeculaca.gov>

Project/Program

Amount Requested: *

\$10,000.00

MAX: \$10,000 PER ORG

Project/Program Title: *

Works of Mercy

Start Date: *

2026-08-01

End Date: *

2027-06-30

Physical Address of Project/Program *

41875 C Street Temecula, CA 92592

Preferred Payment Method:

(If grant is awarded.)

☐ Check Mailed ☐ Check Picked Up

☒ Electronic File Transfer

Make Check Payable to: *

Works of Mercy Ministry, St. Catherine of Alexandria

Nonprofit Status

Is the organization incorporated as a nonprofit? *

☒ Yes ☐ No

Date of Incorporation: *

11/06/1978

IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Provide nonprofit status verification as follows: *

(one required, both preferred)

☒ State of California Entity Status Letter

☒ IRS Tax Exempt Determination Letter

State of California Entity ID Number: *

1093979540

To find State of California Entity Status Letter,

click the link below:

https://www.ftb.ca.gov/help/business/entity-status-letter.asp?WT.mc_id=akBESatus

Attach State of California Entity Status Letter: *

SBD-ENTITY STATUS LETTER 6-19-26.pdf

811.35KB

IRS Employer Identification Number (EIN): *

86-2043517

To find IRS Tax Exempt Determination Letter,

click the link below:

<https://apps.irs.gov/app/eos/>

Attach IRS Tax Exempt Determination Letter: *

IRS Letter-St. Catherine of Alexandria, Temecula.pdf

294.12KB

Provide statement of information with the names of the organization's (CEO, CFO) officers: *

☒ Nonprofit Statment of Information filed with the State of California

To find Nonprofit Statement of Information,

click the link below:

<https://bizfileonline.sos.ca.gov/search/business>

Attach Nonprofit Statement of Information: *

SCA Temecula Stmt of Info.pdf

134.45KB

Provide further verification as follows: *

(one required, both preferred)

☐ First Page of most recent IRS Form 990

☒ Detailed info about your charity found on the State Registry Search Tool (link below)

State Registry Search Tool:

<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

Attach State Registry Document/Info*

Certificate of Status_1781822980090.pdf

292.51KB

Application Authorization

Has the organization or any members of the Board of Directors of the organization been involved with any personal business transactions valued over \$500 including any business transactions, negotiations, investments, or interests in real property with a Temecula City Council Member during the past 12 months? *

☐ Yes ☒ No

Is a Temecula City Council Member a member of the Board of Directors or an Officer of the organization? *

☐ Yes ☒ No

This Application has been authorized by the organization's: *

☒ Executive Committee ☐ Board of Directors ☐ Members-at-Large

Mission Statement

Briefly describe the nonprofit organization's mission/goals and objectives: *

Works of Mercy was formed as a continuation of the work done by St. Vincent de Paul which for more than 25 years offered a weekly food pantry and helpline to the Temecula community. Rooted in the ministry of St. Catherine of Alexandria Catholic Church, we continue a long tradition of serving individuals and families experiencing food insecurity and using the Helpline to offer assistance with respect, compassion, and dignity. Our services are available to all without regard to race, color, creed, nationality, sex, marital status, disability, religion, or political affiliation.

The requested City of Temecula grant funding will directly strengthen our Food Pantry Program and Helpline, providing critical support to Temecula residents experiencing food insecurity and financial hardship. Our Food Pantry provides nutritious food to individuals, families, seniors, veterans, and others facing difficult circumstances. With the support of more than 126 dedicated volunteers, we distribute food twice each week, ensuring that vulnerable households have consistent access to healthy, nutritious groceries throughout the year. Volunteers not only distribute the food twice a week, they also pick up food donations from our retail partners, sort and store the donations and deliver food to homebound individuals. Food that is identified as not appropriate to distribute are given to local farmers as feed for their animals which ensures nothing goes to waste. We offer a welcoming atmosphere that fosters a sense of dignity and acceptance. The pantry allows people to go through each food station which provides them the flexibility to select the appropriate items for their family.

