

**FY 2022/2023**

**COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA**

**GRANT APPLICATION #**

**1a**

**A PLACE FOR ALL PIECES  
(A: YOUTH BASKETBALL)**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 5,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: TEMECULA YOUTH BASKETBALL CHAMPIONS Start Date: 12/10/22 End Date: 2/11/23

Physical Address of Project/Program: TO BE DETERMINED (PREVIOUS LOCATION WAS TEMECULA CRC  
INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: A PLACE FOR ALL PIECES

Mailing Address: 27890 CLINTON KEITH RD, SUITE D #151  
MURRIETA, CA 92562

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant A PLACE FOR ALL PIECES  
Organization: \_\_\_\_\_ Year Founded: 2013

Website: aplaceforallpieces.org Social Media: FACEBOOK, INSTAGRAM

Number of Paid Staff: 0 Number of Volunteers: 30 +

Geographic Area(s) the Organization Serves: TEMECULA VALLEY

Geographic Area(s) the Project/Program Serves: TEMECULA VALLEY

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: IVY KIRSHBERG Title/Position: PRESIDENT

Contact Person's Direct Telephone: 714 724 1010 Contact Person's Email: ikirshberg@yahoo.com

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 2/12/2013  
No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 46-2012269 State Identification Number: 3546151

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

**MISSION STATEMENT OF ORGANIZATION**

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

**A Place for All Pieces fosters a community of empowered children and adults. Our goal is to increase the quality of life for people on the spectrum. By providing opportunities for social motivation, initiations, and peer to peer interaction.**

**FINANCIAL STATEMENTS**

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		

**GRANT PROJECT/PROGRAM DESCRIPTION**

**IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE**

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

**TYBL serves the disabled community in the Temecula Valley area. The demand for the program has doubled from last year. The 11 week program is geared towards children K-12 with special needs. Temecula High School volunteers receive volunteers hours, while gaining meaning relationship, learning compassion, and patience. Special Needs players learn social skills, and peer-to-peer interactions.**

**2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

**ALSO, INCLUDE A LIST OF GOODS, EQUIPEMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.**

**The fee to join the program has increased since inception. Cost of \$120 per player includes court rental, pictures, facilitator, liability insurance. Additional cost for buddy shirts, materials, and of the season party.**

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

**Temecula Youth Basketball Champions League is Temecula based. Temecula residents have participated in the past. Temecula residents specifcally benefits from the program because of the proximity of the court location. Local volunteers have also learned how to peer mentor special needs players.**

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

**25-40**

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

**25-50**

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

**4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.**

**Our event focuses on a positive environment. It helps develop social skills for the special needs, while peer volunteers continue to learn compassion and patience. Physical activity is very important for health, especially for the disadvantaged community.**

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 5,000	
Amount contributed to the Project/Program by the Applicant Organization	\$ 1,000	
Other grants or funding already awarded for Project/Program, if any	\$ 0	
In-Kind match amount or volunteer credit hours estimated amount	\$ 550 hrs	
<b>TOTAL REVENUE</b>	<b>\$ 6,000</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$ 750
Facilities/Rent/Insurance		\$
Supplies		\$ 500
Marketing		\$
Services		\$
Food		1,000
Other <span style="float: right;">cost to join: \$120x40</span>		\$ 4,800
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$
<b>TOTAL EXPENSES</b>		<b>\$</b>
<b>TOTAL BUDGET</b>	<b>\$</b>	<b>\$ 7,050</b>

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022 (last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City **on or before due date: September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

**Organization:** \_\_\_\_\_ **Name of Project/Program:** \_\_\_\_\_

**FY 2021-2022 Amount of CSF Grant Fund Awarded:** \$ \_\_\_\_\_ **Month & Year CSF Grant Received from City:** \_\_\_\_\_

**Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number):** \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		

**EXPENDITURE TOTAL \$** EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.



**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**

**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. [If you were awarded less than \$5,000, submit Expenditure Report for that amount.]

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: _____		Name of Project/Program: _____			
TOTAL FY 2022-2023 Amount of Grant Fund Awarded: \$ _____		Month & Year FIRST \$5,000 check was received from City: _____			
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted).					
2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City					
3. Is this Expenditure Report is submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____.					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

**ORGANIZATION NAME:** \_\_\_\_\_ A PLACE FOR ALL PIECES

**MAILING ADDRESS:** 27890 CLINTON KEITH RD, SUITE D #150 **PHONE:** ( 714 ) 724-1010  
MURRIETA, CA 92562 **EMAIL:** lkirshberg@yahoo.com

**PRESIDENT / AUTHORIZED OFFICER:** IVY KIRSHBERG **PRESIDENT**  
PRINT NAME TITLE

**SIGNATURE:** *Ivy Kirshberg* **DATE:** 8/29/2022  
MONTH, DAY, YEAR

**IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:** \_\_\_\_\_  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
[Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959

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

DEPARTMENT OF THE TREASURY

Date:

NOV 06 2013

A PLACE FOR ALL PIECES  
C/O JEFFREY KIRSHBERG  
27775 BOTTLE BRUSH WAY  
MURRIETA, CA 92562

Employer Identification Number:  
46-2012269  
DLN:  
17053098339043  
Contact Person:  
MR. DAVIS ID# 31636  
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:  
February 12, 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)



## Entity Status Letter

Date: 8/29/2022

ESL ID: 8818358920

### 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: 3546151

Entity Name: A PLACE FOR ALL PIECES

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](http://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)



[Home](#) > [Tax Exempt Organization Search](#) > [A Place For All Pieces](#)

< [Back to Search Results](#)

# A Place For All Pieces

EIN: 46-2012269 | Murrieta, CA, United States

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## Form 990-N (e-Postcard)

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Organizations who have filed a 990-N (e-Postcard) annual electronic notice. Most small organizations that receive less than \$50,000 fall into this category.

### > Tax Year 2021 Form 990-N (e-Postcard)

**Tax Period:**

2021 (01/01/2021 - 12/31/2021)

**EIN:**

46-2012269

**Legal Name (Doing Business as):**

A Place For All Pieces

**Mailing Address:**

27890 Clinton Keith Rd Suite D151  
Murrieta, CA 92562  
United States

**Principal Officer's Name and Address:**

Ivy Kirshberg

27890 Clinton Keith Rd Suite D151  
Murrieta, CA 92562  
United States

**Gross receipts not greater than:**

\$50,000

**FY 2022/2023**

**COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA**

**GRANT APPLICATION #**

**1b**

**A PLACE FOR ALL PIECES  
(B: HALLOWEEN DANCE)**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 5,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: INCLUSIVE HALLOWEEN TEEN/ADULT DANCE EVENT Start Date: 10/28/22 End Date: 10/28/22

Physical Address of Project/Program: THE CORPORATE ROOM

INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: A PLACE FOR ALL PIECES

Mailing Address: 27890 CLINTON KEITH RD, SUITE D #151  
MURRIETA, CA 92562

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant Organization: A PLACE FOR ALL PIECES Year Founded: 2013

Website: aplaceforallpieces.org Social Media: FACEBOOK, INSTAGRAM

Number of Paid Staff: 0 Number of Volunteers: 25 +

Geographic Area(s) the Organization Serves: TEMECULA VALLEY

Geographic Area(s) the Project/Program Serves: TEMECULA VALLEY

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: IVY KIRSHBERG Title/Position: PRESIDENT

Contact Person's Direct Telephone: 714 724 1010 Contact Person's Email: lkirshberg@yahoo.com

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 2/12/2013  
No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 46-2012269 State Identification Number: 3546151

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
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[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

### MISSION STATEMENT OF ORGANIZATION

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

**A Place for All Pieces fosters a community of empowered children and adults. Our goal is to increase the quality of life for people on the spectrum. By providing opportunities for social motivation, initiations, and peer to peer interaction.**

### FINANCIAL STATEMENTS

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.



**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$ 5,000	HAI ADVANCED MATERIALS SPECIALISTS	12/2021
\$		
\$		
\$		
\$		
\$		
\$		
\$		

## GRANT PROJECT/PROGRAM DESCRIPTION

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

**A Place for All Pieces Teen Adult Halloween Event will provide much needed social skills, peer to peer support. Temecula Special Needs families with teens and adults are always in need of programs. This event promotes a positive and safe environment for everyone. With the help of High School volunteers in the Temecula Valley area, special needs families are given the opportunity to enjoy themselves without judgements. They are surrounded by families who are also in need of respite from the daily grind of taking care of someone with special needs.**

### 2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.

ALSO, INCLUDE A LIST OF GOODS, EQUIPMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

**VENUE: \$1600  
DECORATIONS: \$3500  
FOOD: \$1500  
DJ: \$300**

### 3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.

**Our Halloween dance event is our biggest event of the year. Temecula Special Needs families and Peer volunteers from Temecula schools have participated in the past. It is not only geared to benefit the special needs families, but also the high school peers who have returned yearly to help develop a positive environment for everyone.**

3b ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:	<b>50-75</b>
3c ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:	<b>25-50</b>

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

**4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.**

Our event focuses on a positive environment. It helps develop social skills for the special needs, while peer volunteers continue to learn compassion and patience. It is the most sought after event of the year, with attendance growing every year. The cost will be around \$6,900 this year.

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 5,000	
Amount contributed to the Project/Program by the Applicant Organization	\$ 1,900	
Other grants or funding already awarded for Project/Program, if any	\$ 0	
In-Kind match amount or volunteer credit hours estimated amount	\$ 45 hrs	
<b>TOTAL REVENUE</b>	<b>\$ 6,900</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$
Facilities/Rent/Insurance		\$ 1,600
Supplies		\$
Marketing		\$
Services		\$ 300
Food		1,500
Other		\$ 3,600
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$
<b>TOTAL EXPENSES</b>		<b>\$ 6,900</b>
<b>TOTAL BUDGET</b>	<b>\$</b>	<b>\$ 6,900</b>

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022  
(last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City **on or before due date: September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

Organization: \_\_\_\_\_ Name of Project/Program: \_\_\_\_\_

FY 2021-2022 Amount of CSF Grant Fund Awarded: \$ \_\_\_\_\_ Month & Year CSF Grant Received from City: \_\_\_\_\_

Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number): \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		

**EXPENDITURE TOTAL \$** EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.

**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**

**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. [If you were awarded less than \$5,000, submit Expenditure Report for that amount.]

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: _____			Name of Project/Program: _____		
TOTAL FY 2022-2023 Amount of Grant Fund Awarded: \$ _____			Month & Year FIRST \$5,000 check was received from City: _____		
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted).					
2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City					
3. Is this Expenditure Report is submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____.					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

**ORGANIZATION NAME:** A PLACE FOR ALL PIECES

**MAILING ADDRESS:** 27890 CLINTON KEITH RD, SUITE D #150 **PHONE:** ( 714 ) 724-1010  
MURRIETA, CA 92562 **EMAIL:** lkirshberg@yahoo.com

**PRESIDENT / AUTHORIZED OFFICER:** IVY KIRSHBERG **PRESIDENT**  
PRINT NAME TITLE

**SIGNATURE:** *Ivy Kirshberg* **DATE:** 8/29/2022  
MONTH, DAY, YEAR

**IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:** \_\_\_\_\_  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
[Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959

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

DEPARTMENT OF THE TREASURY

Date: NOV 06 2013

A PLACE FOR ALL PIECES  
C/O KURT GRAVES  
3118 WILSHIRE BLVD STE D  
SANTA MONICA, CA 90403

Employer Identification Number:  
46-2012269  
DIN:  
17053098339043  
Contact Person:  
MR. DAVIS ID# 31636  
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:  
February 12, 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)





## Entity Status Letter

Date: 8/29/2022

ESL ID: 8818358920

### 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: 3546151

Entity Name: A PLACE FOR ALL PIECES

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](http://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)

[HELP](#)[MENU](#)

[Home](#) > [Tax Exempt Organization Search](#) > [A Place For All Pieces](#)

< [Back to Search Results](#)

# A Place For All Pieces

EIN: 46-2012269 | Murrieta, CA, United States

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## Form 990-N (e-Postcard) ⓘ

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Organizations who have filed a 990-N (e-Postcard) annual electronic notice. Most small organizations that receive less than \$50,000 fall into this category.

### > Tax Year 2021 Form 990-N (e-Postcard)

**Tax Period:**

2021 (01/01/2021 - 12/31/2021)

**EIN:**

46-2012269

**Legal Name (Doing Business as):**

A Place For All Pieces

**Mailing Address:**

27890 Clinton Keith Rd Suite D151  
Murrieta, CA 92562  
United States

**Principal Officer's Name and Address:**

Ivy Kirshberg

27890 Clinton Keith Rd Suite D151  
Murrieta, CA 92562  
United States

**Gross receipts not greater than:**

\$50,000

**FY 2022/2023**

**COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA**

**GRANT APPLICATION #**

**2**

**AIM FOR GOOD INC.**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 50,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

AIM for Good

Project/Program Title: \_\_\_\_\_ Start Date: 4/20 End Date: indefinite

Physical Address of Project/Program: \_\_\_\_\_

INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: AIM for Good, Inc.

Mailing Address: 31493 Rancho Pueblo Rd. #205

Temecula, CA 92592

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant AIM for Good, Inc

Organization: \_\_\_\_\_ Year Founded: 2020

Website: www.AimForGood.org Social Media: FB/Instagram

Number of Paid Staff: 0 Number of Volunteers: 15

Geographic Area(s) the Organization Serves: Temecula Valley

Geographic Area(s) the Project/Program Serves: Temecula Valley

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Mark Anselmo Title/Position: President/Co-Founder

Contact Person's Direct Telephone: 9519726680 Contact Person's Email: markanselmo@gmail.com

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 4/17/20

No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 850914556 State Identification Number: 4584598

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link: [https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://rct.doi.ca.gov/Verification/Web/Search.aspx?facility=Y>

RECEIVED

SEP 12 2022

CITY MANAGER'S OFFICE

### 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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

### MISSION STATEMENT OF ORGANIZATION

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

Our goal is to give back to our community wherever the needs may be. Our mission to help local individuals and families in need, local non-profits and to help facilitate events that spread awareness of multiple causes.

Our founder originally started a non-profit, Our Nicholas Foundation, in 2004 to help support the local Autism community when their youngest son was diagnosed. Over the years he has seen needs multiply in many areas including cancer, hunger, autism/special needs, family support and more and wanted a solution to help quickly with no delays...thus AIM for good was started.

### FINANCIAL STATEMENTS

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		

**GRANT PROJECT/PROGRAM DESCRIPTION**

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

Simply local individuals, families and non-profits in need...whether that's financial, public awareness or volunteer support.

**2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

ALSO, INCLUDE A LIST OF GOODS, EQUIPEMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

Our goal is to find needs and immediately fill them...whether it's hunger needs this Fall/Winter with the inflation/recession challenges we face...challenges local non-profits face with decreased donations in a recessionary period...providing video marketing for those in need...charity events or public community support...Autism art camps...we are flexible and will fill the need. We have purchased and will be upgrading video production equipments to promote those in need via online marketing, etc. and will help purchase items as needed locally to help whomever we can.

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

Our focus is the Temecula Valley. Locally for non-profits we have directly supported Michelle's Place, Community Mission of Hope, Autism & the Arts Foundation and Jacob's House and plan to expand that further.

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

Sky's the limit

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

15

**PROJECT/PROGRAM DESCRIPTION**  
***CONTINUED***

4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.

Helping individuals, families and non-profits wherever possible locally.

5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.

Covid, Inflation and Recession will and does impact all non-profit contributions. We haven't actively fundraised as we didn't want to compete for local dollars as the local non-profits build their strategies going forward...

6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.

Our goal is to help whomever we can locally without any red tape...so this grant would help us kickstart that goal and funnel much needed support via financial, marketing/promoting of needs, direct partnerships and more.



<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>			
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>		<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>			
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)		\$ 50000	
Amount contributed to the Project/Program by the Applicant Organization		\$	
Other grants or funding already awarded for Project/Program, if any		\$ 10000	
In-Kind match amount or volunteer credit hours estimated amount		\$ 0	
<b>TOTAL REVENUE</b>		<b>\$ 60000</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>			
Tools/Equipment			<b>\$5000</b>
Facilities/Rent/Insurance			\$
Supplies			\$
Marketing			\$
Services			<b>\$55000</b>
Food			\$
Other			\$
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.		\$
<b>TOTAL EXPENSES</b>			<b>\$60000</b>
<b>TOTAL BUDGET</b>		<b>\$60000</b>	<b>\$60000</b>

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

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If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City on or before due date: **September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

Organization: AIM for Good, Inc Name of Project/Program: AIM for Good

FY 2021-2022 Amount of CSF Grant Fund Awarded: \$ N/A Month & Year CSF Grant Received from City: \_\_\_\_\_

Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number): \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		

**EXPENDITURE TOTAL \$** EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.

**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**

**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

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**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. (If you were awarded less than \$5,000, submit Expenditure Report for that amount.)

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: <u>AIM for Good, Inc</u>		Name of Project/Program: <u>AIM for Good</u>			
TOTAL FY 2022-2023		Month & Year FIRST \$5,000 check			
Amount of Grant Fund Awarded: \$ _____		was received from City: _____			
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted).					
2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City					
3. Is this Expenditure Report is submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____.					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024	Expenditure		
			MUST SUPPORT PROJECT/PROGRAM IN APPLICATION & AWARD LETTER		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

The applicant acknowledges and agrees to the following:

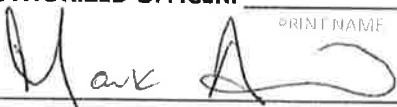
- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Temecula.
- Funding is not immediately available to the recipient, and requires an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

ORGANIZATION NAME: AIM for Good, Inc

MAILING ADDRESS: 31493 Rancho Pueblo Rd. #205      PHONE: ( 951 ) 9726680  
Temecula, CA 92592      EMAIL: markanselmo@gmail.com

PRESIDENT / AUTHORIZED OFFICER: Mark Anselmo

SIGNATURE:       DATE: 09/11/22  
PRINT NAME      TITLE      MONTH, DAY, YEAR

IF DIFFERENT THAN ABOVE,  
APPLICATION PREPARED BY: \_\_\_\_\_  
PRINT NAME      TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions:    Stacey.Brown@TemeculaCA.gov (951) 694-6413  
                  Betsy.Lowrey@TemeculaCA.gov (951) 693-3959



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

AIM FOR GOOD INC  
31493 RANCHO PUEBLO ROAD 205  
TEMECULA, CA 92592

Date:  
04/07/2021  
Employer ID number:  
85-0914556  
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:  
April 17, 2020  
Contribution deductibility:  
Yes  
Addendum applies:  
No  
DLN:  
26053414002361

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Stephen A. Martin  
Director, Exempt Organizations  
Rulings and Agreements



## Entity Status Letter

Date: 9/11/2022

ESL ID: 5184525432

### 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: 4584598

Entity Name: AIM FOR GOOD, 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 .
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](http://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)



[Home](#) > [Tax Exempt Organization Search](#) > [Aim For Good Inc.](#)

< [Back to Search Results](#)

## Aim For Good Inc.

EIN: 85-0914556 | Temecula, CA, United States

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> **Other Names**

## Determination Letter ⓘ

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A favorable determination letter is issued by the IRS if an organization meets the requirements for tax-exempt status under the Code section the organization applied.

> **Final Letters**

- [FinalLetter\\_85-0914556\\_AIMFORGOODINC\\_01122021\\_00.tif](#)

## Publication 78 Data ⓘ

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Organizations eligible to receive tax-deductible charitable contributions. Users may rely on this list in determining deductibility of their contributions.

**On Publication 78 Data List:** Yes

**Deductibility Code:** PC

## Form 990-N (e-Postcard) ⓘ

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Organizations who have filed a 990-N (e-Postcard) annual electronic notice. Most small organizations that receive less than \$50,000 fall into this category.