In addition to addressing hunger, our Helpline provides emergency assistance to help stabilize individuals and families facing unexpected financial crises. Depending on available funding and individual circumstances, assistance may include emergency housing, utility payments, car repairs, gas cards, and clothing vouchers. These services help prevent homelessness, preserve employment, maintain essential utilities, and enable families to regain financial stability. Together, the Food Pantry and Helpline provide both immediate relief and practical support that helps residents overcome temporary setbacks and move toward long-term self-sufficiency.

The need for our services continues to grow at an unprecedented rate. Over the past three years, the number of families relying on our Food Pantry has doubled. Today, we serve approximately 120 families each week, providing nutritious food to nearly 500 individuals, including 180 children, 125 seniors, and 14 individuals experiencing homelessness.

As inflation continues to drive up the cost of groceries, many families who were once financially stable are now struggling to put food on the table. At the same time, donations alone are no longer sufficient to meet the growing demand. To ensure every family receives wholesome, nutritious food, we must regularly purchase essential staple items such as meat, milk, eggs, dairy products, and other healthy foods to supplement our donated inventory.

Grant funding is critical to helping us maintain a reliable supply of nutritious food for our most vulnerable neighbors. With this support, we can continue providing consistent, dignified assistance to children, seniors, veterans, working families, and individuals facing hardship, ensuring that no one in our community has to choose between paying for basic necessities and putting food on the table.

UPON REQUEST, COPIES OF THE ORGANIZATION'S CURRENT BUDGET/FINANCIAL STATEMENTS (BALANCE STATEMENT AND INCOME STATEMENT), AND IF AVAILABLE CPA'S AUDIT, MAY BE NEEDED TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

*

☒ Understand

Funding Sources

Within the past two years, has your organization received (or is concurrently requesting) any other sources of funding from the City of Temecula? *

☐ Yes ☒ No

Project/Program Description

Project/Program Title: Works of Mercy

1. DESCRIBE THE PROJECT/PROGRAM THE TEMECULA GRANT FUNDING WILL SUPPORT. *

If awarded, the \$10,000 City of Temecula grant will be fully expended within ten months to purchase essential food items that are consistently in high demand but are often unavailable through donated food sources.

Grant funds will be used to purchase:

Non-perishable staple foods such as pasta, rice, cereal, canned fruits and vegetables, beans, soups, peanut butter, and other shelf-stable items from local Temecula grocery stores and food suppliers. Perishable, nutritious foods including milk, eggs, and other essential grocery items that must be purchased regularly to supplement donated inventory and ensure families receive balanced, healthy meals.

As the number of families seeking assistance continues to increase, donated food alone is no longer sufficient to meet community needs. These purchases will allow Works of Mercy to maintain a consistent supply of nutritious food for approximately 120 families each week while also supporting local Temecula businesses through the purchase of food supplies.

2. LIST THE ITEMS THE ORGANIZATION WILL PURCHASE USING THE CITY'S GRANT FUNDING, IF AWARDED. *

Grant funds will be used to purchase:

Non-perishable staple foods such as pasta, rice, cereal, canned fruits and vegetables, beans, soups, peanut butter, and other shelf-stable items from local Temecula grocery stores and food suppliers. Perishable, nutritious foods including milk, eggs, and other essential grocery items that must be purchased regularly to supplement donated inventory and ensure families receive balanced, healthy meals.

PAID INVOICES/RECEIPTS WILL BE REQUIRED FOR PURCHASES LISTED IN THIS APPLICATION

*

☒ Understand

3. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS. *

TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING.

Approximately 71% of the individuals and families served by Works of Mercy are residents of the City of Temecula, making this grant a direct investment in the health and well-being of our local community. City grant funding will enable us to purchase essential food items that supplement the gaps in our weekly donations from retail partners. These purchases include nutritious staples such as milk, eggs, rice, cereal, pasta, meat, and other healthy foods that are consistently in high demand but often unavailable through donated inventory.

To ensure that Temecula families receive well-balanced, nutritious groceries, we currently spend an average of \$1,000 each month purchasing these essential items. As demand continues to increase and food donations decline, relying on operating funds to cover these costs is no longer sustainable and frequently results in shortages of critical food staples. Grant funding will provide a reliable source of support, allowing us to maintain a consistent supply of nutritious food and ensure that families in need have dependable access to healthy meals throughout the year.

This investment will directly benefit Temecula residents by:

Providing reliable access to nutritious food for families, seniors, veterans, and individuals experiencing food insecurity.

Helping us meet the growing demand for food assistance despite declining donations and rising food costs.

Strengthening the stability of households facing temporary financial hardship, allowing families to direct limited resources toward housing, utilities, transportation, and other essential expenses.

Sustaining a trusted community resource that has served Temecula for more than two decades with an all-volunteer workforce, maximizing the impact of every grant dollar.

By supporting Works of Mercy, the City of Temecula will help ensure that thousands of local residents continue to have access to nutritious food during a time of increasing need. This grant will provide more than groceries—it will provide stability, dignity, and hope to neighbors working to overcome difficult circumstances.

3b. ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:

3,800

*

3c. ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:

126

*

4. SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 LISTING ONLY WHAT THE CITY GRANT FUNDS WILL BE USED TO BUY. *

Food Pantry/Helpline Community Outreach- The requested \$10,000 City of Temecula grant will be used exclusively to purchase essential nutritious food items that are consistently in high demand but often unavailable through donated inventory. Grant funds will provide staple foods such as rice, pasta, cereal, canned fruits and vegetables, beans, soups, peanut butter, as well as perishable items including milk, eggs, meat, and other dairy products. These purchases will supplement weekly food donations, ensuring that approximately 120 families each week continue to receive healthy, balanced groceries despite rising food costs and declining donations. These items will be purchased specifically from businesses in Temecula. By providing a reliable source of nutritious food, the grant will directly benefit Temecula residents experiencing food insecurity while helping Works of Mercy maintain a consistent, dignified, and sustainable food assistance program.

Project/Program Budget

LIST REVENUES/INCOME FOR PROJECT/PROGRAM

Amount requested from this City of Temecula Community Services Grant <i>(refer to page 2)</i>	REVENUES * \$10,000.00
Amount contributed to the Project/Program by the Applicant Organization	* \$0.00
Other grants or funding already awarded for Project/Program, if any	* \$0.00
In-Kind match amount or volunteer credit hours estimated amount	* \$0.00

LIST OF EXPENSES FOR PROJECT/PROGRAM

Tools/Equipment * 0	EXPENSES * \$0.00
Facilities/Rent/Insurance * 0	* \$0.00
Supplies * 0	* \$0.00
Services * 0	* \$0.00
Food * Perishable and Non-perishable food supplies	* \$10,000.00
Other (i.e. Informational Outreach, etc) * N/A	* \$0.00
Staffing Expense	* \$0.00
TOTAL REVENUE: \$10,000.00	TOTAL EXPENSES \$10,000.00

Compliance

Each awarded entity shall submit proper backup documentation to substantiate that funds were spent appropriately. This includes invoices/receipts, a narrative that explains each expenditure, including how it specifically benefitted Temecula residents, and a schedule of the project's/program's revenues/expenditures. See the **EXPENDITURE COMPLIANCE REPORT** (below) for specific requirements.

Expenditure Compliance Report Form

If funds are not spent in accordance with the approved purpose, the organization will not be funded or, if already funded, will be required to return the funds. Failure to provide proper documentation may jeopardize any future funding. The City of Temecula reserves the right to conduct an audit and/or require additional backup information to substantiate how funds received from the City were spent.