> **Tax Year 2021 Form 990-N (e-Postcard)**

**Tax Period:**

2021 (01/01/2021 - 12/31/2021)

**EIN:**

95-0914556

**Legal Name (Doing Business as):**

Aim For Good Inc

**Mailing Address:**

31493 Rancho Pueblo Road Suite 205  
Temecula, CA 92592  
United States

**Principal Officer's Name and Address:**

Mark Anselmo

31493 Rancho Pueblo Road Suite 205  
Temecula, CA 92592  
United States

**Gross receipts not greater than:**

\$50,000

**Organization has terminated:**

No

**Website URL:**

[www.AimForGood.org](http://www.AimForGood.org)





[Home](#) > [Tax Exempt Organization Search](#) > **Our Nicholas Foundation Inc**

< [Back to Search Results](#)

# Our Nicholas Foundation Inc

EIN: 20-3348800 | Temecula, CA, United States

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## Auto-Revocation List

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Organizations whose federal tax exempt status was automatically revoked for not filing a Form 990-series return or notice for three consecutive years. Important note: Just because an organization appears on this list, it does not mean the organization is currently revoked, as they may have been reinstated.

> **Posted Date: 08-10-2015**

**Exemption Type:** 501(c)(3)

**Exemption Reinstatement Date:**

**Revocation Date:** 05-15-2015

**Revocation Posting Date:** 08-10-2015



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

## Entity Status Letter

Date: 9/13/2022

ESL ID: 2107018787

### 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: 2784676

Entity Name: OUR NICHOLAS FOUNDATION, 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 .
- 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](http://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

**FY 2022/2023**

**COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA**

**GRANT APPLICATION #**

**3**

**ANIMAL FRIENDS  
OF THE VALLEYS**

**CITY OF TEMECULA**  
**FISCAL YEAR 2022.. 2023**  
**COMMUNITY SERVICE FUNDING.. REINVESTMENT IN TEMECULA**  
**PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$50,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: Temecula Has Heart for the Animals Start Date: 07/01/22 End Date: 07/01/24

Physical Address of Project/Program: City of Temecula

INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Animal Friends of the Valleys

Mailing Address: 33571 Mission Trail Rd

Wildomar, Ca. 92595 Attn: Beth Soltysiak

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant

Organization: Animal Friends of the Valleys Year Founded: 1987

Website: animalfriendsofthevalleys.com Social Media : animallfriendsofthevalleys

Number of Paid Staff: 84 Number of Volunteers: 3752

Geographic Area(s) the Organization Serves: Temecula, Murrieta, Wildomar, Lake Elsinore, Canyon Lake, Menifee and surrounding rural county areas

Geographic Area(s) the Program Serves: Citizens residing in the City of Temecula

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA. Contact

Name: Beth Soltysiak Title/Position: Director of Development

Contact Person's Direct Telephone: 951-805-6239 Contact Person's Email: beth@afv.org

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**NONPROFIT STATUS**

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Is this organization incorporated as a nonprofit? Yes  No  Date of Incorporation as a Nonprofit: 1987 \_\_\_  
No  IF NO, THE INELIGIBLE TO RECEIVE CITY FUNDING

**Federal Identification Number:** 33-0276892

**State Identification Number:** 1611141 \_\_\_

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

1.  Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
2.  Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.aspx](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.aspx)
3.  Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>



## Entity Search Result

[Privacy Policy](#)

Results displayed below.

Entities matching the search criteria

Entity ID	Entity Name	City
<a href="#">1611141</a>	ANIMAL FRIENDS OF THE VALLEYS, INC.	WILDOMAR

[Back](#)

Internal Revenue Service  
P.O. Box 2508  
Cincinnati, OH 45201

Department of the Treasury

Date: **MAR 15 2007**

ANIMAL FRIENDS OF THE VALLEY INC  
PO BOX 1143  
LAKE ELSINORE, CA 92531-1143

Person to Contact:  
Roger Meyer  
ID# 31-07707  
Toll Free Telephone Number:  
877-829-5500  
Employer Identification Number:  
33-0276892

Dear Sir or Madam:

This is in response to your request of January 30, 2007, regarding your tax-exempt status.

Our records indicate that a determination letter was issued in December 1988 that recognized you as exempt from Federal income tax, and reflect that you are currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records also indicate you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section 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.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely,



Cindy Westcott  
Manager, Exempt Organizations  
Determinations

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

**2020**

▶ Do not enter social security numbers on this form as it may be made public.

**Open to Public**

Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**Inspection**

<b>A</b> For the 2020 calendar year, or tax year beginning <b>07-01, 2020</b> , and ending <b>06-30, 2021</b>																
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>C</b> Name of organization: <b>ANIMAL FRIENDS OF THE VALLEYS INC</b></td> <td><b>D</b> Employer identification number <b>33-0276892</b></td> </tr> <tr> <td colspan="2">Doing business as</td> <td><b>E</b> Telephone number <b>(951) 674-0618</b></td> </tr> <tr> <td colspan="2">Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>33751 MISSION TRAIL</b></td> <td><b>G</b> Gross receipts \$ <b>6,486,943</b></td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code <b>WILDOMAR, CA 92595-8430</b></td> <td><b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See Instructions</td> </tr> <tr> <td colspan="2"><b>F</b> Name and address of principal officer:</td> <td><b>H(c)</b> Group exemption number ▶</td> </tr> </table>	<b>C</b> Name of organization: <b>ANIMAL FRIENDS OF THE VALLEYS INC</b>		<b>D</b> Employer identification number <b>33-0276892</b>	Doing business as		<b>E</b> Telephone number <b>(951) 674-0618</b>	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>33751 MISSION TRAIL</b>		<b>G</b> Gross receipts \$ <b>6,486,943</b>	City or town, state or province, country, and ZIP or foreign postal code <b>WILDOMAR, CA 92595-8430</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See Instructions	<b>F</b> Name and address of principal officer:		<b>H(c)</b> Group exemption number ▶
<b>C</b> Name of organization: <b>ANIMAL FRIENDS OF THE VALLEYS INC</b>		<b>D</b> Employer identification number <b>33-0276892</b>														
Doing business as		<b>E</b> Telephone number <b>(951) 674-0618</b>														
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<b>F</b> Name and address of principal officer:		<b>H(c)</b> Group exemption number ▶														
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527																
<b>J</b> Website: ▶ <b>WWW.ANIMALFRIENDSOFTHEVALLEYS.COM</b>																
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	<b>L</b> Year of formation: <b>1987</b> <b>M</b> State of legal domicile: <b>CA</b>															

Part I Summary			
1 Briefly describe the organization's mission or most significant activities: <b>DEDICATED TO PROMOTING HUMANE CARE OF ANIMALS THROUGH EDUCATION AND A HUMANE, PRO-ACTIVE ANIMAL SERVICES PROGRAM. COMMITTED TO PREVENTING THE SUFFERING OF ANIMALS AND TO ENDING PET OVERPOPULATION</b>			
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	7
	4	Number of independent voting members of the governing body (Part VI, line 1b)	7
	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	122
	6	Total number of volunteers (estimate if necessary)	4,959
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	33,418
	Revenue	8	Contributions and grants (Part VIII, line 1h)
9		Program service revenue (Part VIII, line 2g)	4,720,024
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	65,799
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	180,006
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,877,917
Expenses		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,481,504
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶	224,282
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,981,930
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,672,250
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	205,667
	20	Total assets (Part X, line 16)	5,598,692
	21	Total liabilities (Part X, line 26)	1,067,599
	22	Net assets or fund balances. Subtract line 21 from line 20	4,531,093

**Part II Signature Block**  
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b> TAMMI BOYD Signature of officer	05-11-2022 Date
TAMMI BOYD, PRESIDENT Type or print name and title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>KRISTINE M ANDERSON</b>	Preparer's signature	Date <b>07-08-2022</b>	Check <input checked="" type="checkbox"/> if self-employed	PTIN <b>P00226669</b>
	Firm's name ▶ <b>ANDERSON PROFESSIONAL SERVICES</b>	Firm's EIN ▶		Phone no. <b>951-678-2165</b>	
	Firm's address ▶ <b>17620 GRAND AVENUE Lake Elsinore CA 92530-5914</b>				

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No



**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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  IF YES, PROVIDE council MEMBER'S NAME AND TITLE WITHIN THE ORGANIZATION:

Maryann Edwards is the current JPA Board member that oversees the Animal Friends of the Valleys Board of Directors. There is a city representative on the JPA Board from each of the 6 cities we serve.

This Application has been authorized by the organization's:

Executive Committee  Board of Directors  Members-at-Large

**MISSION STATEMENT OF ORGANIZATION**

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

Animal Friends of the Valleys is dedicated to promoting humane care of animals through education and proactive animal service programs. We are committed to preventing the suffering of animals and to help end pet overpopulation in the communities we serve. AFV's vision is to be recognized as the leading shelter by providing a safe haven for all animals, while becoming a full-service animal care facility that offers quality and affordable care.

Through community education and involvement, AFV will reach our vision to help end pet overpopulation and find a loving and forever home for all adoptable pets in our shelter.

**FINANCIAL STATEMENTS**

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

**FUNDING SOURCES**

**CITY OF TEMECULA-SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW**

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH+ YEAR FUND NG RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
Community Service Grant Spay. /neuter grant	\$5000	09/2020	Spay/neuter grant community service grant
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES-SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH+ YEAR FUNDING RECEIVED
\$20,000	Rachel Ray COVID Relief Grant for all cities	05/2021
\$15,000	Matching grant for all local cities for spay/neuter fees.	07/2021
\$\$20,00	CDFA Spay/neuter grant 2022-2023 for all six cities	05/2022
\$		
\$		
\$		
\$		
\$		

## GRANT PROJECT/PROGRAM DESCRIPTION

IMPORTANT- RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

- Free Spay/neuter vouchers Days to the citizens of Temecula
- Free Pet Micro- chipping day or days 2022-2023 for Temecula Residents
- Low cost pet adoptions at various business locations throughout the city of Temecula for Temecula residents only. Must show proof of residency.
- Expanded senior living visits with trained shelter pets within the city if Temecula
- expanded pet education and reading program to school age children at both Temecula City Libraries.
- Community Pet Walk within the city of Temecula

2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.

ALSO, INCLUDE A LIST OF GOODS, EQUIPMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

The funds from this award will be spent with great regard. Every dollar will be spent helping the animals and the citizens that reside in Temecula. The Temecula reinvestment Community Service grant will be allocated for Temecula residents only.

AFV's low-cost spay/neuter clinic offers pet sterilization for \$60-\$130 depending on size and sex of Dog. On average it costs \$80 per dog. For cats AFV charges \$50-\$60 dependent on sex of the cat. For the Temecula spay/neuter vouchers we are allocating 25% of the funds to help curb spay/neuter fees for the residents of Temecula. The funds will help cover over 100 spay/neuter surgeries and will help stop on average an extra 570 from roaming the streets or ending up in the shelter. Last year we offered

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

AFV serves all local cities in southwest Riverside County, with Temecula being the largest with the highest population. Most of all of our events are hosted in the city of Temecula. Every year on February 23 World Spay Day, AFV hosts a Spay/Neuter free voucher day for the residents residing in each city. Last year, we hosted World Spay Day at Mary S. Roberts Senior Center. Because of funding we had to cap off at 100 free vouchers. With this reinvestment grant of \$50,000, AFV can help more Temecula citizens alter their pets. Since COVID and the rate of inflation many pet owners are forgoing spay/neutering their pet and have had to relinquish litters of puppies and kittens to the shelter. This grant will help the citizens of Temecula from unwanted litters and keep the number of strays down in the city. All those applying for a free voucher have to show proof of residency with a current driver license and utility bill. AFV would also offer free micro-chipping at these events. Currently the average cost to Spay a dog \$100 and \$80 to neuter at AFV's low cost spay/neuter clinic. AFV Micro-chips are \$20. 85% of all animals that become lost without a micro-chip will never find their way back home. It costs AFV \$628 an hour to care, feed and house over 200 pets at the shelter a day. This funding would dramatically decrease the number of unwanted pet litters in the city of Temecula. Last year alone, from the city of Temecula, AFV took in 218 stray cats, 132 owner relinquished cats of those 172 were adopted, 30 returned to owners, 98 adopted by rescues. Stray Temecula dogs were at 246, owner relinquished 334. 255 Temecula dogs were adopted, 176 returned to owners and 65 were adopted by rescues. Continuing to increase spay/neuter surgeries would decrease these animals ever finding their way into the shelter. This also illustrates the importance of micro-chipping Temecula pets.

Currently, AFV hosts many off-site adoption events at various businesses in Temecula to accommodate Temecula citizens from making the drive to Wildomar. Some of these Businesses are Pet Co, Paradise Chevrolet Cadillac, Hello Temecula Subaru, Promenade Mall, Mexico Cafe and various other Temecula Businesses.

The citizens of Temecula are still dealing with the effects from COVID especially senior citizens living in assisted living homes. AFV would like to increase our foster service animal program to visit the assisted living in Temecula proper. It has proven that animals especially dogs' offsets loneliness, increases mobility, and increases cognitive ability while interacting with a dog or cat. This holds true for the school age children in Temecula. Many children are feeling anxious with the world around them. AFV would like to reinstate Dog Daze reading program at both City of Temecula Libraries. These days would be coordinated with the city of Temecula. Every Wednesday AFV hosts Huey's reading program from 3-4:30 free to school age children. We would like to expand a version of this program to the Temecula Libraries. This program helps children learn the proper way to approach an animal, how to care and feed a pet. It also allows them to read to the animals without peer judgment and increases reading skills and public speaking while have a good time.

Lastly, AFV would like to host a Temecula Pet Walk during both years of the grant funding to bring the community of Temecula together now that COVID has lessened. It would be a great opportunity to meet other pet lovers and

3b ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:	900
3c ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:	400 with all programs

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

**4 SUMMARY STATEMENT- SUMMARIZE ANSWERS 1 -3 ABOVE IN 50 WORDS OR LESS.**

Animal Friends of the Valleys has been serving the cities of southwest Riverside County for over 35 years. In current reports from Animal Welfare Association 70% of households have 1 or 2 pets residing in the home. It is vital to help those citizens in Temecula that need extra help offsetting the cost of spay/neutering their pet. AFV already offers low cost spay/neuter surgery but with times the way they are many need additional assistance. These programs are greatly needed in the city of Temecula and if awarded will be able to help hundreds of Temecula residents young and old alike.

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

AFV was deemed an essential business by the Governor of California. That meant we were to remain open to the public while abiding to all COVID guidelines. During the peak time of COVID we were open by appointment only and had to adhere social distancing and sanitizing protocols. During 2021 until 2022 AFV had to postpone all major community fundraising events. AFV hosts three signature events. Wines for Canines and kitties, FORE the Animals Golf Tournament, and Paws on the Promenade Spooktacular which are all held at venues in Temecula. AFV lost over \$170,000 possibly more by not having these events.

We are trying to make-up for lost revenue. AFV had to reduce or suspend the afore mentioned programs we are suggesting in this funding application. During COVID we had many people adopt due to the ability to work remotely, however once people started to go back to work pet intake increased. Now with people forgoing spay/neuter surgeries because of financial hardships we are getting more litters of puppies and kittens than in the past few years. Inflation accompanied with COVID has put a strain on many Temecula residents. The demographics in Temecula vary greatly and AFV would like to accommodate all citizens and their pets. While it helps the citizens in Temecula it also helps AFV reduce the number of animals entering the shelter. AFV currently has on average 241 animals at the shelter looking for loving and forever homes. These are dogs, cats, rabbits, guinea pigs, small farm animals, reptiles and various wildlife. Our mission is to find a loving home for all adoptable pets. We are pleased to report we are at the highest adoption rate in our 35 years.

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPANDEXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

1) The funds from this 2022-2023 reinvestment Grant from the City of Temecula will allow Animal Friends of the Valleys to create a new Pet Walk event for the citizens in Temecula. This will bring in much needed funding to the shelter for other Temecula events while supporting Temecula citizens their pets and local Temecula businesses. It encourages the focus on animal welfare in the city of Temecula while helping Temecula businesses and welcomes community gathering for all ages including pets. Temecula events such as these will help Temecula residents become more aware of the community programs offered at or through AFV. The new reading and pet education program will be offered to all Temecula elementary school children at both Temecula libraries. This will encourage children to learn to love to read while reading to a live pet. Funding from this grant will allow AFV to be able to offer this program a few times a year while offering it free of charge to Temecula families. Reading is fundamental and a fun way to encourage children and parents to utilize Temecula's beautiful libraries.

2) In the past few years AFV had to suspend or eliminate existing programs that help serve the city of Temecula due to lack of funding. Our micro-chipping events had to be suspended due to the lack of funding and social distancing. Micro-chipping is imperative in all domestic pets so they can find their way home. Every July 4th there are hundreds of dogs that run away due to City fireworks in Temecula alone. The ones with micro-chips get reunited 90% faster than those without micro-chips. It is imperative to help those Temecula pets and their owners.

Free Spay/neuter voucher program for the city of Temecula will help all Temecula citizens help offset the cost of altering their pet and ending unwanted litters. Many families will forgo the extra cost of altering their pet due to the high cost of living and supporting their children. It is mandatory in Temecula to have your pet licensed and to receive licensing, a pet must be vaccinated and spayed or neutered. With the newly adopted city mandatory spay/neuter laws, this grant is priceless in helping Temecula members afford the cost to spay/neuter their pets. The new ordinance is modeled after a fix-it ticket allowing pet owners that have been cited to come into compliance by spay/neutering their pet to avoid fines. This grant will offset the number of Temecula pets surrendered because of the financial burden on the owners. This will help those owners who cannot afford the cost of surgery and ultimately not be fined. The vouchers are good for dogs, cats, and rabbits. These programs will help deter Temecula residents from relinquishing their pets due to financial hardships. By offsetting these costs, it will help the economy in Temecula as residents will be able to spend more on local groceries, apparel stores, and gas to name a few. AFV is continually exploring new ways to encourage every community member to be responsible pet owners and help reduce pet overpopulation.

3) AFV would also use this funding to expand on existing pet adoption events in the city of Temecula. Currently we have offsite adoptions to help bring shelter pets to the city of Temecula to be adopted by Temecula residents. AFV would like to expand on pet adoptions in the city of Temecula at various local businesses. On average at every off-site pet adoption there are over 10 adoptions per event. That is 10 less mouths to feed for AFV. While bringing a new family member into 10 Temecula homes.

AFV's goals to help animals find loving homes while reducing the number of animals in the shelter. We would encourage other Temecula businesses to offer adoption events at their location. This helps the animals the shelter and the Temecula business with added marketing and flow of traffic onto their business.

There are many new assisted living apartments in the city of Temecula. This population has been affected the most by COVID. Those in assisted living were under strict quarantine guidelines. Even family members could not visit their loved ones even if the senior was ill. This increased anxiety levels and depression among the residents. Many therapists that worked at the assisted living homes were cancelled due to COVID. This ultimately hurt the residences physically and mentally. Before COVID AFV had trained foster pets visit the elderly for companionship and to ease loneliness. Once an animal greeted each resident they would become happier and would interact with the animal which would increase mobility. Seeing the dog would evoke past memories of their own pet and cognitively they would remember past experiences. To our delight many of the assisted living homes are pet friendly and the restrictions from COVID are lessening. Pets help the elderly increase memory, widen mobility by throwing a toy and by bending if possible to pet the animal. All pets ease loneliness and depression. These foster pets show unconditional love and affection. This is a must needed service to the elderly of Temecula.

ACKNOWLEDGEMENT/SIGNATURE PAGE

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 an award letter signature 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 of 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

Animal Friends of the Valleys
ORGANIZATION NAME:

MAILING ADDRESS: 33751 Mission Trail Rd. Wildomar CA. 92595 PHONE (951) 805-6239

EMAIL: beth@afv.org

PRESIDENT/ AUTHORIZED OFFICER: Beth Soltysiak Director of Development
PRINT NAME TITLE

SIGNATURE: Beth Soltysiak DATE: 09/10/2022
MONTH, DAY, YEAR

IF DIFFERENT THAN ABOVE,

APPLICATION PREPARED BY: Beth Soltysiak Director of Development
PRINT NAME TITLE

SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:

City of Temecula
Community Service Funding
Attn: City Manager's Office
41000 MAIN STREET
TEMECULA, CA 92590

Questions: Stacey.Brown@TemeculaCA.gov (951) 694-6413
Betsy.Lowrey@TemeculaCA.gov (951) 693-3959

**FY 2022/2023**

**COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA**

**GRANT APPLICATION #**

**4**

**ASSISTANCE LEAGUE  
OF TEMECULA**



**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 50,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: 5 Points Start Date: 3/20/2020 End Date: 6/30/2023

Physical Address of Project/Program: \_\_\_\_\_  
INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Assistance League of Temecula Valley

Mailing Address: 28720 Via Montezuma  
Temecula, CA 92590

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant

Organization: Assistance League of Temecula Valley Year Founded: 1989

Website: assistanceleague.org/temecula-valley Social Media: Facebook & Instagram

Number of Paid Staff: None Number of Volunteers: 200

Geographic Area(s) the Organization Serves: Temecula

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

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE **EXCLUSIVELY** USED TO SERVE TEMECULA.