To the extent possible, it is strongly encouraged that all purchases made to support projects/programs that are funded by this grant be made at retail/businesses located within the City of Temecula to support our local businesses and economy.

I have read and understand the above policy that if awarded a Community Service Funding Grant by the City of Temecula, an expenditure compliance report is required. *

CHECK THE BOX TO CONFIRM

☒ Confirm

Acknowledgement/Signature

The applicant acknowledges and agrees to the following:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires a signed agreement upon approval. Please allow time for checks to be processed.
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- The recognition for Community Service Funding should accrue to the City of Temecula.
- Community Service Funding must be spent as specified on the Application and records may be requested by the City of Temecula to ensure the funds were used appropriately.
- Community Service Funding grants will not be awarded or announced within the 60 days before an election in which an awarding Council Member is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient shall return to the City any funds not spent or documented per the signed agreement.
- If awarded a Community Service Funding Grant by the City of Temecula in a previous fiscal year, organization must be in compliance with receipts.

I hereby certify the information contained in this Application is true to the best of our knowledge and belief.

Name of Applicant Organization: *

St. Catherine of Alexandria Works of Mercy

Requested Amount:

\$10,000.00

President/Authorized Officer Name: *

Fr. Timothy Do

President/Authorized Officer Title: *

Pastor

E-mail: *

scaworksofmercy@sbdiocese.org

Phone: *

951-676-2348

President/Authorized Officer Signature *

Rev. Timothy Truong Do

Submission Date:

2026-06-30 09:24:18 AM

Please confirm that the President/Authorized Officer Signing this Application is an Officer Listed on the State of California Statement of Information form:

Visit <https://bizfileonline.sos.ca.gov/search/business> to verify.

President/Officer Confirmation: *

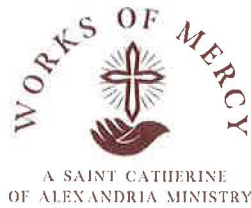
☒ Verified and Confirmed

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:

Ana Rafferty, Volunteer Grant Writer, Works of Mercy

Name, Title, & Organization

If you have any questions, please contact: Betsy.Lowrey@TemeculaCA.gov (951) 693-3959 or Stacey.Brown@TemeculaCA.gov (951) 694-6413



June 29, 2026

To Whom it May Concern:

Financial Accountability and Oversight

The Works of Mercy Ministry operates as a ministry of St. Catherine of Alexandria Catholic Church under the authority of the Diocese of San Bernardino. Financial responsibility and oversight for all parish ministries, including the Works of Mercy Ministry, rest with the Pastor of St. Catherine of Alexandria Catholic Church.

The Pastor is directly accountable to the Bishop of the Diocese of San Bernardino for the spiritual well-being of the parish community, as well as for the administration of the parish's property, finances, and operations. All ministry funds, including grant awards, are managed in accordance with diocesan financial policies and procedures to ensure transparency, accountability, and responsible stewardship.

The Pastor provides oversight of financial management, authorizes expenditures, and ensures that grant funds are used solely for their intended purpose. Financial records are maintained by the parish in accordance with accepted accounting practices and diocesan requirements, providing appropriate internal controls and accountability for all funding received.

Sincerely,

Rev. Timothy T. Do
Pastor

St. Catherine of Alexandria Catholic Church, Temecula, CA



State of California Secretary of State

N

Statement of Information

(Domestic Nonprofit, Credit Union and General Cooperative Corporations)

Filing Fee: \$20.00. If this is an amendment, see instructions.
IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

FS05285**FILED**

In the office of the Secretary of State
of the State of California

NOV-02 2017**1. CORPORATE NAME**

THE ROMAN CATHOLIC BISHOP OF SAN BERNARDINO

2. CALIFORNIA CORPORATE NUMBER

C0902625

This Space for Filing Use Only

Complete Principal Office Address (Do not abbreviate the name of the city. Item 3 cannot be a P.O. Box.)