Contact Name: Diane Sitar Title/Position: Grants Coordinator

Contact Person's Direct Telephone: (951) 526-6771 Contact Person's Email: altemecula@yahoo.com

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 6/15/1989

No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 33-0360419 State Identification Number: 1463456

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

**MISSION STATEMENT OF ORGANIZATION**

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

Assistance League of Temecula Valley (ALTV) ® is celebrating 34 years of service in Southwest Riverside County. ALTV is an all-volunteer, 501(c)(3) nonprofit organization that transforms lives and strengthens our communities through philanthropic programs in Southwest Riverside County. Member volunteers are dedicated to identifying and serving the needs of Temecula, Murrieta, Menifee, Lake Elsinore, Wildomar and Romoland communities through philanthropic programs developed and administered by our members.

**FINANCIAL STATEMENTS**

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

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	\$ 6,970	April 2021	CDBG
Operation School Bell	\$ 5,000	December 2020	CSF
Operation School Bell	\$ 7,226	April 2022	CDBG
5 Points	\$ 920	July 2022	Council member discretionary CSF
Operation School Bell	\$ 5,491	April 2020	CDBG
Operation School Bell	\$ 5,000	December 2021	CSF
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) **FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		

## **GRANT PROJECT/PROGRAM DESCRIPTION**

**IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE**

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

ALTV identifies the needs of children and families in Temecula and develops philanthropic programs to be administered independently as well as in partnership with other non-profits.

ALTV's 5 Points Program provides various basic needs in the area of clothing, food, health, literacy and supplies. Clothing is provided to low to moderate income families, foster/homeless youth, as well as emergency clothing to students in need. Food is provided for school programs and local food pantries. Health services provide hygiene kits for foster/homeless and teddy bears to local hospitals to comfort children in crisis. We also provide supplies to the schools (such as backpacks, school supplies, fidget toys, etc.) as needed when LCAP school counselors identify specific needs. Please see the attached list for more specific information regarding the service and supplies we have provided and expect to provide in the future.

### **2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

**ALSO, INCLUDE A LIST OF GOODS, EQUIPMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.**

Approximately \$17,000 of the requested grant funds will reimburse ALTV for a variety of services and supplies that directly benefit those residing in Temecula from March 20, 2020 to the present. We have attached a list of those items to give examples of what we provide and will provide receipts with our Compliance Report. The remaining funds from this \$50,000 grant request will be used to fund additional similar services and supplies between now and June 30, 2023. Going forward, it is our intention to purchase supplies from stores and vendors in the City of Temecula whenever possible.

ALTV works closely with Temecula middle and high schools to provide supplies for the LCAP program, the special needs preschool program and foster youth as well as elementary school support. In addition, we work closely with Temecula transitional housing and the community pantry.

### **3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

Services provided and supplies purchased directly benefit Temecula residents. Services and supplies were, and will continue to be, distributed to residents through LCAP counselors, Rancho Damacitas Empowerment Village, foster youth agencies, Community Mission of Hope, Temecula transitional housing, Non Minor Dependents, Temecula Valley Hospital, and Temecula schools for various basic needs.

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

2,100

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

25

**PROJECT/PROGRAM DESCRIPTION**  
***CONTINUED***

**4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.**

Proceeds from this grant will provide services and materials that directly benefit children and families in Temecula. Funding from this grant, in addition to income from our thrift store, will allow ALTV to increase services and materials purchased in 2022-2023 to provide for families in need in Temecula. All ALTV revenue is returned to the local communities we serve through our philanthropic programs.

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

ALTV has faced several challenges in its operations. When ALTV was forced to close its thrift shop under COVID mandates, it inhibited our ability to generate income from our thrift shop, which is our primary source of revenue. ALTV has been in recovery mode since that time.

We also faced challenges in providing services and distributing materials due to the mandates. ALTV collaborated with local LCAP school counselors, food pantries, and foster/homeless agencies to provide services and materials to the best of our ability during those challenging times. We were successful in our efforts to help the community.

Inflation has also significantly increased the cost to operate our philanthropic programs.

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL: (1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM, AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

Proceeds from this grant will allow ALTV to continue providing basic needs services and materials to children and families of Temecula.

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 50,000	
Amount contributed to the Project/Program by the Applicant Organization	\$ 36,250	
Other grants or funding already awarded for Project/Program, if any	\$	
In-Kind match amount or volunteer credit hours estimated amount	\$ 10,000	
<b>TOTAL REVENUE</b>	<b>\$ 86,250</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$
Facilities/Rent/Insurance		\$
Supplies		\$ 59,250
Marketing		\$
Services		\$
Food		27,000
Other		\$
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$
<b>TOTAL EXPENSES</b>		<b>\$</b>
<b>TOTAL BUDGET</b>	<b>\$</b>	<b>\$ 86,250</b>

**Services and supplies provided between March 20, 2020 and present:**

- Christmas presents for Moms and children residing at Rancho Damacitas Empowerment Village
- Emergency clothing for a foster child
- Supplies for the Exceptional Children's Christmas Program in Temecula
- Christmas presents for Temecula Transitional Housing - Non-Minor Dependents
- Household items for Temecula Transitional Housing – Non-Minor Dependents
- Backpacks for Community Mission of Hope
- Food and hygiene supplies for Community Mission of Hope
- Fidget toys & stress balls for Temecula school counselors to distribute as needed
- Clothing for students at Temecula Elementary school
- Movie tickets for HUGS Foster Family Agency (summer activities for foster youth)
- Teddy Bears for Temecula Valley Hospital for children in crisis
- Computer tablets for youth residing at Rancho Damacitas Empowerment Village
- Student Body cards for foster/homeless youth at Great Oak High School
- Famous Footwear gift cards for families residing at Rancho Damacitas Empowerment Village
- Mini refrigerator & microwave for Great Oaks High School's ROOTS program (LCAP)
- Old Navy gift cards for students at Temecula Middle Schools

**Examples of Support, Supplies and Food to be provided from present to June 30, 2023:**

**Support for LCAP Program (Local Control and Accountability Plan) at Temecula schools.**

- Program addressed the needs of foster/homeless youth, second language learners and youth living in poverty.
- All middle and high schools in Temecula have an LCAP counselor on site.

**Support for all LCAP programs in Temecula schools (3 high schools and 6 middle schools) which provide the following services for foster/homeless youth:**

- School supplies
- Food/healthy snacks
- Student Body cards
- Senior package (valued at \$200 each) that include a choice of a yearbook, prom ticket, grad night ticket, etc.
- Funds for special classes
- Hygiene kits
- Computer tablet or other necessary electronics
- Emergency clothing
- Incentives for learning
- Support for extra programs
- Stress relievers (fidget toys, stress balls, etc.) for counseling sessions
- Food voucher for Western Eagle Foundation

**Support for Temecula Elementary Schools:**

- Food for Vail Elementary's "pantry closet" which is available to families with food insecurity. Other Temecula schools may have a similar program that we would support.

**Support for Special Needs Preschools. There are 11 Special Education Preschool (PreK) Classrooms in TVUSD, teaching over 200 students at Jackson Elementary and Alamos Elementary:**

- School supplies
- Emergency clothing
- Enrichment activities
- Books for classroom libraries
- Manipulatives for hands-on learning
- STEM items (i.e. Magnetic Building Tiles, STEM kits, Butterfly/Ladybug habitats, etc.)



- Social Emotional Learning (SEL) supports (i.e. Lakeshore Feelings and Emotions items, pretend play items, cooperative games, etc.)
- Flexible Seating (floor seats, wobble cushions, balance balls, bean bags, etc.)
- Sensory Manipulatives and supports
- Gross Motor/Fine Motor equipment or supplies

**Support for Foster/Homeless Youth:**

- Household items for young adults in Transitional Housing in Temecula through Foster Family Agencies
- Food vouchers
- Educational support (special classes or counseling)
- Christmas gifts

**Support for Rancho Damacitas Empowerment Village:**

- Food vouchers
- Christmas gifts for Moms and children
- Grocery/gas cards
- Special classes or programs as requested by staff

**Support for Exceptional Children's Christmas Program.** This program is designed for special needs children who get a visit with Santa and have activities in which they participate while waiting for their turn to see Santa. ALTV's "Assisteens" auxiliary (7<sup>th</sup>-12<sup>th</sup> graders) administer the program:

- An appropriate toy or activity for children waiting to speak with Santa
- Goodie bag for each child
- Book for each child

**Support for Community Mission of Hope:**

- Backpacks
- Food as needed

**Support for Temecula Valley Hospital:**

- ALTV provides Teddy Bears on a monthly basis for children receiving care in the hospital

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature upon approval. Please allow time for checks to be processed.
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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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

**ORGANIZATION NAME:** Assistance League of Temecula Valley

**MAILING ADDRESS:** 28720 Via Montezuma **PHONE:** (951) 526-6771  
Temecula, CA 92590 **EMAIL:** alitemecula@yahoo.com

**PRESIDENT / AUTHORIZED OFFICER:** Mary Murphy President  
PRINT NAME TITLE

**SIGNATURE:** *Mary Murphy President* **DATE:** August 17, 2022  
MONTH, DAY, YEAR

**IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:** Diane Sitar  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
[Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959

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[Home](#) > [Tax Exempt Organization Search](#) > [Assistance League Of Temecula Valley](#)

[< Back to Search Results](#)

# Assistance League Of Temecula Valley

EIN: 33-0360419 | Temecula, CA, United States

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## Publication 78 Data

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Organizations eligible to receive tax-deductible charitable contributions. Users may rely on this list in determining deductibility of their contributions.

**On Publication 78 Data List:** Yes

**Deductibility Code:** PC

## Copies of Returns (990, 990-EZ, 990-PF, 990-T)

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Electronic copies (images) of Forms 990, 990-EZ, 990-PF or 990-T returns filed with the IRS by charities and non-profits.

> [Tax Year 2020 Form 990](#)

> [Tax Year 2019 Form 990](#)

> [Tax Year 2017 Form 990](#)

> [Tax Year 2016 Form 990](#)



## Entity Status Letter

Date: 7/29/2022

ESL ID: 4849707501

### 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: ASSISTANCE LEAGUE OF TEMECULA VALLEY

- 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](http://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)

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
 Do not enter social security numbers on this form as it may be made public.  
 Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
**2019**  
 Open to Public Inspection

**A** For the 2019 calendar year, or tax year beginning 06-01-2019, and ending 05-31-2020

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization: ASSISTANCE LEAGUE OF TEMECULA VALLEY  
 Doing business as:  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 28720 VIA MONTEZUMA  
 City or town, state or province, country, and ZIP or foreign postal code: TEMECULA, CA 92590

**D** Employer identification number: 33-0360419

**E** Telephone number: (951) 694-8018

**F** Name and address of principal officer: 28720 VIA MONTEZUMA, TEMECULA, CA 925902510

**G** Gross receipts \$ 1,196,835

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. (see instructions)  
**H(c)** Group exemption number ▶

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ [www.temeculavalley.assistanceleague.org](http://www.temeculavalley.assistanceleague.org)

**K** Form of organization:  Corporation  Trust  Association  Other ▶

**L** Year of formation: 1989 **M** State of legal domicile: CA

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: ASSISTANCE LEAGUE OF TEMECULA VALLEY IS A VOLUNTEER PHILANTHROPIC ORGANIZATION DEDICATED TO SERVING THE NEEDS OF FAMILIES IN SOUTHWEST RIVERSIDE COUNTY. VOLUNTEERS ARE COMMITTED TO COMMUNITY SERVICE AND SPECIAL PROGRAMS TO HELP LOCAL CHILDREN AND FAMILIES IN NEED.					
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.					
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	12			
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	12			
	<b>5</b> Total number of individuals employed in calendar year 2019 (Part V, line 2a)	<b>5</b>	0			
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	220			
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0			
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 39	<b>7b</b>				
	<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	866,804	Current Year	759,835
		<b>9</b> Program service revenue (Part VIII, line 2g)		6,970		5,318
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)			284		234	
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					0	
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)			874,058		765,387	
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		413,579		321,838	
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)				0	
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)				0	
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)				0	
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 169,249					
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		443,295		408,940	
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		856,874		730,778	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12		17,184		34,609		
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	873,283	End of Year	860,753	
	<b>21</b> Total liabilities (Part X, line 26)		59,534		12,395	
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20		813,749		848,358	

**Part II Signature Block**  
 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**  
 Signature of officer: \_\_\_\_\_ Date: 2020-10-09  
 DENISE LANIER, President  
 Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00449291
Firm's name ▶ LESLIE A DOHERTY CPA APC			Firm's EIN ▶ 20-2082661	
Firm's address ▶ 41880 KALMIA ST STE 115 MURRIETA, CA 92562			Phone no. (951) 690-2260	

FY 2022/2023

COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA

GRANT APPLICATION #

**5**

**BIKE TEMECULA VALLEY CORP**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 5,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: Cycle For Hope Start Date: 08/10/22 End Date: 10/03/22

Physical Address of Project/Program: 2736 Ynez Road, L-7 #205 Temecula, California 92591

INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Bike Temecula Valley, Corp.

Mailing Address: 31311 Canterbury Court

Temecula, Ca. 92591

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant

Organization: Bike Temecula Vally, Corp. Year Founded: 2021

Website: https://www.tvbikecoalition.com/ Social Media: https://www.facebook.com/biketemeculavalley  
coalition/

Number of Paid Staff: 0 Number of Volunteers: 51

Geographic Area(s) the Organization Serves: Primarily Temecula

Geographic Area(s) the Project/Program Serves: Primarily Temecula

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE **EXCLUSIVELY** USED TO SERVE TEMECULA.

Contact Name: Gary Oddi Title/Position: President of the Board of Directors

Contact Person's Direct Telephone: 951-970-8034 Contact Person's Email: garyoddi@tvbikecoalition.com

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: June 10, 2021

No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

**Federal** Identification Number: 87-1364605 **State** Identification Number: 4755644

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

### MISSION STATEMENT OF ORGANIZATION

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

Bike Temecula Valley (BTV) is an engaged inclusive coalition of cyclists, dedicated to advocating for a safe, fun, and accessible network of cycling infrastructure and treatments that promote human powered recreation and transportation. We proactively work to assure the safety of the cycling and human powered community. Protecting from auto v cycle collisions and other dangers of the road, through the installation of facilities and treatments, such as protected bike lanes, bike crossings, cycle tracks, class – I bike lanes, et. Also, be a leader in safe riding and driving practices, such as sharing the road, eye contact, hand signals, rolling stops, distracted or impaired driving or riding. Ultimately, develop a vision "0" culture for active transportation.

Positively fostering the growth and development of cycling in the region through marketing, fund – raising, educating, and advising. Listen to the community and collectively share their voice regarding cycling to the city, county, and community at large.

Make everything we do and advocate for available to all, consciously removing all obstacles. Such as, facilities made available for people with disabilities, low-income neighborhoods, et. And trails being reached easily from all neighborhoods and accessible to wheelchairs or mobility scooters.

Advancing cycling as a pleasurable pursuit. It is whatever brings joy to those participating with the coalition that is cycling related, for instance; when your bike or other human powered vehicle brings happiness, including slow sociable riding experiences; endurance endorphin release rides, single track adrenaline eustress runs, pump track skills confidence building laps, nature rides, low stress facilities use, aesthetically pleasing rides, et Constructively, pragmatically, tenaciously, and in a positive manner we present our case to become an exemplary model cycling and active transportation community.

### FINANCIAL STATEMENTS

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.



**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
Cycle For Hope Event, Funds submitted to Community Mission of Hope (CMOH) not BTV	\$ 900	June, 2022	City Council CS Grant, Council Member Stewart
Cycle For Hope Event, Funds submitted to CMOH not BTV	\$ 2500	June, 2022	City Council CS Grant, Mayor Protem Schwank
	\$		
BTV is currently requesting funds from City Council CS Grant from all 5 Council Members <del>Currently, one Council Member has provided an application, while one has declined our proposal, and 3 have not yet responded.</del>	\$		
	\$ "2500"	(Amount applied for. Funding NOT received)	2022 -23 City Council CS Grant
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) **FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		

**GRANT PROJECT/PROGRAM DESCRIPTION**

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

Our major event this year will be the "Cycle for Hope" bike rides on October 2. This is a cycling event supported by BTV in collaboration with Community Mission of Hope / Rancho Damacitas. This event includes three rides, 50 - 25 - 15 milers, where participants will be given an opportunity to ride their bicycles through the neighborhoods of Temecula and on the roads of Temecula Valley Wine Country for a great cause. Though these rides are simply rides, chip timing will be provided so riders can have access to their performance results. The event ultimately is to benefit The Community Mission of Hope / Rancho Damacitas to help end homelessness and hunger in our community. Secondly BTV is dedicated to supporting events and programs that encourage healthy activities. The Cycle For Hope will demonstrate the benefits of an active community. In an event of this magnitude, volunteers are key to success. The support of volunteers from Temecula brings our community together to promote health, wellness, and a higher quality of life.

**2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

ALSO, INCLUDE A LIST OF GOODS, EQUIPMEMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

If granted the Funding, we would supplement the "Cycle For Hope" event budget.

Within this budget we will be purchasing route signage, sign frame holders, volunteer high visibility vests and shirts, participant commemorative shirts, and bike racks, (as designated in the Program/Project Budget sheet provided in this Application).

The largest cost from the Budget is support from California Highway Patrol and Temecula Police, Traffic Division for route safety, which is not covered in the CS Grant funding. Yet this extreme expense puts a strain on our budget expenditures, therefore increasing the need to fund the above listed expenditures.

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

The ultimate goal for all proceeds from this event will benefit the Community Mission of Hope and will be allocated to feed the hungry and help the homeless. The proceeds will be directly infused to The Community Mission of Hope's system that helps feed the hungry and support a better life for the homeless. These proceeds will provide direct assistance to those needful populations of Temecula.

Residual benefits are:

- Bringing community together at a healthy event to benefit our most vulnerable residents.
- Including Temecula youth / students in the activity and in the volunteer force for community service.
- Educating Temecula about the benefits of cycling.

3b ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM: (Base on how many people CMOH can help with the Proceeds from Cycle For Hope)	500+
3c ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:	100+

**PROJECT/PROGRAM DESCRIPTION**  
***CONTINUED***

4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.

Partnering with CMOH, BTV is excited to provide a healthy event for Temecula Residents. Cycle For Hope includes diverse volunteer opportunities, will trumpet Temecula's bicycle routes, and assures all proceeds are channeled to help end homelessness and feed the hungry.

5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.

6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 5,000	
Amount contributed to the Project/Program by the Applicant Organization	\$ 0	
Other grants or funding already awarded for Project/Program, if any (2021 - 22 City Council Community Service Grants, Stewart & Schwank allocated to Community Mission of Hope for Cycle For Hope Event)	\$ 3400	
In-Kind match amount or volunteer credit hours estimated amount	\$ 0	
<b>TOTAL REVENUE</b>	<b>\$ 8,400</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment	Bike Racks, sign holders	\$ 1000
Facilities/Rent/Insurance	Insurance Flyer for City of Temecula & Riverside County	\$ 300
Supplies	Volunteer high visibility Shirt / Vest, Course Signage and Markers, radios, Participant Commemorative T-shirts	\$ 4500
Marketing	Socalcycling.com, Pierson Print Flyers & Posters	\$ 800
Services	Registration Service, BikeSignup.com	\$ 1750
Food		250
Other		\$ 0
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE. (Temecula PD & CHP & Gemini Timing)	\$ 17,000
<b>TOTAL EXPENSES</b>		<b>\$ 25,600</b>
<b>TOTAL BUDGET</b>		<b>\$ 25,600</b>

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022  
(last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City **on or before due date: September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

Organization: \_\_\_\_\_ Name of Project/Program: \_\_\_\_\_

FY 2021-2022 Amount of CSF Grant Fund Awarded: \$ \_\_\_\_\_ Month & Year CSF Grant Received from City: \_\_\_\_\_

Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number): \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.</b>	

**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**  
**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. [If you were awarded less than \$5,000, submit Expenditure Report for that amount.]

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
 Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: _____			Name of Project/Program: _____		
TOTAL FY 2022-2023 Amount of Grant Fund Awarded: \$ _____			Month & Year FIRST \$5,000 check was received from City: _____		
1. Is this Expenditure Report to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted).					
2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City					
3. Is this Expenditure Report submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____.					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	





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

BIKE TEMECULA VALLEY CORP  
27636 YNEZ ROAD L-7 205  
TEMECULA, CA 92591

Date:  
07/19/2022  
Employer ID number:  
87-1364605  
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:  
June 10, 2021  
Contribution deductibility:  
Yes  
Addendum applies:  
No  
DLN:  
26053582002322

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Stephen A. Martin  
Director, Exempt Organizations  
Rulings and Agreements





## Secretary of State Certificate of Status

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

**Entity Name:** BIKE TEMECULA VALLEY, CORP.  
**Entity No.:** 4755644  
**Registration Date:** 06/10/2021  
**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 27, 2022.

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

**Certificate No.:** 024913933

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](http://bizfileOnline.sos.ca.gov).

Registration is

Open!

Sign Up Here

1ST ANNUAL

# CYCLE FOR HOPE

October 2, 2022

RIDE TO HELP END HOMELESSNESS AND HUNGER IN OUR COMMUNITY

Save the Date  
Oct 2, 2022



PRO RIDE



INTERMEDIATE RIDE



LOCAL RIDE

Sponsored By:



Proceeds to Benefit:




COMMUNITY MISSION OF HOPE



# Bicycle Coalition | Bike Temecula Valley (tvbikecoalition.com)

Sun October 2, 2022

Temecula, CA 92590 US  Directions



## EVENTS

Cycle For Hope Pro Ride Half Century

~~\$150~~ **\$125**

**8:00AM PDT**

**11:00PM PDT**

Price increases after September 1, 2022 at 7:59am PDT

Sign Up

Cycle For Hope Intermediate Ride Quarter Century

**\$85**

**8:30AM PDT**

**11:00PM PDT**

Registration ends October 2, 2022 at 8:29am PDT

Sign Up

Cycle For Hope Local Ride 15 Miler

**\$39**

**9:00AM PDT**

**11:00PM PDT**

Registration ends October 2, 2022 at 8:59am PDT

Sign Up

## RIDE WEBSITE

Additional ride information can be found at <https://www.bikesignup.com/Race/CA/Temecula/CycleForHope>.

## PLACE

Community Mission of Hope, 41760 Rider Way  
Temecula, CA US 92590

## DESCRIPTION

Cycle For Hope is a cycling event to help end homelessness and hunger in our community. There will be three ride distances, 15, 25, and 50 miles through the city of Temecula and The Temecula Valley Wine Country. Ride results will be provided by Gemini Timing. A commemorative T-shirt and goodie bag will be provided.

The courses will take cyclists through Temecula's finest neighborhoods and trails and the 25 and 50 milers will ride through the beautiful Temecula Valley Wine Country. Post race celebration will be held at Refuge Brewery.

## RIDE CONTACT INFO

If you have any questions about this ride, click the button below.

Questions?

**THANK YOU TO OUR PARTNERS FOR  
SUPPORTING CYCLING IN THE VALLEY:**

**TEMECULA VALLEY EDUCATORS  
COMMUNITY MISSION OF HOPE  
RANCHO DAMACITAS  
OLD TOWN BICYCLE CO.  
MT. SAN JACINTO COLLEGE  
A-BELL ALARMS COMPANY**

**BIKE TEMECULA VALLEY IS A 501C, NON-PROFIT  
ORGANIZATION. WE THANK OUR COMMUNITY  
PARTNERS AND WELCOME YOUR CONTRIBUTIONS TO  
CYCLING IN THE VALLEY.**



**RANCHO DAMACITAS  
CHILDREN & FAMILY SERVICES**



**THANK YOU FOR VISITING BIKE TEMECULA VALLEY.  
LIVE BETTER. RIDE A BIKE!**

FY 2022/2023

COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA

GRANT APPLICATION #

**6**

**BIRTH CHOICE  
OF TEMECULA**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 50,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: Client Care Programs Start Date: Ongoing End Date: Ongoing

Physical Address of Project/Program: 41750 Winchester Rd. Suite O, Temecula Ca. 92590

INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Birth Choice Centers

Mailing Address: 1 Ridge Gate Dr. Suite 220

Temecula Ca. 92590

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant

Organization: Birth Choice of Temecula Year Founded: 1989

Website: www.birthchoicecenters.org Social Media: @birthchoiceoftemecula

Number of Paid Staff: 3 Number of Volunteers: 12

Geographic Area(s) the Organization Serves: Temecula Valley/Riverside County

Geographic Area(s) the Project/Program Serves: Temecula Valley/Riverside County

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Janette Chun Title/Position: CEO

Contact Person's Direct Telephone: 951-234-6140 Contact Person's Email: contact@birthchoice.center

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 1989

No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 33-0302353 State Identification Number: C1800935

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

### MISSION STATEMENT OF ORGANIZATION

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

To support people facing pregnancy, parenting and reproductive health concerns.

Birth Choice of Temecula's goal is to allow families a place to go to deal with unplanned pregnancy and parenting concerns. We also want to allow women and men a place to deal with reproductive loss through a support group program.

It is our objective to offer education, mentorship and material needs support to families that are struggling with providing for their children and are desiring mentorship and parenting support. We never want a family to feel as if they cannot parent due to lack of goods and services.

### FINANCIAL STATEMENTS

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
Client Care Program	\$ 500	June 2021	Council Member Grant
Client Care Program	\$ 2000	June 2021	Council Member Grant
Client Care Program	\$ 1000	July 2022	Council Member Grant
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		



**GRANT PROJECT/PROGRAM DESCRIPTION**

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

This funding will go to support our centers programs to include the following:  
Client Care Program and Fatherhood Program

The Client Care and Fatherhood Programs offer pregnancy, parenting and life skills education, one on one mentoring, material assistance, grief and loss support and related services.

**2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

ALSO, INCLUDE A LIST OF GOODS, EQUIPEMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

For our 2023 Budget Year, our Client Care and Fatherhood Programs will use these funds to purchase the following goods, equipment and services:

- Upgraded technology (i.e. computers as ours are 7 years old and need to be updated)
- IT professionals to install said computers and monitor them
- Goods such as: Hygiene Kits, Diapers, Wipes, Formula, Car Seats, Pak n Plays, Strollers, clothing, gas and food cards and various other parenting needs.
- Brochures, paper goods and materials needed for these programs
- Update some office furniture (Need a few new chairs)
- Offset a portion of building lease (at least 35%)

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

Our center services around 120 Temecula residents annually.

They come for regular monthly visits and enjoy our services at no cost. Many other Temecula residents avail themselves of our pregnancy testing and ultrasound services as well as the services that we are requesting funding for.

Being able to have baby items, mentors, courses and upgraded technology will allow them to receive maximum benefit so that Temecula families feel strong so that we can assist with building safe and great communities.

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:	12

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

**4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.**

Birth Choice Centers is a place of help that provides assistance to families who need help to provide for them and their children. Our programs provide them with the goods and services they need. Without such help, they would not be able to build thriving families.

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

The CV-19 Pandemic was an incredible difficulty for us. Previously our center was operating 4 days a week and we serviced close to 1600 appointments a year. We had 25 volunteers and 5 staff. Once the pandemic hit we went down to 3 staff and 2 volunteers as well as our donations drastically reducing to the point that we had to shut down 2 days of service each week. The needs of the families did not stop however and with 2 days of service and 3 staff we still had 1,279 appointments that year, that meant that we had close to 10 appointments every day. It was an incredible feat that was only possible because of our great love for our clients and a lot of prayer.

Now we are operating 3 days a week with 3 staff and have 12 volunteers.

Our clientele continues to grow and the need is incredible, especially during this time of inflation and steep prices.

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

For our 2023 budget year, it is our intention to expand our existing programs and projects. Our reality is that our programs are expanding without us trying to expand them. This grant will give us the ability to serve all residents without having to decrease supplies to make them last.

These last 2 years we provided families with over 15k diapers, around 500 cans of formula and 600 bags of clothing as well as hundreds of other goods. We are only in August of 2022 and we are already near bypassing that amount.

This grant will allow us to not only upgrade our seriously outdated technology but also provide for much needed goods for our families as our services are greatly expanding.

These funds would also allow us to offset a portion of our building lease up to 35%. If the board wishes that the funds to offset leasing charges should be allocated differently, we would then adjust the apportionment to the boards preference.

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 50,000	
Amount contributed to the Project/Program by the Applicant Organization	\$ 120,000	
Other grants or funding already awarded for Project/Program, if any	\$ 2000	
In-Kind match amount or volunteer credit hours estimated amount	\$ 30,000	
<b>TOTAL REVENUE</b>	<b>\$ 202,000</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$ 15,000
Facilities/Rent/Insurance		\$ 65,000
Supplies		\$ 40,000
Marketing		\$ 5,500
Services		\$ 3,500
Food		\$ 20,000
Other		\$ 5,500
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$ 68,000
<b>TOTAL EXPENSES</b>		<b>\$ 223,500</b>
<b>TOTAL BUDGET</b>	<b>\$</b>	<b>\$ 200,000</b>

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022 (last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City **on or before due date: September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

**Organization:** \_\_\_\_\_ **Name of Project/Program:** \_\_\_\_\_

**FY 2021-2022 Amount of CSF Grant Fund Awarded:** \$ \_\_\_\_\_ **Month & Year CSF Grant Received from City:** \_\_\_\_\_

**Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number):** \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		

**EXPENDITURE TOTAL \$** EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.

**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**

**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. [If you were awarded less than \$5,000, submit Expenditure Report for that amount.]

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: _____			Name of Project/Program: _____		
TOTAL FY 2022-2023 Amount of Grant Fund Awarded: \$ _____			Month & Year FIRST \$5,000 check was received from City: _____		
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted). 2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City 3. Is this Expenditure Report is submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____.					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			\$	<b>EXPENDITURE TOTAL</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

**ORGANIZATION NAME:** Birth Choice of Temecula

**MAILING ADDRESS:** 1 Ridgeway Dr. Suite 220 **PHONE:** (951) 240-3006  
Temecula, Ca. 92590 **EMAIL:** contact@birthchoice.center

**PRESIDENT / AUTHORIZED OFFICER:** Janette Chun **CEO**  
PRINT NAME TITLE

**SIGNATURE:**  **DATE:** 9/1/2022  
MONTH, DAY, YEAR

**IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:** \_\_\_\_\_  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

**Questions:** [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
[Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959



## Entity Status Letter

Date: 8/18/2022

ESL ID: 2469572054

### 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: 1800935

Entity Name: BIRTH CHOICE CENTERS, 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](http://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)



[Home](#) > [Tax Exempt Organization Search](#) > [Birth Choice Centers Inc.](#)

< [Back to Search Results](#)

## Birth Choice Centers Inc.

EIN: 33-0302353 | Temecula, CA, United States

---

> [Other Names](#)

## Publication 78 Data

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Organizations eligible to receive tax-deductible charitable contributions. Users may rely on this list in determining deductibility of their contributions.

**On Publication 78 Data List:** Yes

**Deductibility Code:** PC

## Copies of Returns (990, 990-EZ, 990-PF, 990-T)

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Electronic copies (images) of Forms 990, 990-EZ, 990-PF or 990-T returns filed with the IRS by charities and non-profits.

> [Tax Year 2019 Form 990](#)

> [Tax Year 2018 Form 990](#)

> [Tax Year 2016 Form 990](#)



**Return of Organization Exempt From Income Tax**

**2020**

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**Open to Public Inspection**

**A** For the 2020 calendar year, or tax year beginning **2020**, and ending **20**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** BIRTH CHOICE CENTERS, INC.  
1 RIDGE GATE DR. #220  
TEMECULA, CA 92590

**D** Employer identification number  
33-0302353

**E** Telephone number  
951-699-9808

**G** Gross receipts \$ 822,629.

**F** Name and address of principal officer: JANETTE CHUN  
SAME AS C ABOVE

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. See instructions

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) (insert no.)  4947(a)(1) or  527

**J** Website: WWW.BIRTHCHOICECENTERS.ORG

**K** Form of organization:  Corporation  Trust  Association  Other

**L** Year of formation: 1989 **M** State of legal domicile: CA

**Part I Summary**

1 Briefly describe the organization's mission or most significant activities: CRISIS PREGNANCY COUNSELING AND PARENTAL SUPPORT INCLUDING CLOTHES FOOD AND OTHER MEANS.

2 Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	9
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	13
6	Total number of volunteers (estimate if necessary)	6	30
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.

	Prior Year	Current Year	
8	Contributions and grants (Part VIII, line 1h)	573,969.	822,629.
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	573,969.	822,629.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	122,028.	75,863.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	236,845.	169,618.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25)	9,777.	
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	296,443.	297,198.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	655,316.	542,679.
19	Revenue less expenses. Subtract line 18 from line 12	-81,347.	279,950.

	Beginning of Current Year	End of Year	
20	Total assets (Part X, line 16)	118,546.	426,675.
21	Total liabilities (Part X, line 26)	17,620.	45,799.
22	Net assets or fund balances. Subtract line 21 from line 20	100,926.	380,876.

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer: **DOUGLAS MACRAE** Date: \_\_\_\_\_  
 Type or print name and title: **TREASURER**

**Paid Preparer Use Only**

Print/Type preparer's name: **DOUGLAS C. MACRAE** Preparer's signature: *DM* Date: **11/11/21** Check  if self-employed PTIN: **P00438711**

Firm's name: **SHAFFER & MACRAE CPAS** Firm's EIN: **33-0884861**  
 Firm's address: **43385 BUSINESS PARK DR STE 150 TEMECULA, CA 92590** Phone no.: **951-296-0785**

May the IRS discuss this return with the preparer shown above? See instructions.  Yes  No

FY 2022/2023

COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA

GRANT APPLICATION #

**7**

**BNAI CHIAM**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 32,000.00 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: Temecula Valley Jewish Community Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Physical Address of Project/Program: 29500 Via Princesa, Murrieta, Ca 92583  
INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Congregation B'nai Chaim  
Mailing Address: 29500 Via Princesa  
Murrieta, Ca 92563

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant  
Organization: Congregation B'nai Chaim Year Founded: 1983  
Website: bnaichaim.com Social Media: Facebook Bnai Chaim Jewish Com  
Number of Paid Staff: 3 Number of Volunteers: 10  
Geographic Area(s) the Organization Serves: Temecula, Murrieta, Winchester, Fallbrook  
Geographic Area(s) the Project/Program Serves: Temecula, Murrieta  
NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA  
Contact Name: Tracy Nysbaum Title/Position: Board President  
Contact Person's Direct Telephone: 951 816-9395 Contact Person's Email: bnaichaim1@gmail.com

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 9/20/1974  
No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: EIN 722510 State Identification Number: 95-3094190

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
<https://www.ftb.ca.gov/online/self-serve-entity-status-letter/index.asp>
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://rcf.doi.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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

**MISSION STATEMENT OF ORGANIZATION**

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

Congregation B'nai Chaim is the only standing Jewish Synagogue in a 38 mile zone. as the only facility for Temecula and Murrieta residents, we seek not only to provide a safe place of worship but to educate the community on the Jewish culture and to fight against anti-semitism. Total inclusion on being a learning hub on Judaism for Temecula residents

**FINANCIAL STATEMENTS**

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.**

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		

**GRANT PROJECT/PROGRAM DESCRIPTION**

**IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE**

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

Congregation B'nai looks to educate Temecula residents on the Jewish faith, through including all guests to attend our annual Hanukkah Party, Purim kids Carnival, Passover seder and events on The History of Judaism and the fight against anti-semitism.

**2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

ALSO, INCLUDE A LIST OF GOODS, EQUIPEMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

To maintain safe events - security cameras, emergency roof access safe door.  
 - replacement of front air conditioning unit  
 - perimeter outside gate  
 - food, supplies and decor for Holiday events

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

Congregation B'nai Chaim is the only synagogue option for Temecula and surrounding residents. Congregation B'nai Chaim looks to provide a safe and healthy environment for all attending

3b ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:	30-80
3c ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:	10

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

4 SUMMARY STATEMENT - SUMMARIZE ANSWERS 1 - 3 ABOVE IN 50 WORDS OR LESS.

There is only one building, built as a synagogue for all of the Temecula & Murrieta Jewish Community. We have experienced seven acts of vandalism within two years. We wish to provide a safe place for Temecula residents.

5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.

Congregation B'nai Chaim closed its doors as soon as COVID 19 hit. Many elderly people not able to meet on Zoom. Membership went down as people lost income. Since fully reopening our membership is only at half of what it was before COVID. No in-person fundraising could be done.

6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM, AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.

As more educational Holiday Programs and programs to educate on the fight against anti-Semitism, more people will attend. More is asked for security and being able to cool and keep our building well vented.

PROJECT/PROGRAM BUDGET (do not fill in shaded areas)		
LINE ITEMS FOR PROJECT/PROGRAM	REVENUES	EXPENSES
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$32,000	
Amount contributed to the Project/Program by the Applicant Organization	\$ 0	
Other grants or funding already awarded for Project/Program, if any	\$ 0	0
In-Kind match amount or volunteer credit hours estimated amount	\$ 0	
<b>TOTAL REVENUE</b>	\$32,000	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$24,000
Facilities/Rent/Insurance		\$
Supplies		\$3,000
Marketing		\$
Services		\$
Food		\$5000
Other		\$
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$
<b>TOTAL EXPENSES</b>		\$
<b>TOTAL BUDGET</b>	\$32,000	\$32,000



**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

ORGANIZATION NAME: Congregation B'nai Chaim

MAILING ADDRESS: 29500 Via Princesa PHONE: (951) 677-7350  
Murrieta, Ca 92563 EMAIL: bnaichaim1@gmail.com

PRESIDENT / AUTHORIZED OFFICER: Tracy Nusbaum President  
PRINT NAME TITLE

SIGNATURE: Tracy Nusbaum DATE: 9-11-2022  
MONTH, DAY, YEAR

IF DIFFERENT THAN ABOVE,  
APPLICATION PREPARED BY: \_\_\_\_\_  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
[Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959



STATE OF CALIFORNIA  
FRANCHISE TAX BOARD  
PO BOX 942957  
SACRAMENTO CA 94257-0540

## Entity Status Letter

Date: 9/12/2022

ESL ID: 8096554520

### 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: 0722510

Entity Name: CONGREGATION BNAI CHAIM OF MURRIETA HOT SPRINGS

- 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](http://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)

FTB 4263A WEB (REV 12-2019)

[HELP](#)[MENU](#)

[Home](#) > [Tax Exempt Organization Search](#) > [Congregation Bnai Chaim Of Murrieta Hot Springs](#)

< [Back to Search Results](#)

## Congregation Bnai Chaim Of Murrieta Hot Springs

EIN: 95-3094190 | Murrieta, CA, United States

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### Publication 78 Data

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Organizations eligible to receive tax-deductible charitable contributions. Users may rely on this list in determining deductibility of their contributions.