3. STREET ADDRESS OF PRINCIPAL OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE
1201 EAST HIGHLAND AVENUE, SAN BERNARDINO, CA 92404

4. MAILING ADDRESS OF THE CORPORATION CITY STATE ZIP CODE
WILFRID C LEMANN 215 NORTH D STREET FIRST FLOOR, SAN BERNARDINO, CA 92401

Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

5. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE
GERALD R BARNES 1201 EAST HIGHLAND AVENUE, SAN BERNARDINO, CA 92404

6. SECRETARY ADDRESS CITY STATE ZIP CODE
GERALD R BARNES 1201 EAST HIGHLAND AVENUE, SAN BERNARDINO, CA 92404

7. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE
GERALD R BARNES 1201 EAST HIGHLAND AVENUE, SAN BERNARDINO, CA 92404

Agent for Service of Process If the agent is an individual, the agent must reside in California and Item 9 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 9 must be left blank.

8. NAME OF AGENT FOR SERVICE OF PROCESS (Note: The person designated as the corporation's agent MUST have agreed to act in that capacity prior to the designation.)
WILFRID C LEMANN

9. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE
215 NORTH D STREET FIRST FLOOR, SAN BERNARDINO, CA 92401

Common Interest Developments

10. ☐ Check here if the corporation is an association formed to manage a common interest development under the Davis-Stirling Common Interest Development Act, (California Civil Code section 4000, et seq.) or under the Commercial and Industrial Common Interest Development Act, (California Civil Code section 6500, et seq.). The corporation must file a Statement by Common Interest Development Association (Form SI-CID) as required by California Civil Code sections 5405(a) and 6760(a). Please see instructions on the reverse side of this form.

11. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

11/02/2017

WILFRID C LEMANN

ATTORNEY

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE



**State of California
Secretary of State**

**FILING OFFICE
ADMINISTRATIVE ACTION STATEMENT**

INTERNAL USE ONLY

A0920250

FILED *ur*
**Secretary of State
State of California**
AUG 27 2021

1. Identification of the Record to which this FILING OFFICE STATEMENT relates.

1a. DOCUMENT # (IF ANY)
FS05285

1b. DATE RECORD FILED
11/02/17

1c. FILE # TO WHICH THE RECORD RELATES
C0902625

The Above Space For Filing Office Use Only

2. Describe the inaccuracy or mistake on the part of the filing office.

Filing and data entry error.

3. Describe filing office administrative action taken.

Added as amendment.

FILING CLERK VJ

BUSINESS LICENSE CERTIFICATE		CITY OF TEMECULA	
The person, firm or corporation named below is hereby granted this certificate pursuant to the provisions of the City Business License Ordinances of the City of Temecula, California, to engage in, carry on or conduct in the City of Temecula, California, the business, trade, calling, profession, exhibition or occupation described below for the period indicated. This license is permission only, and is issued without verification that the license is subject to or exempt from licensing by the State of California, nor shall such issuance be deemed a waiver of the City of Temecula of past or future violations of such laws or ordinances.		Finance Department 41000 Main Street Temecula, CA 92590	
BUSINESS NAME:	Roman Catholic Bishop of San Bernardino	DESCRIPTION:	Religious Organization
BUSINESS LOCATION:	41875 C.St, Temecula, CA 92592		
BUSINESS OWNER:	Rev. Timothy Do		
ST. CATHERINE OF ALEXANDRIA ROMAN CATHOLIC BISHOP OF SAN BERNARDINO 41875 C ST TEMECULA, CA 92592		Business License Number: 058231 License Fee: \$4.00 Effective Date: December 11, 2025 Expiration Date: January 31, 2027 Fees paid in accordance with City Ordinance	
TO BE POSTED IN A CONSPICUOUS PLACE		NOT TRANSFERABLE and NON-REFUNDABLE	