**On Publication 78 Data List:** Yes

**Deductibility Code:** PC

*Page Last Reviewed or Updated: 20-November-2020*

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<b>Registrant Details</b>							
<small>Entity type: CONGREGATION BNAI CHAIM OF MURRIETA HOT SPRINGS IRS FEIN: 953094140</small>							
<b>Organization Name:</b> CONGREGATION BNAI CHAIM OF MURRIETA HOT SPRINGS IRS FEIN:					953094140		
<b>Entity Type:</b> Religious		<b>SOS/PTB Corporate/Organization Number:</b> 0722510					
<b>Registry Status:</b>	<b>Exempt - Religious</b>			<b>Renewal Due/Exp. Date:</b>			
<b>RCT Registration Number:</b>	EX616346			<b>Issue Date:</b>	12/31/1990		
<b>Record Type:</b>	Charity Registration			<b>Effective Date:</b>	12/31/1990		
<b>Date of Last Renewal:</b>				<b>DBA:</b>			
<b>Mailing Address</b>							
<b>Street:</b>		29500 VIA PRINCESA					
<b>Street Line 2:</b>							
<b>City, State Zip:</b>		MURRIETA CA 92563					
<b>Filings &amp; Correspondence</b>							
<b>2010 Raffle App Not Subject</b>				<b>2010 Raffle App Not Subject</b>			
<b>Annual Renewal Data</b>							
<b>No Annual Renewal Data</b>							
<b>Related Registrations &amp; Event Reports</b>							
<small>Registration - 2010 - 2010 Raffle App Not Subject</small>							
<ul style="list-style-type: none"> <li>• 2010 Raffle App Not Subject</li> <li>• 2010 Raffle App Not Subject</li> <li>• 2010 Raffle App Not Subject</li> </ul>							
<b>No Related Records</b>							

FY 2022/2023

COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA

GRANT APPLICATION #

8

BOY SCOUTS OF AMERICA,  
CA IE COUNCIL 045  
TAHQUITZ DISTRICT

**CITY OF TEMECULA**  
**FISCAL YEAR 2022 - 2023**  
**COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA**  
**PROGRAM APPLICATION**

(Please Print or Type)

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 50,000.00 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION  
Scouting in Temecula

Project/Program Title: \_\_\_\_\_ Start Date: 9-12-22 End Date: 6-30-24

Physical Address of Project/Program: Same as mailing address  
INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Boy Scouts of America, Tahquitz District  
Mailing Address: 2351 W. Lugonia Ave. Suite F  
Redlands, Ca. 92374

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant Tahquitz District, Boy  
Organization: Scouts of America Year Founded: 1910

Website: clecbsa.org Social Media: facebook.com/tahquitz.district

Number of Paid Staff: 1 Number of Volunteers: 230

Geographic Area(s) the Organization Serves: Riverside and San Bernardino Counties

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

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Tim Long Title/Position: District Executive

Contact Person's Direct Telephone: 951-453-3666 Contact Person's Email: tim.long@scouting.org

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 1910  
No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 95-1744350 State Identification Number: 7689144562

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

1.  Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
2.  Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
3.  Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://rct.doi.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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

**MISSION STATEMENT OF ORGANIZATION**

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

The mission of the Boy Scouts of America is the prepare young people to make ethical and moral choices over their lifetimes by instilling in them the values of the Scout Oath and Law. The goal of Scouting is to encourage the physical, intellectual, social, emotional and spiritual developments of young people so that they take a constructive place in society as responsible citizens, and as members of their local, national and international communities.

**FINANCIAL STATEMENTS**

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.**

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
Day Camp/Outdoor Adventure	\$2500	2021-2022	Comm. Svc Fnd
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		



**GRANT PROJECT/PROGRAM DESCRIPTION**

**IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE**

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

The Boy Scouts of America is active and looking to grow membership within the timeframe of this grant not only in the number of Temecula residents, but in our international relationships. We are looking to accomplish this by bringing BSA Scouts and/or groups from Temecula's sister city in Japan to Temecula, as we aim to expand out diversity and inclusion goals as an organization.

**2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

**ALSO, INCLUDE A LIST OF GOODS, EQUIPMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.**

Boy Scouts of America is looking to help cover the costs of membership for Scouts and their families in Temecula as well as cover the costs of bringing Scouts from our sister city in Japan, to Temecula, to enhance the City's existing relationship. This may include shipping costs for materials sent, covering the cost of food and host family supplies, etc.

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

This grant will specifically enable Temecula residents to participate in the Scouting program in a much less-personal finances way. Our goal is to use these funds to cover registration costs for Scouts. Secondly, this grant will fund the transportation costs and food costs for Scouts from Japan bringing international tourism revenue through site-seeing and local businesses and shops in the city.

<b>3b ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:</b>	<b>50-100</b>
---	---------------

<b>3c ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:</b>	<b>30-40</b>
--	--------------

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

**4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.**

Boy Scouts of America is looking to increase our membership numbers within the City of Temecula by covering costs associated with joining or remaining in the program. Scouting teaches Temecula residents the value of community and we'd like to expand that internationally through diversity and inclusion to our sister city in Japan.

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

The COVID-19 pandemic had a significant impact on our program in Temecula. Boy Scouts saw a double-digit percentage reduction in membership and participation across the board. With the increased costs associated with simply providing for a family, Temecula residents are expressing challenges in covering costs of the program and being able to keep their child in the program that they know makes a positive and tangible difference.

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL: (1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM, AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

These funds will help the Boy Scouts of America continue and expand our engagement with the residents of Temecula by providing a program that gives back to the community through Eagle Scout projects, and a variety of other community service/impact opportunities. These funds will additionally enable our program to provide Temecula's sister city in Japan the opportunity to visit the city of Temecula, learn more about it and bring international awareness and knowledge of all Temecula has to offer back to Japan.

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 50,000	
Amount contributed to the Project/Program by the Applicant Organization	\$ 4,000.00	
Other grants or funding already awarded for Project/Program, if any	\$ 0	
In-Kind match amount or volunteer credit hours estimated amount	\$ 5,000.00	
<b>TOTAL REVENUE</b>	<b>\$ 59,000</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$15,000.00
Facilities/Rent/Insurance		\$4,500.00
Supplies		\$5,000.00
Marketing		\$3,000.00
Services		\$1,500.00
Food		\$5,000.00
Other		\$30,000.00
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$20,000.00
<b>TOTAL EXPENSES</b>		<b>\$84,000.00</b>
<b>TOTAL BUDGET</b>	<b>\$59,000.00</b>	<b>\$84,000.00</b>

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022 (last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City on or before due date: **September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office - CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

Organization: Tahquitz District, Boy Scouts of America Name of Project/Program: Scouting in Temecula  
 FY 2021-2022 Amount of CSF Grant Fund Awarded: \$ 2500 Month & Year CSF Grant Received from City: 06/2022

Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number): 50

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1	The Image Emporium	June 6, 2022	\$ 250.76 of 2,825.62	Shirts/Supplies	Materials needed for Day Camp.
2	NASP, Inc.	June 7, 2022	\$ 3,297.92	Equipment for Archery	Shooting sports activity equipment
3	Booth Pop	June 30, 2022	\$ 1,939.50	Equipment	shade for event activities
4			\$		
5			\$		
6			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$ 5,487.20</b>	<small>EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.</small>	



The ImagEmporium  
 6371 Haven Ave Ste 3-213  
 Rancho Cucamonga, CA  
 91737-6943 US  
 (909) 999-7671  
 www.TheIE.biz

010562

**THE IMAGEMPORIUM**

**BILL TO**  
 BOY SCOUTS OF AMERICA  
 California Inland Empire  
 Council  
 1230 Indian Ct.  
 Redlands, CA 92374

INVOICE 6014

DATE 06 27 2022 TERMS Due on receipt

DUE DATE 06 27 2022

**P.O. NUMBER**  
 Per Erika Haro

**SALES REP**  
 DG

ITEM / PRODUCT / SERVICE	QTY	PRICE EACH	AMOUNT
Custom Apparel 2022 Cub Scout Day Camp Red w/Black Logo Print Youth: 49s, 133m, 105L Adult: 39s, 14m, 7L, 4xl	351	6.0981197	2,140.44T
Custom Apparel 2022 Cub Scout Day Camp Royal w/Black Logo Print Adult: 18s, 36m, 58L, 56xl, 22 2xl, 6 3xl, 4 4xl	200	6.7822	1,356.44T
Discount Qty & Promotional Discount	1	-874.22	-874.22T

1- 8103-716-21

To Be Divided among  
 day camps at the  
 end!

SUBTOTAL 2,622.66  
 TAX (7.75%) 203.26  
 TOTAL 2,825.92  
**TOTAL DUE \$2,825.92**

250.76  
 Towards TQ/Temecula

**ENTERED**

By: Rav Date: 6/10/22

**APPROVED**

BY: [Signature] DATE: 6/9/22



National Archery in the Schools Program

NASP, INC.  
W4285 LAKE DRIVE  
WALDO, WI 53093

**INVOICE**

Invoice Number: 270541

Page: 1

Invoice Date 6/7/2022	Print Date 6/7/2022	Ship Date 6/7/2022
Customer ID 33399	Dealer	
Cont. Phone 909-793-2463	Cont. Fax	Shipment Number S278210
CIEC045.ACCOUNTING@SCOUTING.ORG		

**Paid in Full**

Bill To: CA INLAND EMPIRE COUNCIL BSA  
53155 IDYLLBROOK DR  
IDYLLWILD, CA 92549  
UNITED STATES

Ship To: CA INLAND EMPIRE COUNCIL BSA  
MIKE DOWNS  
53155 IDYLLBROOK DR  
IDYLLWILD, CA 92549  
UNITED STATES

Terms CREDIT CARD	Ext Doc No. CC	Your Reference	Ship Via
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Number	Customer Item No.	Description	Order Qty	Unit	Quantity	Unit Price	Total Price
10876		ARROW NON PROFIT	180	EACH	180	3.00	537.00
10821		TARGET, RINEHART	12	BACH	12	200.00	2,400.00

CALL TO SET UP DELIVERY 909-793-2463

Website: [www.naspschools.org](http://www.naspschools.org) Phone: (920) 523-6040 Fax: (920) 523-6042

Amount Subject to Sales Tax	Amount Exempt from Sales Tax	Subtotal:	3,297.00
0.00	3,297.00	Invoice Discount:	0.00
		Total Sales Tax:	0.00
		<b>Total:</b>	<b>3,297.00</b>



National Archery in the Schools Program

NASP, INC.  
W4285 LAKE DRIVE  
WALDO, WI 53093

**INVOICE**

Invoice Number: 270542

Page: 1

Invoice Date 6/7/2022	Due Date 6/7/2022	Ship Date 6/7/2022
Customer ID 33399	Contact	
Cust. Phone 909-798-2463	Cust. Fax	Shipment Number 5276211
CIEC045.ACCOUNTING@SCOUTING.ORG		

**Paid In Full**

Bill To: CA INLAND EMPIRE COUNCIL BSA  
53155 IDYLLBROOK DR  
IDYLLWILD, CA 92549  
UNITED STATES

Ship To: CA INLAND EMPIRE COUNCIL BSA  
MIKE DOWNS  
1095 MONTECITO DR  
CORONA, CA 92879  
UNITED STATES

Terms CREDIT CARD	Ext Doc No. OC	Your Reference	Ship Via
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Number	Customer Item No.	Description	Order Qty	Unit	Quantity	Unit Price	Total Price
9999		ARROW NON PROFIT	60	EACH	60	3.65	219.00

Website: [www.naspschools.org](http://www.naspschools.org) Phone: (920) 523-6040 Fax: (920) 523-6042

Amount Subject to Sales Tax	0.00	Amount Exempt from Sales Tax	219.00	Subtotal:	219.00
				Invoice Discount:	0.00
				Total Sales Tax:	0.00
				<b>Total:</b>	<b>219.00</b>

Monday, September 12, 2022 at 15:51:14 Pacific Daylight Time

**Subject:** FW: Your BoothPop Order Confirmation (#10057)  
**Date:** Monday, September 12, 2022 at 12:34:23 PM Pacific Daylight Time  
**From:** Matt Bear  
**To:** Tim Long  
**Attachments:** Image001.png, image002.png

**Matt Bear** | Scout Executive, CEO

**BOY SCOUTS OF AMERICA**

California Inland Empire Council

2351 W Lugonia Ave. Ste F

Redlands, CA 92374

P 909.793.2463 x302 | C 909.544.9796

[www.ciechsa.org](http://www.ciechsa.org) | [www.Camp-Emerson.org](http://www.Camp-Emerson.org) | [www.AdventureWeekend.org](http://www.AdventureWeekend.org)



*CONFIDENTIALITY NOTICE: This message is intended to be viewed only by the listed recipient(s). It may contain information that is privileged, confidential and/or exempt from disclosure under applicable law. Any dissemination, distribution or copying of this message is strictly prohibited without my prior permission. If you are not the intended recipient, or if you have received this communication in error, please notify me immediately by return e-mail and permanently remove the original message and any copies from your computer and all back-up systems.*

**From:** BoothPop <service@boothpop.com>  
**Sent:** Thursday, June 30, 2022 3:28 PM  
**To:** Matt Bear <Matt.Bear@scouting.org>  
**Subject:** Your BoothPop Order Confirmation (#10057)



**Thanks for Your Order**

Your order ID is #10057. A summary of your order is shown below. To view the status of your order [click here](#).

**Shipping Address**

**Billing Address**



**Matt Bear**  
 California Inland Empire Council, Boy Scouts of America  
 2351 W Lugoinla Ave. Ste F  
 Redlands, California 92374  
 United States  
 9095449786

**John Bear**  
 2033 E BROOKSIDE DR  
 Ontario, CA, California 91761  
 United States  
 9095449786

**Your Order Contains...**

Cart Items	SKU	Qty	Unit Price	Item Total
<b>10ft. Best Custom Full Color Event Canopy Tents</b> (Add Backwall? No Thanks), Add sidewalls? No Thanks, Select Production Time: Standard Production - 7 Business Days, Are Your Files Print-Ready? Yes, I designed the files myself., Carrying Case Options: Black Nylon Bag, Desired In-Hand Date? Jul 15th 2022)				
	CAN10F	2	\$900.00 USD	\$1,800.00 USD

**Subtotal: \$1,800.00 USD**  
**Shipping: \$0.00 USD**  
**Tax: \$139.50 USD**  
**Grand Total: \$1,939.50 USD**  
 Payment Method: Credit Card

**BoothPop**  
<https://www.boothpop.com/>

Copyright © 2017 BoothPop

**STOP. THINK. CLICK.**

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

**ORGANIZATION NAME:** Tahquitz District, Boy Scouts of America

**MAILING ADDRESS:** 2351 W. Lugonia Ave, Ste F

**PHONE:** ( 951 ) 453-3666

Redlands, Ca. 92374

**EMAIL:** tim.long@scouting.org

**PRESIDENT / AUTHORIZED OFFICER:** Tim Long, District Executive

PRINT NAME

TITLE

**SIGNATURE:** 

**DATE:** 09/12/2022

MONTH, DAY, YEAR

**IF DIFFERENT THAN ABOVE,  
APPLICATION PREPARED BY:** \_\_\_\_\_

PRINT NAME

TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: Stacey.Brown@TemeculaCA.gov (951) 694-6413  
Betsy.Lowrey@TemeculaCA.gov (951) 693-3959



CINCINNATI OH 45999-0038

In reply refer to: 0248219434  
Jan. 21, 2020 LTR 4167C 0  
22-1576300 000000 00

00010850  
BODC & TE

BOY SCOUTS OF AMERICA  
STEPHANIE PHILLIPS  
1325 W WALNUT HILL LN  
IRVING TX 75038-3008

Boy Scouts of America California Inland Empire Council 045

EIN # 95-1744350



026484

Employer identification number: 22-1576300  
Group exemption number: 1761

Dear Taxpayer:

This is in response to your request dated Jan. 09, 2020, for information about your tax-exempt status.

Our records indicate we issued a determination letter to you in November 1965, and you're currently exempt under Internal Revenue Code (IRC) Section 501(c)(3).

We also recognized the subordinates on the list you submitted as exempt from federal income tax under IRC Section 501(c)(3).

For federal income tax purposes, 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.

Please refer to [www.irs.gov/charities](http://www.irs.gov/charities) for information about filing requirements. Specifically, IRC Section 6033(j) provides that, if you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked on the filing due date of the third required return or notice.

In addition, each subordinate organization is subject to automatic revocation if it doesn't file a required return or notice for three consecutive years. Subordinate organizations can file required returns or notices individually or as part of a group return.

For tax forms, instructions, and publications, visit [www.irs.gov](http://www.irs.gov) or call 1-800-TAX-FORM (1-800-829-3676).

If you have questions, call 1-877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific Time).



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

## Entity Status Letter

Date: 10/12/2022

ESL ID: 1908321967

### 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: 0094468

Entity Name: CALIFORNIA INLAND EMPIRE COUNCIL, INC., BOY SCOUTS OF AMERICA

- 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](http://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

990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

2019

Open to Public Inspection

For the 2019 calendar year, or tax year beginning 01-01-2019, and ending 12-31-2019

- Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: BOY SCOUTS OF AMERICA CALIFORNIA INLAND EMPIRE COUNCIL 045
Doing business as
Number and street (or P.O. box if mail is not delivered to street address): 1230 INDIANA COURT
Room/suite
City or town, state or province, country, and ZIP or foreign postal code: REDLANDS, CA 92374

D Employer identification number: 95-1744350
E Telephone number: (909) 793-2463
G Gross receipts \$ 5,287,572

F Name and address of principal officer: MATT MYERS 1230 INDIANA COURT REDLANDS, CA 92374

H(a) Is this a group return for subordinates? No
H(b) Are all subordinates included? No
H(c) Group exemption number

Tax-exempt status: 501(c)(3)

Website: WWW.BSA-CIEC.ORG

Form of organization: Corporation

L Year of formation: 1972 M State of legal domicile: CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: To prepare young people to make ethical and moral choices over their lifetimes by instilling in them the values of the scout oath and law.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

Table with 2 columns: Line number and Amount. Rows include: 3 Number of voting members (28), 4 Number of independent voting members (27), 5 Total number of individuals employed (51), 6 Total number of volunteers (7,500), 7a Total unrelated business revenue (0), 7b Net unrelated business taxable income.

Table with 3 columns: Line number, Prior Year, Current Year. Rows include: 8 Contributions and grants (882,430 / 1,209,552), 9 Program service revenue (826,140 / 1,182,412), 10 Investment income (1,151,801 / 289,338), 11 Other revenue (996,616 / 1,229,474), 12 Total revenue (3,856,987 / 3,910,776), 13 Grants and similar amounts paid (20,776 / 30,274), 14 Benefits paid (0 / 0), 15 Salaries (1,366,133 / 1,340,520), 16a Professional fundraising fees (0 / 0), 17 Other expenses (1,254,888 / 1,531,487), 18 Total expenses (2,641,797 / 2,902,281), 19 Revenue less expenses (1,215,190 / 1,008,495).

Fund Balances

Table with 3 columns: Line number, Beginning of Current Year, End of Year. Rows include: 20 Total assets (3,801,789 / 4,841,080), 21 Total liabilities (612,414 / 742,180), 22 Net assets or fund balances (3,189,375 / 4,098,900).

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has knowledge.

FY 2022/2023

COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA

GRANT APPLICATION #

9

BOYS & GIRLS CLUB  
OF SOUTHWEST COUNTY

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 50,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION  
Project/Program Title: Before & After School/Day Camp Programs Start Date: 1/1/22 End Date: 6/30/23  
Physical Address of Project/Program: 31465 Via Cordoba, Temecula, CA 92592  
INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS  
If Grant is Awarded, Make Check Payable to: Boys & Girls Clubs of Southwest County  
Mailing Address: PO Box 892349  
Temecula, CA 92589

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant Boys & Girls Club of Southwest County  
Organization: \_\_\_\_\_ Year Founded: 1990  
Website: www.bgcswc.org Social Media: @bgcswc  
Number of Paid Staff: 31 Number of Volunteers: 100  
Geographic Area(s) the Organization Serves: Temecula, Murrieta, Lake Elsinore  
Geographic Area(s) the Project/Program Serves: Temecula  
NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.  
Contact Name: Carly Bennett-Valle Title/Position: CEO/CFO  
Contact Person's Direct Telephone: 951-699-1526 Contact Person's Email: carlyv@bgcswc.org

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 1996  
No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 33-0475756 State Identification Number: 1671809

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
<https://www.ftb.ca.gov/online/self-serve-entity-status-letter/index.asp>
- Attach first page only of most recent IRS Form 990 or attach print out of detailed information about your charity found on this State Registry's Search Tool: <http://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>

RECEIVED  
SEP 12 2022  
CITY MANAGER'S OFFICE  
CITY MANAGER'S OFFICE

### 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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

### MISSION STATEMENT OF ORGANIZATION

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

The mission of the Boys & Girls Club of Southwest County is to inspire, enable, and support all youth to realize their full potential as successful, responsible, and impactful members of the community.

### FINANCIAL STATEMENTS

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.



**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
Before & After School Program	\$7226	Awarded	CDBG 22-23
Great Futures Breakfast	\$1080	7/2022	CM CSF 21-22
Great Futures Breakfast	\$1080	7/2022	CM CSF 21-22
Before & After School Program	\$6969	4/2022	CDBG 21-22
Ultimate STEM	\$5000	2/2022	CSF 21-22
Before & After School Program	\$5491	8/2021	CDBG 20-21
Ultimate STEM	\$5000	4/2021	CSF 20-21
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) **FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$ 1125	Walmart	12/2020
\$ 5000	SCE	12/2020
\$ 10000	TJX Foundation	1/2021
\$ 1500	Walmart	3/2021
\$ 20000	OJJDP	12/2021
\$ 3333	TJX Foundation	1/2022
\$ 3567	Nano Bank	6/2022
\$ 18780	RCTC	Ongoing

## GRANT PROJECT/PROGRAM DESCRIPTION

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

Boys & Girls Club of Southwest County (BGCSWC) provides year-round academic support, sports, arts, STEM, career readiness, and leadership programs through our Before & After-School and Day Camp Programs. Our programs consist of high quality integrated academic, behavioral, and social-emotional learning practices that help address issues faced by our youth today. BGCSWC enriches the lives of young people and provides a safe haven in which they can learn and grow. We are committed to ensuring that Club members stay inschool, build healthy relationships, have a strong sense of self, and that they are prepared for adulthood by developing the skills and competencies necessary to be successful.

**2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

ALSO, INCLUDE A LIST OF GOODS, EQUIPMEMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

The BCGSWC will utilize grant funds to support programming efforts for the Before & After School and Day Camp programs for youth ages 6-17. Funds awarded will be used to purchase program and food supplies, equipment (including safety equipment), cover some transportation expenses from transporting youth to/from school, and other necessary expenses (including insurance costs) required to run our high quality, safety focused programs year-round.

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

Grant funding for our programs will benefit youth members ages 6-17 who are Temecula residents. The grant funding will provide needed supplies, equipment, and other necessary expenses required to run safe, quality Before and After School and Day Camp Programs for Temecula's youth at our Pechanga Great Oak Clubhouse.

3b ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:	80
3c ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:	5

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.

BGCSWC will provide Before/After School and Day Camp Programming year-round to youth ages 6-17. Youth will participate in high quality, safety focused youth development programs daily. Funds awarded will be used for supplies, equipment, transportation, food, marketing and other necessary costs required to run these programs.

5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.

During the pandemic, we temporarily closed 2 of our 3 clubhouses. With the support of our community, we were able to keep our doors open at our Pechanga Great Oak Clubhouse in Temecula. We adjusted and adapted a new Learning Hub Program where youth could come to the Club, use our wiFi and participate in their virtual classes during the day. Our staff assisted each child to make sure they could log in and stayed on task each school day, then helped with homework after class. The organization's annual revenue in 2020 decreased 60% or \$900,000 from 2019, and in November of 2020 the Board of Directors made the tough decision to lay-off the President & CEO and Director of Marketing & Special Events to help decrease expenses. We have also faced capacity restrictions due to social distancing practices over the last 2 years.

6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.

Awarded funds will allow BGCSWC to continue existing programming. Our Before & After School and Day Camp Programs are the main umbrella that make up our programming structure. Through both of these programs youth are provided the opportunity to learn and grow in a safe, fun environment with the support of professionally trained mentors.

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>			
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>		<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>			
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)		\$ 50,000	
Amount contributed to the Project/Program by the Applicant Organization		\$ 233,630	
Other grants or funding already awarded for Project/Program, if any CDBG; CSF; RCTC; TJX FOUNDATION; UNITED WAY; NANO BANK		\$ 38,900	
In-Kind match amount or volunteer credit hours estimated amount		\$	
<b>TOTAL REVENUE</b>		<b>\$ 322,530</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>			
Tools/Equipment	INCLUDING SAFETY EQUIPMENT		\$8,520
Facilities/Rent/Insurance	INCLUDING INSURANCE - GENERAL LIABILITY/PROPERTY/WORKERS COMP		\$30,180
Supplies	INCLUDING PROGRAM		\$11,000
Marketing			\$1,000
Services			\$
Food			\$4,000
Other	INCLUDING UTILITIES; TRANSPORTATION		\$30,000
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.		\$237,830
<b>TOTAL EXPENSES</b>			<b>\$322,530</b>
<b>TOTAL BUDGET</b>		<b>\$322,530</b>	<b>\$322,530</b>

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

ORGANIZATION NAME: Boys & Girls Club of Southwest County

MAILING ADDRESS: PO Box 892349 PHONE: (951) 699-1526 x109  
Temecula, CA 92589 EMAIL: carlyv@bgcswc.org

PRESIDENT / AUTHORIZED OFFICER: Carly Bennett-Valle CEO/CFO  
PRINT NAME TITLE

SIGNATURE:  DATE: 9/11/22  
MOUTH, DAY, YEAR

IF DIFFERENT THAN ABOVE,  
APPLICATION PREPARED BY: \_\_\_\_\_  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
[Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959



[Home](#) > [Tax Exempt Organization Search](#) > **Boys & Girls Club Of Southwest County**

< [Back to Search Results](#)

## Boys & Girls Club Of Southwest County

EIN: 33-0475756 | Murrieta, CA, United States

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> **Other Names**

### Publication 78 Data ⓘ

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Organizations eligible to receive tax-deductible charitable contributions. Users may rely on this list in determining deductibility of their contributions.

**On Publication 78 Data List:** Yes

**Deductibility Code:** PC

### Copies of Returns (990, 990-EZ, 990-PF, 990-T) ⓘ

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Electronic copies (images) of Forms 990, 990-EZ, 990-PF or 990-T returns filed with the IRS by charities and non-profits.

> **Tax Year 2019 Form 990**

> **Tax Year 2018 Form 990**

> **Tax Year 2017 Form 990**

> **Tax Year 2016 Form 990**



**Entity Status Letter**

Date: 9/12/2022

ESL ID: 5296811263

**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: 1671809

Entity Name: BOYS & GIRLS CLUBS OF SOUTHWEST COUNTY

- 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](http://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)

EXTENDED TO NOVEMBER 15, 2021

Form **990**

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

**A** For the 2020 calendar year, or tax year beginning and ending

<b>B</b> Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending.	<b>C</b> Name of organization <b>BOYS &amp; GIRLS CLUB OF SOUTHWEST COUNTY</b>	<b>D</b> Employer identification number <b>33-0475756</b>
	Doing business as	<b>E</b> Telephone number <b>951-699-1526</b>
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>25090 JEFFERSON AVE SUITE A</b>	<b>G</b> Gross receipts \$ <b>1,098,246.</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>MURRIETA, CA 92562</b>	<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
<b>F</b> Name and address of principal officer: <b>STEVE AMANTE</b> <b>25090 JEFFERSON AVE STE A, MURRIETA, CA 925</b>		<b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.BGCSWC.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1990</b> <b>M</b> State of legal domicile: <b>CA</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>THE MISSION OF THE BOYS &amp; GIRLS CLUB OF SOUTHWEST COUNTY IS TO INSPIRE, ENABLE, AND SUPPORT ALL</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>22</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>22</b>
	<b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	<b>45</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>105</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>686,867.</b>	<b>698,144.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>0.</b>	<b>0.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>378,521.</b>	<b>159,442.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>1,838,821.</b>	<b>1,083,527.</b>
	<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>0.</b>
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		<b>0.</b>	<b>0.</b>
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		<b>1,003,922.</b>	<b>739,711.</b>
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		<b>0.</b>	<b>0.</b>
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>167,336.</b>			
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		<b>948,741.</b>	<b>672,738.</b>
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>1,952,663.</b>	<b>1,412,449.</b>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>-113,842.</b>	<b>-328,922.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>2,140,262.</b>	<b>1,915,963.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>126,060.</b>	<b>230,683.</b>
		<b>2,014,202.</b>	<b>1,685,280.</b>

**Part II Signature Block**  
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer	Date			
	<b>STEVE AMANTE, TREASURER</b> Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>GREGORY J. PRUDHOMME, CPA</b>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN <b>P00234525</b>
	Firm's name ▶ <b>PRUDHOMME ASSOCIATES CPAS, INC.</b>	Firm's EIN ▶ <b>27-2758510</b>			
	Firm's address ▶ <b>43460 RIDGE PARK DRIVE, SUITE 220 TEMECULA, CA 92590</b>	Phone no. (951) <b>676-3131</b>			

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

032001 12-23-20

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2020)

**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**



FY 2022/2023

COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA

GRANT APPLICATION #

**10**

**CADENZA  
STRING ORCHESTRA**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

(Please Print or Type)

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 10,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: Young Musician Development Fund Start Date: 10/1/2022 End Date: 5/31/2022

Physical Address of Project/Program: 31927 Corte Pollensa Temecula, CA 92592

INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Cadenza String Orchestra

Mailing Address: 31927 Corte Pollensa Temecula, CA 92592

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant

Organization: Cadenza String Orchestra Year Founded: 2018

Website: Fb Cadenza String Orchestra Social Media: Facebook, Instagram

Number of Paid Staff: 0 Number of Volunteers: 10

Geographic Area(s) the Organization Serves: Riverside County

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

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Paz Cecilio Title/Position: Treasurer

Contact Person's Direct Telephone: 951-2400303 Contact Person's Email: pazcecelio@hotmail.com

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: Sept. 20, 2018  
No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 83-4606030 State Identification Number: C4196509

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

### MISSION STATEMENT OF ORGANIZATION

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

*To provide musical education and performance opportunities to under privileged students in the Temecula Valley*

### FINANCIAL STATEMENTS

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) **FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$ 10,000	Inland Empire Co Non Profit Assistance Fund Grant	Sept- 2020
\$		
\$		
\$		
\$		
\$		
\$		
\$		

## GRANT PROJECT/PROGRAM DESCRIPTION

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

Bring cultural arts to the community and provide musical opportunities to financially in need students through performances and high quality music education given by well trained and world class musicians.

2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.

ALSO, INCLUDE A LIST OF GOODS, EQUIPEMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

- musical instruments such as the violin, viola, cello
- rehearsal space rental
- recording equipment i.e. microphones, cables, live sound treatment, generator, computer interface, computer
- music accessories such as strings, music stands
- purchase sheet music & copyright licence

3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.

Temecula Residents will be given the opportunity to listen to world-class musicians. Bringing music to the people will promote unity and bring them closer together. Also, providing music education such as piano, violin, viola and cello lessons to financially in need students of Temecula Valley.

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

300

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

30

**PROJECT/PROGRAM DESCRIPTION  
CONTINUED**

4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.

*As a non profit, we would be able to buy more cultural events to the community and provide quality music lessons to students. Our students win at local and interstate competitions. In 2019, our orchestra won 1st place in Vienna representing Temecula Valley, CA. This funding will allow us to continue and grow our program.*

5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.

*We lost students due to parents not having enough income to go to music lessons. Some students also moved out of state due to cost of living in CA. We are in need of financial support to provide free lessons and promote cultural arts in Temecula.*

6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM, AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.

- The funding will provide jobs to local music teachers for lessons given to under privileged students*
- It will promote cultural events that we as individuals have been providing since 2000 and as a non profit since 2018 in Temecula Valley*
- Our orchestra program will be financially supported by the funding*

PROJECT/PROGRAM BUDGET (do not fill in shaded areas)			
LINE ITEMS FOR PROJECT/PROGRAM		REVENUES	EXPENSES
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>			
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)		\$ 10,000	
Amount contributed to the Project/Program by the Applicant Organization		\$ 2,000	
Other grants or funding already awarded for Project/Program, if any		\$ 0	
In-Kind match amount or volunteer credit hours estimated amount		\$ 13,000	
TOTAL REVENUE		\$ 15,000	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>			
Tools/Equipment			\$ 3,500
Facilities/Rent/Insurance			\$ 2,500
Supplies			\$ 1,000
Marketing			\$ 1,000
Services			\$ 7,500
Food			\$ 2,000
Other			\$ 1,500
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.		\$
TOTAL EXPENSES			\$ 19,000
TOTAL BUDGET		\$	\$ 20,000

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022 (last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City **on or before due date: September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

**Organization:** \_\_\_\_\_ **Name of Project/Program:** \_\_\_\_\_

**FY 2021-2022 Amount of CSF Grant Fund Awarded:** \$ \_\_\_\_\_ **Month & Year CSF Grant Received from City:** \_\_\_\_\_

**Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number):** \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		

**EXPENDITURE TOTAL \$**

EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.



## FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT

**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. [If you were awarded less than \$5,000, submit Expenditure Report for that amount.]

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: _____		Name of Project/Program: _____			
TOTAL FY 2022-2023 Amount of Grant Fund Awarded: \$ _____		Month & Year FIRST \$5,000 check was received from City: _____			
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted).					
2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City					
3. Is this Expenditure Report is submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____.					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

ORGANIZATION NAME: Cadenza String Orchestra

MAILING ADDRESS: 31927 Corte Pollensa PHONE: (951) 2400303  
Temecula, CA 92592 EMAIL: cadenzastringorchestra@gmail.com

PRESIDENT / AUTHORIZED OFFICER: Paz Cecilio Treasurer

SIGNATURE: P. Cecilio DATE: 09/11/2022

IF DIFFERENT THAN ABOVE,  
APPLICATION PREPARED BY: \_\_\_\_\_

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: Stacey.Brown@TemeculaCA.gov (951) 694-6413  
Betsy.Lowrey@TemeculaCA.gov (951) 693-3959



## Entity Status Letter

Date: 9/7/2022

ESL ID: 1281837848

### 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: 4196509

Entity Name: CADENZA STRING ORCHESTRA

- 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](http://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)

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

DEPARTMENT OF THE TREASURY

Date: **MAY 20 2019**

CADENZA STRING ORCHESTRA  
C/O SANDIWA DEL ROSARIO  
31927 CORTE POLLENSA  
TEMECULA, CA 92592-0000

Employer Identification Number:  
83-4606030  
DLN:  
26053530002529  
Contact Person:  
CUSTOMER SERVICE ID# 31954  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
May 31  
Public Charity Status:  
170(b)(1)(A)(vi)  
Form 990/990-EZ/990-N Required:  
Yes  
Effective Date of Exemption:  
September 20, 2018  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947



HOME ABOUT MEDIA CAREERS REGULATIONS RESOURCES PROGRAMS CONTACT

## Registrant Details

**Entity type:** Corporate Class as registered with the Secretary of State or based on founding & registration documents.

<b>Organization Name:</b>	CADENZA STRING ORCHESTRA	<b>IRS FEIN:</b>	834606030
<b>Entity Type:</b>	Public Benefit	<b>SOS/FTB Corporate/Organization Number:</b>	4196509
<b>Registry Status:</b>	Current - In Process	<b>Renewal Due/Exp. Date:</b>	10/15/2022
<b>RCT Registration Number:</b>	CT1272628	<b>Issue Date:</b>	11/15/2020
<b>Record Type:</b>	Charity Registration	<b>Effective Date:</b>	11/13/2020
<b>Date of Last Renewal:</b>	8/2/2021	<b>DBA:</b>	

## Mailing Address

**Street:** 31927 CORTEJO LINDSA  
**Street Line 2:**  
**City, State Zip:** TEMECULA CA 92592

## Filings & Correspondence

<a href="#">CT-100 First Notice To Register</a>	Click on Document Type at the left to open PDF
<a href="#">Form RRF-1</a>	2020
<a href="#">Founding Documents</a>	Click on Document Type at the left to open PDF
<a href="#">Online Renewal Submission</a>	2021
<a href="#">Form CT-TR-1</a>	2021

## Annual Renewal Data

<b>Status of Filing:</b>	Accepted
<b>Accounting Period Begin Date:</b>	6/1/2019
<b>Accounting Period End Date:</b>	5/31/2020
<b>Filing Received Date:</b>	7/15/2020
<b>Form RRF-1 Reject/Incomplete Reason:</b>	
<b>Form CT-TR-1 Reject/Incomplete Reason:</b>	
<b>IRS Form 990 Reject/Incomplete Reason:</b>	
<b>Notes From Registry Staff:</b>	
<b>Status of Filing:</b>	E-Accepted
<b>Accounting Period Begin Date:</b>	6/1/2020
<b>Accounting Period End Date:</b>	5/31/2021
<b>Filing Received Date:</b>	8/1/2021
<b>Form RRF-1 Reject/Incomplete Reason:</b>	
<b>Form CT-TR-1 Reject/Incomplete Reason:</b>	
<b>IRS Form 990 Reject/Incomplete Reason:</b>	
<b>Notes From Registry Staff:</b>	
<b>Status of Filing:</b>	In Process
<b>Accounting Period Begin Date:</b>	6/1/2021
<b>Accounting Period End Date:</b>	5/31/2022
<b>Filing Received Date:</b>	7/5/2022
<b>Form RRF-1 Reject/Incomplete Reason:</b>	
<b>Form CT-TR-1 Reject/Incomplete Reason:</b>	
<b>IRS Form 990 Reject/Incomplete Reason:</b>	
<b>Notes From Registry Staff:</b>	

## Related Registrations & Event Reports

The related records shown below depend on the record type being viewed:

- Charity Registrations relate to Professional Fundraising Events which relate to Professional Fundraiser Registrations.
- Raffle Registrations relate to Raffle Reports.
- Click on the **RCT Registration No** to navigate to the related record.

No Related Records

FY 2022/2023

COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA

GRANT APPLICATION #

**11**

**CANINE SUPPORT TEAMS INC.**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 50,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: PAWZ for Wounded Veterans Program Start Date: 01/01/23 End Date: 12/31/23

Physical Address of Project/Program: \_\_\_\_\_  
INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Canine Support Teams, Inc.

Mailing Address: 24480 Jenny Ln, Murrieta, CA 92562

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant

Organization: Canine Support Teams, Inc. Year Founded: 1989

Website: caninesupportteams.org Social Media: F: @caninesupportteams/ I: @k9supportteams/  
T: @K9SupportTeams

Number of Paid Staff: 9 Number of Volunteers: 40+

Geographic Area(s) the Organization Serves: Southern California 84%, AZ, CO, HI, ID, NV, OR, TX, and WA

Geographic Area(s) the Project/Program Serves: Southern California 87% and HI, NV, OR, TX, WV

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Judy Hernandez Title/Position: Client Service/Donor Relations/Admin.

Contact Person's Direct Telephone: 951-301-3625 Relations/Administration

Contact Person's Email: cstmain@caninesupportteams.org

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 1991

No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 33-0434821 State Identification Number: 1484828

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

Is a Temecula City Council Member a member of the Board of Directors or officer of the organization?

No  Yes  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

### MISSION STATEMENT OF ORGANIZATION

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

Mission: To provide specially trained dogs to persons with disabilities to support their personal, social, and occupational independence.

Canine Support Team's (CST) goal is to place 30 dogs annually with individuals who have various disabilities including, but not limited to, multiple sclerosis, cerebral palsy, cystic fibrosis, traumatic brain injury (TBI), spinal cord injury, post-traumatic stress disorder (PTSD), and limited mobility. By delivering expertly trained service dogs, we seek to provide disabled individuals with enhanced mobility, independence, and companionship. CST accomplishes this by individually training each dog to assist with: walking with and beside a wheelchair or walker, retrieving dropped items, turning lights on and off, opening and closing doors, pressing elevator buttons, pulling off socks and sweaters, and barking to alert for help in emergencies, and serving as an ice-breaker in public situations. For eligible veteran clients, CST provides the service dog at no cost to the recipients.

### FINANCIAL STATEMENTS

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.



**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
PAWZ for Wounded Veterans	\$ 5,491.75	September 2020	City of Temecula
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) **FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$ 15,000	California Relief Grant Program	March 2021
\$ 2,800	Fredrick and Lorine Taylor Foundation	September 2020
\$ 15,000	Mary Jo & Hank Greenberg Animal Welfare Foundation	November 2020
\$ 10,000	Inland Empire Community Foundation	October 2020
\$ 5,000	Linda I. Smith Foundation	November 2020
\$ 3,500	Sidney Stern Memorial Trust	May 2021
\$ 5,000	The Armrod Charitable Foundation	May 2021
\$ 525,827	Wounded Warriors Service Dog Program (US Treasury)	January 2022

## GRANT PROJECT/PROGRAM DESCRIPTION

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

CST launched the PAWZ for Wounded Veterans Program to address the increasing number of men and women who, after serving our country in the United States military, require a service dog (SD). At no cost to the recipients, CST trains service dogs to support disabled veterans who are seeking enhanced mobility, independence, and companionship. Whether their disability is obvious or invisible, CST is committed to **helping veterans reclaim their independence.**

At around 8 weeks, SDs are placed with Volunteer Puppy Raisers (VPR), who work directly with CST trainers to socialize the puppies through outings and experiences (e.g., navigating restaurants and shopping centers, using public transportation, processing through TSA, handling crowded events, etc.) VPRs participate in CST-led trainings twice per month. At 18 months, dogs enter Advanced Training (AT) with our Inmate Trainers (IT) through our Prison Pup Program. SDs learn the specific tasks necessary to support a disabled client. ITs meet weekly for training sessions with CST's professional trainers. After AT, dogs are matched with disabled veterans and start the 10-day Team Training at CST's facility. Upon completion, the dog and veteran receive the Assistance Dogs International (ADI) Public Access Certification.

For the "working life" of their SDs, clients are encouraged to contact CST for supplemental training and required to complete a CST Veterinary Health Certificate and to recertify with ADI.

### 2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.

ALSO, INCLUDE A LIST OF GOODS, EQUIPMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

The funds provided by this grant will help CST to provide two additional Temecula veterans with a service dog. It costs an estimated \$25,000 to prepare a dog for a life of service. The bulk of CST's expenses are related to the physical care and training of our service dogs. The money awarded will pay for the training, training equipment (e.g., leashes, collars, harnesses, vests, and training tools), canine care equipment (e.g., grooming equipment, crates, microchips, housing), dog food, supplies for the advanced training program (e.g., training treats, consumable tools, equipment), kennel supplies (e.g., food dishes, storage containers, specialized cleaning supplies), and veterinary care and prescriptions (e.g., monthly flea, tick, and heartworm pills, general health, and emergency illnesses).

### 3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.

According to the CDC, one in four adults in the U.S. has a disability, including impairments with vision, hearing, mobility, and cognition. These individuals face many challenges, particularly relating to their access to quality jobs, education, and other social functions. Yet, with the assistance of expertly trained service dogs, disabled individuals have been able return to the activities that enrich their lives. For instance, one recent study concluded that "vets with service dogs reported a 22 percent higher rate of life satisfaction, as well as similarly increased rates of mental health, resilience, and ability to participate in social activities." This same study also found that veterans with service dogs "indicated having fewer post-traumatic stress disorder (PTSD) symptoms and lower levels of depression." (rebootcamp.militarytimes.com)

The City of Temecula has more than 8,000 veterans, of which more than 6,000 are under the age of 64. With the generous funding from this grant, CST will be able to provide two additional veterans from Temecula with a professionally trained service dog to help support their personal, social, and occupational independence. Furthermore, CST currently has 7 other veteran clients who reside in Temecula, who we will be able to continue to provide supplemental training and re-certify with ADI.

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

9

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

10

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

**4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.**

At no cost to the recipient, CST's PAWZ program trains dogs to support disabled veterans who are seeking enhanced mobility, independence, and companionship. This grant will help CST provide two Temecula veterans with a service dog. It costs an estimated \$25,000 to prepare a dog for a life of service.

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

Due to California COVID state mandates, which precluded CST from meeting with clients, conducting the prison training program, and holding our Team Training intensives, our number of placements declined for 2020. Beginning in July 2020, we were able to resume training in a limited capacity (1:1 team trainings) and were pleased to place eight dogs with veterans in such a short time. In 2021, ten dogs were placed with veterans. Again, COVID restrictions hampered our ability to conduct much of our advanced training, especially within the prison. Today, we are back to our pre-COVID placement levels with an anticipated 30 dogs being placed with veterans this year.

It should be noted, that while we were under COVID restrictions, CST did take a number of steps to ensure the safety and well-being of our clients, pups, and staff. Most notable, CST initiated supplemental, specialized virtual training, including: (1) helping clients with PTSD mitigate symptoms being exacerbated by their isolation using their service dog; (2) offering new methods for navigating stores and for exercising with social distancing; and (3) providing solutions, especially for those suffering from compromised immune systems, for caring for their dog and themselves.

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

The approximate cost to raise and train a dog for a life of service is \$25,000. Over the next year, CST will identify two eligible veterans from within Temecula who would benefit from the partnership of a service dog. With the generous funds provided by the City of Temecula, CST will be able to provide these two individuals with an expertly trained service dog at no cost to the individual.

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>			
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>		<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>			
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)		\$50,000	
Amount contributed to the Project/Program by the Applicant Organization		\$	
Other grants or funding already awarded for Project/Program, if any		\$525,827	
In-Kind match amount or volunteer credit hours estimated amount		\$	
TOTAL REVENUE		\$ 575,827	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>			
Tools/Equipment			\$ 47,040
Facilities/Rent/Insurance			\$ 57,680
Supplies			\$ 8,080
Marketing			\$ 68,800
Services			\$ 60,320
Food			
Other			\$18,690
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.		\$ 218,250
TOTAL EXPENSES			\$ 478,940
TOTAL BUDGET		\$	\$ 478,940

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022 (last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City **on or before due date: September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

Organization: \_\_\_\_\_ Name of Project/Program: \_\_\_\_\_

FY 2021-2022 Amount of CSF Grant Fund Awarded: \$ \_\_\_\_\_ Month & Year CSF Grant Received from City: \_\_\_\_\_

Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number): \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		

**EXPENDITURE TOTAL \$** EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.

**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**

**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. [If you were awarded less than \$5,000, submit Expenditure Report for that amount.]

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: _____			Name of Project/Program: _____		
TOTAL FY 2022-2023 Amount of Grant Fund Awarded: \$ _____			Month & Year FIRST \$5,000 check was received from City: _____		
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted). 2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City 3. Is this Expenditure Report is submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____.					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			\$	<b>EXPENDITURE TOTAL</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

**ORGANIZATION NAME:** Canine Support Teams, Inc.

**MAILING ADDRESS:** 24480 Jenny Ln, Murrieta, CA 92562 **PHONE:** (\_\_\_\_) 951-301-3625

**EMAIL:** cstmain@caninesupportteams.org

**PRESIDENT / AUTHORIZED OFFICER:** Carol Roquemore  
PRINT NAME TITLE

**SIGNATURE:** Carol Roquemore **DATE:** 9/8/22  
MONTH, DAY, YEAR

**IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:** Melissa Alexo Grant officer  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
[Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959



[Home](#) > [Tax Exempt Organization Search](#) > **Canine Support Teams Inc.**

< [Back to Search Results](#)

# Canine Support Teams Inc.

EIN: 33-0434821 | Murrieta, CA, United States

> **Other Names**

## Publication 78 Data

Organizations eligible to receive tax-deductible charitable contributions. Users may rely on this list in determining deductibility of their contributions.

**On Publication 78 Data List:** Yes

**Deductibility Code:** PC

## Copies of Returns (990, 990-EZ, 990-PF, 990-T)

Electronic copies (images) of Forms 990, 990-EZ, 990-PF or 990-T returns filed with the IRS by charities and non-profits.

> **Tax Year 2019 Form 990**

> **Tax Year 2018 Form 990**

> **Tax Year 2017 Form 990**

> **Tax Year 2016 Form 990**







## Entity Status Letter

Date: 9/4/2022

ESL ID: 8084017744

### 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: 1484828

Entity Name: CANINE SUPPORT TEAMS, 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](http://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)

Form **990**

## Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

<b>A</b> For the <b>2020</b> calendar year, or tax year beginning and ending																	
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;"><b>C</b> Name of organization <b>CANINE SUPPORT TEAMS, INC.</b></td> <td><b>D</b> Employer identification number <b>33-0434821</b></td> </tr> <tr> <td>Doing business as</td> <td><b>E</b> Telephone number <b>(951)-301-3625</b></td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>P.O. BOX 891767</b></td> <td><b>G</b> Gross receipts \$ <b>784,460.</b></td> </tr> <tr> <td>City or town, state or province, country, and ZIP or foreign postal code <b>TEMECULA, CA 92589-1767</b></td> <td><b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td><b>F</b> Name and address of principal officer: <b>CAROL ROQUEMORE</b> <b>SAME AS C ABOVE</b></td> <td><b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td><b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td><b>H(c)</b> Group exemption number ▶</td> </tr> <tr> <td><b>J</b> Website: ▶ <b>WWW.CANINESUPPORTTEAMS.ORG</b></td> <td><b>L</b> Year of formation: <b>1990</b> <b>M</b> State of legal domicile: <b>CA</b></td> </tr> <tr> <td><b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td></td> </tr> </table>	<b>C</b> Name of organization <b>CANINE SUPPORT TEAMS, INC.</b>	<b>D</b> Employer identification number <b>33-0434821</b>	Doing business as	<b>E</b> Telephone number <b>(951)-301-3625</b>	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>P.O. BOX 891767</b>	<b>G</b> Gross receipts \$ <b>784,460.</b>	City or town, state or province, country, and ZIP or foreign postal code <b>TEMECULA, CA 92589-1767</b>	<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>F</b> Name and address of principal officer: <b>CAROL ROQUEMORE</b> <b>SAME AS C ABOVE</b>	<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>H(c)</b> Group exemption number ▶	<b>J</b> Website: ▶ <b>WWW.CANINESUPPORTTEAMS.ORG</b>	<b>L</b> Year of formation: <b>1990</b> <b>M</b> State of legal domicile: <b>CA</b>	<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
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**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>CANINE SUPPORT TEAMS (CST) IS A CALIFORNIA BASED NON-PROFIT ORGANIZATION THAT PROVIDES SPECIALLY</b>		
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>8</b>
<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>6</b>
<b>5</b>	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	<b>14</b>
<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>50</b>
<b>7 a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>
<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
<b>9</b>	Program service revenue (Part VIII, line 2g)	<b>650,543.</b>	<b>781,283.</b>
<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>3,602.</b>	<b>2,950.</b>
<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>752.</b>	<b>227.</b>
<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>8,641.</b>	<b>-5,334.</b>
<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>663,538.</b>	<b>779,126.</b>
<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	<b>0.</b>	<b>0.</b>
<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>0.</b>	<b>0.</b>
<b>16 a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<b>385,795.</b>	<b>360,815.</b>
<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>68,991.</b>	<b>0.</b>	<b>0.</b>
<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>304,631.</b>	<b>397,514.</b>
<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>690,426.</b>	<b>758,329.</b>
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<b>-26,888.</b>	<b>20,797.</b>
<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
<b>21</b>	Total liabilities (Part X, line 26)	<b>341,292.</b>	<b>605,226.</b>
<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<b>10,000.</b>	<b>253,137.</b>
		<b>331,292.</b>	<b>352,089.</b>

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer <b>CAROL ROQUEMORE, VICE PRESIDENT/CEO</b>	Date	
	Type or print name and title		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>LOVEPREET BUTTAR, CPA</b>	Preparer's signature <b>LOVEPREET BUTTAR, CP</b>	Date <b>11/10/21</b>
	Firm's name ▶ <b>MERCADIEN, P.C.</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P01329403</b>
	Firm's address ▶ <b>P.O. BOX 7648</b> <b>PRINCETON, NJ 08543-7648</b>	Firm's EIN ▶ <b>22-3271712</b>	Phone no. <b>609-689-9700</b>

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

**FY 2022/2023**

**COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA**

**GRANT APPLICATION #**

**12**

**CAUSE FUR PAWS INC.**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 10,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: Cause Fur Paws Helping animals with diabetes Start Date: 01/01/2022 End Date: 12/1/2022

Physical Address of Project/Program: 36522 Via Verde Temecula, Ca 92592  
INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Cause Fur Paws, Inc  
Mailing Address: 47200 De Portola Temecula, Ca 92592

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant  
Organization: Cause Fur Paws, Inc Year Founded: 2011  
Website: www.causefurpaws.org Social Media: https://www.facebook.com/causeforpawstemeci  
Number of Paid Staff: 0 Number of Volunteers: 3  
Geographic Area(s) the Organization Serves: Riverside County  
Geographic Area(s) the Project/Program Serves: Temecula  
NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.  
Contact Name: Valerie Andrews Title/Position: President  
Contact Person's Direct Telephone: 951 775-7275 Contact Person's Email: val1@causeefurpaws.org

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 2011  
No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 27-5415050 State Identification Number: 3354176

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link: [https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

**MISSION STATEMENT OF ORGANIZATION**

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

To provide donated funds to veterinarians and animal hospitals that directly benefits the immediate physical well-being of animal diabetes. These funds will help finance costs for medicine, veterinarian services and hospitalization expenses, due to the effects of diabetes on the animals and/or prevent euthanasia due to inability to meet the costs of medical care. Upon application, approval and fund availability, Cause for Paws will disperse funds to pay the bill received from the veterinarian or animal hospital with eligibility criteria met and availability of funds.

To provide appropriate referrals for health or behavioral care for Animals with Diabetes.  
To provide education and to inform the public about Diabetes in animals

**FINANCIAL STATEMENTS**

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) **FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		

**GRANT PROJECT/PROGRAM DESCRIPTION**

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

Our program is to get the word out by local publications, social media outreach and direct emailings that this organization can help with the costs associated to animal diabetes. They don't need to euthanize their pets we can help. We have been helping for over 11 years. We also hold a fund raiser at Oak Mountain Winery on August 21st to raise money, have a dog carnival for the dogs to enjoy and educate the people about canine diabetes, treatments and funding.

**2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

ALSO, INCLUDE A LIST OF GOODS, EQUIPMEMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

We will use this money to reach out to all of the local Temecula Veterinarians, animal hospitals, pet stores and animal supply stores to let them know we will help any needy pet owners with the costs of diabetes control to include insulin, needles, glucose testing and test kits as well as precription food as long as the funds last. Helping our local pet owners.

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

Any animals in Temecula with diabetes will benefit with our support in paying for insulin and needles special diets, vet bills and testing. The people will benefit by not only the finacial support but the community being educated what to look for in their pets and get them help before they get very sick or loose their eyesight. The education will reach the whole community with out outreach. 1 in 500 dogs suffer from diabetes.

3b ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:	10,000
3c ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:	14



**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.

It has been our goal to be able to reach more people to educate them on canine diabetes and let them know we are here to help financially with the treatment of their pets. We are also experienced with our own diabetic dog symptoms and treatments and help give comfort and suggestions for everyday care and giving shots to animals.

5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.

During covid we were not able to do any fundraising ( it is still not easy to raise funds and get donations). The Veterinarian situation is still not good as many retired so people have long waits to get an appointment for their pets. We are able to help in referring vets that specialize in diabetes and eye issues which is common with diabetic dogs. With people having to pay higher prices for everything they don't have the fund it takes for insulin and needles and therefore are forced to Euthanize their furry friends. That is where we come in and can pay for the services the animals need with your help.

6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.

The funds will enable us to continue helping the animals and will give us the money to promote what we do and gain support to continue growing and helping the community. We have been self supporting for over 11 years but we want to reach everyone and not have to turn anyone down for lack of funds. We will have the fund to put together pamphlets with information about canine diabetes and distribute to all local animal hospitals, Vet offices, petco etc.

Type text here

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 10,000	
Amount contributed to the Project/Program by the Applicant Organization	\$ 1500	
Other grants or funding already awarded for Project/Program, if any	\$	
In-Kind match amount or volunteer credit hours estimated amount	\$	
<b>TOTAL REVENUE</b>	<b>\$ 11500.00</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$
Facilities/Rent/Insurance		\$ 500
Supplies		\$ 500
Marketing		\$ 1500
Services		\$
Food		1000
Other		\$
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$
<b>TOTAL EXPENSES</b>		<b>\$ 3500.00</b>
<b>TOTAL BUDGET</b>	<b>\$</b>	<b>\$ 3500.00</b>

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022 (last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City **on or before due date: September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

**Organization:** \_\_\_\_\_ **Name of Project/Program:** \_\_\_\_\_

**FY 2021-2022 Amount of CSF Grant Fund Awarded:** \$ \_\_\_\_\_ **Month & Year CSF Grant Received from City:** \_\_\_\_\_

**Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number):** \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.</b>	

**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**  
**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. [If you were awarded less than \$5,000, submit Expenditure Report for that amount.]

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
 Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: _____			Name of Project/Program: _____		
TOTAL FY 2022-2023 Amount of Grant Fund Awarded: \$ _____			Month & Year FIRST \$5,000 check was received from City: _____		
1. Is this Expenditure Report to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted). 2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City 3. Is this Expenditure Report submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

ORGANIZATION NAME: Cause For Paws Inc

MAILING ADDRESS: 47200 De Portola PHONE: (951) 775-7375

EMAIL: vanessa.val2@causeforpaws.org

PRESIDENT / AUTHORIZED OFFICER: Vanessa Andrews President  
PRINT NAME TITLE

SIGNATURE: Vanessa Andrews DATE: 7/2/22  
MONTH, DAY, YEAR

IF DIFFERENT THAN ABOVE,  
APPLICATION PREPARED BY: \_\_\_\_\_  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: Stacey.Brown@TemeculaCA.gov (951) 694-6413  
Betsy.Lowrey@TemeculaCA.gov (951) 693-3959



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

## Entity Status Letter

Date: 7/2/2022

ESL ID: 2469901519

### 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: 3354176

Entity Name: CAUSE FUR PAWS, 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](http://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)

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

DEPARTMENT OF THE TREASURY

Date: **SEP 25 2011**

CAUSE FUR PAWS INC  
C/O VALERIE ANDREWS  
47200 DE PORTOLA  
TEMECULA, CA 92592

Employer Identification Number:  
27-5415050  
DLN:  
17053227305011  
Contact Person:  
YVONNE LIGGETT ID# 31296  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
509(a)(2)  
Form 990 Required:  
Yes  
Effective Date of Exemption:  
January 25, 2011  
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,



Lois G. Lerner  
Director, Exempt Organizations

Enclosure: Publication 4221-PC

Letter 947 (DO/CG)



## 2021 - 990-N (e-Postcard) ACCEPTANCE LETTER Form 990-N (e-Postcard) Online Filing

Congratulations! Your 2021 tax return has been accepted by the IRS. Thank you for preparing your exempt tax return, IRS Form 990-N, with ExpressTaxExempt. Your return information is listed below and we hope you had a pleasant experience e-filing with ExpressTaxExempt.

### FORM INFORMATION

TAX YEAR: 2021

IRS SUBMISSION ID: 32101820220322000136

RETURN ID: 4B00032229517-4

E-FILE TIME STAMP: 2/1/2022 2:03:58 PM

### TAXPAYER INFORMATION

NAME: Cause Fur PAws Inc

DBA NAME: Cause Fur Paws

ADDRESS: 47200 De Portola Rd

STATE/COUNTRY: California

PHONE: (951) 767-2116

TAX ID: 27-5415050

CITY: Temecula

ZIP: 92592

EMAIL: vandrews@oakmountainwinery.com

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### PLEASE PRINT A COPY OF THIS LETTER FOR YOUR RECORDS

Thank you again for your business. If you have any questions or need any assistance, please contact our customer support via live online chat, email at [support@expresstaxexempt.com](mailto:support@expresstaxexempt.com), or by phone at 704-839-2321. We're here to help!

Sincerely,  
ExpressTaxExempt Support Team  
(704) 839-2321  
[support@expresstaxexempt.com](mailto:support@expresstaxexempt.com)

Span Enterprises • (704) 839-2321 • 2685 Celanese Road Suite 103 • Rock Hill, SC • 29732



## Registrant Details

Entity type: [Corporate Charitable Organization with the Secretary of State based on Form 990, a 501\(c\)\(3\) organization.](#)

<b>Organization Name:</b>	CAUSE FUR PAWS, INC.	<b>IRS FEIN:</b>	275415050
<b>Entity Type:</b>	Public Benefit	<b>SOS/FTB Corporate/Organization Number:</b>	3354176
<b>Registry Status:</b>	Delinquent	<b>Renewal Due/Exp. Date:</b>	5/15/2018
<b>RCT Registration Number:</b>	CT0251190	<b>Issue Date:</b>	7/17/2017
<b>Record Type:</b>	Charity Registration	<b>Effective Date:</b>	7/17/2017
<b>Date of Last Renewal:</b>		<b>DBA:</b>	

## Mailing Address

**Street:** 47200 DE PORTOLA  
**Street Line 2:**  
**City, State Zip:** TEMECULA CA 92592

## Filings & Correspondence

<a href="#">Missing Reports Letter</a>	Missing Reports Letter
<a href="#">Incomplete RRF-1 Letter</a>	Incomplete RRF-1 Letter
<a href="#">Founding Documents</a>	Founding Documents
<a href="#">Confirmation of Registration Letter</a>	Confirmation of Registration Letter
<a href="#">Form RRF-1</a>	2020
<a href="#">1st Delinquency Letter</a>	1st Delinquency Letter
<a href="#">Founding Document</a>	Click on Document Type at the left to open PDF
<a href="#">2013 Form RRF-1</a>	Click on Document Type at the left to open PDF
<a href="#">2016 Form RRF-1</a>	Click on Document Type at the left to open PDF
<a href="#">2015 Form RRF-1</a>	Click on Document Type at the left to open PDF
<a href="#">2014 Form RRF-1</a>	Click on Document Type at the left to open PDF
<a href="#">2012 Form RRF-1</a>	Click on Document Type at the left to open PDF
<a href="#">2011 Form RRF-1</a>	Click on Document Type at the left to open PDF

## Annual Renewal Data

<b>Status of Filing:</b>	Accepted
<b>Accounting Period Begin Date:</b>	1/1/2011
<b>Accounting Period End Date:</b>	12/31/2011
<b>Filing Received Date:</b>	8/21/2017
<b>Form RRF-1 Reject/Incomplete Reason:</b>	
<b>Form CT-TR-1 Reject/Incomplete Reason:</b>	
<b>IRS Form 990 Reject/Incomplete Reason:</b>	
<b>Notes From Registry Staff:</b>	
<b>Status of Filing:</b>	Accepted
<b>Accounting Period Begin Date:</b>	1/1/2012
<b>Accounting Period End Date:</b>	12/31/2012
<b>Filing Received Date:</b>	8/21/2017

<b>Form RRF-1 Reject/Incomplete Reason:</b> <b>Form CT-TR-1 Reject/Incomplete Reason:</b> <b>IRS Form 990 Reject/Incomplete Reason:</b> <b>Notes From Registry Staff:</b>	
<b>Status of Filing:</b> <b>Accounting Period Begin Date:</b> <b>Accounting Period End Date:</b> <b>Filing Received Date:</b> <b>Form RRF-1 Reject/Incomplete Reason:</b> <b>Form CT-TR-1 Reject/Incomplete Reason:</b> <b>IRS Form 990 Reject/Incomplete Reason:</b> <b>Notes From Registry Staff:</b>	Accepted 1/1/2013 12/31/2013 8/21/2017
<b>Status of Filing:</b> <b>Accounting Period Begin Date:</b> <b>Accounting Period End Date:</b> <b>Filing Received Date:</b> <b>Form RRF-1 Reject/Incomplete Reason:</b> <b>Form CT-TR-1 Reject/Incomplete Reason:</b> <b>IRS Form 990 Reject/Incomplete Reason:</b> <b>Notes From Registry Staff:</b>	Accepted 1/1/2014 12/31/2014 8/21/2017
<b>Status of Filing:</b> <b>Accounting Period Begin Date:</b> <b>Accounting Period End Date:</b> <b>Filing Received Date:</b> <b>Form RRF-1 Reject/Incomplete Reason:</b> <b>Form CT-TR-1 Reject/Incomplete Reason:</b> <b>IRS Form 990 Reject/Incomplete Reason:</b> <b>Notes From Registry Staff:</b>	Accepted 1/1/2015 12/31/2015 8/21/2017
<b>Status of Filing:</b> <b>Accounting Period Begin Date:</b> <b>Accounting Period End Date:</b> <b>Filing Received Date:</b> <b>Form RRF-1 Reject/Incomplete Reason:</b> <b>Form CT-TR-1 Reject/Incomplete Reason:</b> <b>IRS Form 990 Reject/Incomplete Reason:</b> <b>Notes From Registry Staff:</b>	Accepted 1/1/2016 12/31/2016 8/21/2017
<b>Status of Filing:</b> <b>Accounting Period Begin Date:</b> <b>Accounting Period End Date:</b> <b>Filing Received Date:</b> <b>Form RRF-1 Reject/Incomplete Reason:</b> <b>Form CT-TR-1 Reject/Incomplete Reason:</b> <b>IRS Form 990 Reject/Incomplete Reason:</b> <b>Notes From Registry Staff:</b>	Not Submitted 1/1/2017 12/31/2017
<b>Status of Filing:</b> <b>Accounting Period Begin Date:</b> <b>Accounting Period End Date:</b> <b>Filing Received Date:</b> <b>Form RRF-1 Reject/Incomplete Reason:</b> <b>Form CT-TR-1 Reject/Incomplete Reason:</b> <b>IRS Form 990 Reject/Incomplete Reason:</b> <b>Notes From Registry Staff:</b>	Not Submitted 1/1/2018 12/31/2018
<b>Status of Filing:</b> <b>Accounting Period Begin Date:</b> <b>Accounting Period End Date:</b> <b>Filing Received Date:</b> <b>Form RRF-1 Reject/Incomplete Reason:</b> <b>Form CT-TR-1 Reject/Incomplete Reason:</b>	Not Submitted 1/1/2019 12/31/2019

**IRS Form 990 Reject/Incomplete Reason:**

**Notes From Registry Staff:**

**Status of Filing:** Incomplete

**Accounting Period Begin Date:** 1/1/2020

**Accounting Period End Date:** 12/31/2020

**Filing Received Date:** 8/18/2021

**Form RRF-1 Reject/Incomplete Reason:**

**Form CT-TR-1 Reject/Incomplete Reason:**

**IRS Form 990 Reject/Incomplete Reason:**

**Notes From Registry Staff:**

## Related Registrations & Event Reports

This section contains the information found on the record from the following:

- **Flowing Vendors:** All states for which a Form 990 was filed within the filing period, and Form 990 Rejected by
- **State Registrations:** All states for which a Return was filed
- **Check for RCT Registration No. 1 Change:** All states and years

No Related Records

**FY 2022/2023**

**COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA**

**GRANT APPLICATION #**

**13**

**CULTIVATING INCLUSION INC.**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 7,500.00 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: Cultivating Inclusion Inc. Start Date: 02-02-2015 End Date: ongoing

Physical Address of Project/Program: 39775 Alta Murrieta Dr., Murrieta, CA 92563 - \*no mail should be sent to physical address.

INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Cultivating Inclusion c/o Mary Ann Tams \*\*

Mailing Address: 31430 Loma Linda Rd.,

Temecula, CA 92592-1604 \*\*all correspondence needs to go to this address.

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant

Organization: Cultivating Inclusion Inc. Year Founded: 2015

Website: http://www.cultivatinginclusionfarm.com Social Media: Facebook, Instagram

Number of Paid Staff: zero Number of Volunteers: 15 to 20

Geographic Area(s) the Organization Serves: Southwest Riverside County

Geographic Area(s) the Project/Program Serves: Southwest Riverside County

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Mary Ann Tams Title/Position: Garden Director

Contact Person's Direct Telephone: 951-296-7756 Contact Person's Email: Cultivatinginclusion2@yahoo.com

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 06-26-2018

No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 82-4809510 State Identification Number: ~~951-296-7756~~ 4127453

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 ~~+~~ attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

### MISSION STATEMENT OF ORGANIZATION

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

Cultivating Inclusion is a one of a kind project that provides vocational training opportunities for youth and adults with special needs throughout our valley. We provide a job site location for day programs, two of which, Care-Rite Vocational Services and TMI Vocational Services are located in the City of Temecula. We work side by side with special needs adults as they learn how to prepare, plant, nurture and ultimately harvest produce. The feeling of satisfaction and accomplishment is palatable upon their faces. Not only do our special needs adult visitors learn the rudiments of gardening, they know that the produce they have cared for goes to local food banks. We have been able to bring nearly 1,200 lbs of citruss and produce to St. Vincent de Paul (St. Catherine's Catholic Church chapter) and Western Eagle Foundation this year alone.

Together we learn to work as a team and socialize with a bit of fun in between through snacks, games and crafts. All of the above is brought together by a wonderful group of volunteers who believe that our special needs adults involved in Cultivating Inclusion are a necessary and vital part of our community.

### FINANCIAL STATEMENTS

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
City of Temecula	\$ 5,000.00	01-2022	Community Serv Reinvesting in Temecula Grant
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$ 1,000.00	Heritage Hills Event Ctr.	01-2020
\$ 660.00	Inland Empire Community Foundation	9-2020
\$ 5,000.00	Lendistry - State of CA Grant Coalition - California Relief Program	02-2021
\$ 1,420.00	Rodgers Seed Money	01-2021
\$ 3,500.00	Vines Christian Fellowship	03-2021
\$ 1,450.00	Network for Good	06-2022
\$ 300.00	Vines Christian Fellowship	06-2022
\$ 217.00	The Habit - Fundraiser percentage of sales	06-2022

## GRANT PROJECT/PROGRAM DESCRIPTION

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

The Cultivating Inclusion farm is specifically designed for special needs adults. We literally give our special needs adult visitors the tools to care for and nurture produce in a community garden setting. We welcome adults who are part of State of California licensed day programs and students in the Adult Transition Programs in Temecula Valley USD. Together we harvest a variety of produce which in turn is donated to local food banks, i.e. St. Vincent de Paul, Western Eagle Foundation and Community Mission of Hope. In this positive outdoor environment our patient volunteers work side by side with our farmhands, and when we take a break together, socializing skills are honed and enjoyed. The unique combination of co-workers is real and friendships are formed, united in a great cause to provide fresh produce to our neighbors in need.

### 2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.

ALSO, INCLUDE A LIST OF GOODS, EQUIPMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

Keeping our landscape clear of weeds and vermin is of primary concern. Because when both of these pests are present our produce is threatened and the beauty is blighted on the property. As this is very vital, keeping our farm neat and healthy, we require both weed abatement and pest control services.

In addition, we supply our special needs adults with water, healthy snacks, arts and crafts, copy services for different information and adult coloring books. For promotional purposes funds are spent on flyers for events, business and post cards. Not to mention signage so that our garden is one that can be located easily. We recently had a theft of our previous heavy aluminum sign at the farm which was a \$700.00 purchase.

The tools and replacements that are required of gardening is also one in which monies are spent. Along with the buying starter plants, shrubs and trees to shade our garden and provide beauty. Soils of all variety to enrich our indigenous soil are required and this too is an expense.

All in all...any resources received will be put to good use and will very much help our farm grow..

### 3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.

Temecula residents who attend either a day program like Care Rite, TMI or ATP programs in TVUSD benefit from the Cultivating Inclusion farm experience. Once our special needs adults walk through our garden gate they are greeted with a smile and hello. This is sometimes not always the case when they enter locations, but at the farm all are welcome and appreciated by their presence. We become friends and co-workers, bringing life to our soil and harvesting the produce, it is a sense of accomplishment that is palpable and necessary feeling for everyone to experience.

3b ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:	350
3c ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:	15 to 20



**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

**4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.**

We are a community garden set up to teach our special needs adults about growing produce. Fresh produce that we in turn donate to fellow neighbors in need of fresh food who welcome a fresh alternative. In this growing process we show our special needs adults they have purpose.

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

Covid 19 specifically affected our non profit due to the fact that our adults in both day programs and ATP classes with TVUSD were not meeting in person. Therefore, like the rest of the world, they had to resort to communicating with those outside of their home via zoom. In 2020, though the Cultivating Inclusion farm was being maintained we were not being visited by our special needs communities because of the restrictions. When 2021 came around, we greeted sporadically special needs adults whose day programs limited to being open three days a week. We would also host special events around holidays, wherein folks picked out pumpkins, made pine cone ornaments and valentines with sunflower seeds. In June of 2021, we were able once again to greet our day programs and we were thrilled to have them back we had missed them and our mission of working together to grow produce for our neighbors in need.

Since the pandemic is ongoing even now, I notice that plants, delivery of soils, seeds and snacks that we provide have all increased in price. More often than not, our dear volunteers will donate snacks and craft supplies in an effort to decrease having Cultivating Inclusion funds used for this reason.

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

In addition to promotional items, supplies and general repairs, we would like to make the Cultivating Inclusion farm accessible for those special needs adults who have mobility issues. It has been suggested that perhaps our center lane of the farm, meaning from front fence to the back fence a strip of concrete to enable all of our special needs adults can have a gardening experience. Last year we had a girl named Jessica who was part of an ATP program had an electric track chair but she became mire in some wetter soil and we almost could not get her out. And Jessica really loved coming to the farm so she did return but we were more diligent about where she could travel to avoid getting stuck again. This request for mobility has come from teachers and parents of special needs adults. I could not in good conscience omit this need as being very important.

For this above reason Cultivating Inclusion is asking for the additional \$2,500.00 for the sole purpose of providing a centerwalk for all our special needs adults. As in 2021 we requested \$5,000.00 and happily gratefully received it in January 2022, but this year we are requesting the additional monies for the above purpose..

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 7,500.00	
Amount contributed to the Project/Program by the Applicant Organization	\$ 5,000.00	
Other grants or funding already awarded for Project/Program, if any	\$ 3,500.00	
In-Kind match amount or volunteer credit hours estimated amount	\$	
<b>TOTAL REVENUE</b>	<b>\$ 16,000.00</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$ 300.00
Facilities/Rent/Insurance*		\$ 834.00
Supplies		\$ 700.00
Marketing		\$ 1,500.00
Services		\$ 0
Food		\$1,666.00
Other <small>Accessibility</small>		\$ 2,500.00
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$ 0
<b>TOTAL EXPENSES</b>		<b>\$ 7,500.00</b>
<b>TOTAL BUDGET</b>	<b>\$</b>	<b>\$ 5,000.00</b>

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022 (last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City **on or before due date: September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

**Organization:** Cultivating Inclusion Inc. **Name of Project/Program:** Cultivating Inclusion

**FY 2021-2022 Amount of CSF Grant Fund Awarded:** \$ 5,000.00 **Month & Year CSF Grant Received from City:** 01-2022

**Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number):** 1,200  
Previously submitted and approved before see attached confirmation dated 06-27-2022.

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022	Expenditure		
			Amount	Description DESCRIBE THE EXPENDITURE	Purpose PURPOSE OF EXPENDITURE
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.</b>	

## FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT

**If your organization is awarded a Community Service Funding Grant in FY 2021-2022 by the City of Temecula, then this information is not due until Monday, September 12, 2022**

If your organization is awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must be expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds are not spent in accordance with the approved purpose stated on the Application, the organization will be required to refund the amount of funds. To substantiate that Fiscal Year 2021-2022 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 on or before due date: **Monday, September 12, 2022.**

### EXPENDITURE REPORT due on or before Monday, September 12, 2022

1. Provide the number of beneficiaries living in 92590, 92591 and 92592 that directly benefitted 1200 from this program (approximate number of beneficiaries if you don't have a precise number): \_\_\_\_\_
2. Fill out this table (include additional copies if needed to explain all expenditures)
3. Attach Receipts/Invoices (in the same order as listed in this table)
4. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590, Attn: City Manager's Office - CSF

Organization: Cultivating Inclusion Inc.

Name of Project/Program: Cultivating Inclusion Inc.

Amount of Grant Fund Awarded: \$ 5,000.00

Month + Year Grant Received from City: 01/2022

Attachment Number	Name of Company on Receipt/Invoice	Date (Mo/Day/Yr) on Receipt/Invoice <small>Must be dated on or between July 1, 2021 - June 30, 2022</small>	Amount of Expenditure	Describe... (1) what the expenditure was (2) purpose of the expenditure <small>MUST support Project/Program description on Application + Award Letter</small>	Explain ... how the expenditure specifically benefitted <b>Temecula residents</b> <small>If names/addresses of Temecula beneficiaries are available, please attach.</small>
1	Home Depot	11/09/21	\$ <del>45.76</del> 39.85	1 cu foot citrus fertilizer use this fertilizer specifically to enrich soil in our grove.	Keeping our grove thriving for food banks and clients
2	Home Depot	01/26/22	\$ 38.44	rosemary, lettuce, cabbage starter plants to ensure a winter crop	Winter crops for food banks and clients learn to nurture plants
3	Home Depot	02/15/22	\$ 52.20	steer manure for winter crop plants, amending soil is key to productivity	Winter crops for food banks and clients learn the care of veg.
4	Home Depot	03/14/22	\$ 17.36	Petunia easy way plant 4 pack to beautify the garden.	To make our farm pretty for clients and visitors
5	Louie's Nursery	10/13/21	\$ 77.94	Native blackberry bushes, for spring crop of berries for clients to harvest.	To ensure a variety of produce is given to food banks.
6	Louie's Nursery	11/09/21	\$ 277.50	8 yards of organic planting mix soil to ensure the health of soil for produce.	Needed to keep our crop healthy for food banks/clients
7	Louie's Nursery	02/18/22	\$ 39.98	2 flats of strawberry plants so that a sweet treat is available for food banks.	Healthy options for clients to harvest for food bank needy.
<b>EXPENDITURE TOTAL</b>			\$ <u>543.27</u> 549.18 / pg 1		
<p>Note: Expenditure Total must be equal to (or greater than) the "Amount of Grant Fund Awarded" (above) provided by the City</p>					

## FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT

**If your organization is awarded a Community Service Funding Grant in FY 2021-2022 by the City of Temecula, then this information is not due until Monday, September 12, 2022**

If your organization is awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must be expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds are not spent in accordance with the approved purpose stated on the Application, the organization will be required to refund the amount of funds. To substantiate that Fiscal Year 2021-2022 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 **on or before due date: Monday, September 12, 2022.**

### EXPENDITURE REPORT due on or before Monday, September 12, 2022

1. Provide the number of beneficiaries living in 92590, 92591 and 92592 that directly benefitted 1200 from this program (approximate number of beneficiaries if you don't have a precise number): \_\_\_\_\_
2. Fill out this table (include additional copies if needed to explain all expenditures)
3. Attach Receipts/Invoices (in the same order as listed in this table)
4. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590, Attn: City Manager's Office - CSF

**Organization:** Cultivating Inclusion Inc.      **Name of Project/Program:** Cultivating Inclusion Inc.

**Amount of Grant Fund Awarded:** \$ 5,000.00      **Month + Year Grant Received from City:** 01/2022

Attachment Number	Name of Company on Receipt/Invoice	Date (Mo/Day/Yr) on Receipt/Invoice <small>Must be dated on or between July 1, 2021 - June 30, 2022</small>	Amount of Expenditure	Describe... (1) what the expenditure was (2) purpose of the expenditure  <small>MUST support Project/Program description on Application + Award Letter</small>	Explain ... how the expenditure specifically benefitted <b>Temecula residents</b> <small>If names/addresses of Temecula beneficiaries are available, please attach.</small>
1	Orozco Gen Maint.	07/27/2021	\$ 700.00	Initial cost of weed clean up in order for our farm to be neat in appearance.	<u>More accessible for our</u> clients and visitors in appearance.
2	Orozco Gen Maint.	08/30/2021	\$ 385.00	Keeping our farm clean so that it is neat and accessible for our visitors and clients.	More accessible for our clients and visitors in appearance.
3	Orozco Gen Maint.	09/28/2021	\$ 385.00	Keeping our farm clean so that is neat and accessible for our visitors and clients.	More accessible for our clients and visitors.
4	Orozco Gen Maint.	10/26/2021	\$ 75.00	Repair and replacement of irrigation drip system to keep farm green.	Produce to nurture for clients and food for food banks.
5	Orozco Gen Maint.	11/30/2021	\$ 385.00	Keeping our farm free of weeds so that it has a neat and pleasant appearance.	More accessible and easy for clients to harvest produce.
6	Orozco Gen Maint.	12/28/2021	\$ 385.00	Keeping our farm free of weeds so that it has a neat and pleasant appearance.	More accessible and easy for clients to harvest produce.
7	Orozco Gen Maint.	01/31/2022	\$ 385.00	Keeping our farm free of weeds so that it has a neat and pleasant appearance.	More accessible and easy for clients to harvest produce.

**EXPENDITURE TOTAL**

Note: Expenditure Total must be equal to (or greater than) the "Amount of Grant Fund Awarded" (above) provided by the City

*2,600*  
\$ 2,700.00 / pg 2  
of 3

**FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

*\* Addendum \**

If your organization is awarded a Community Service Funding Grant in FY 2021-2022 by the City of Temecula, then this information is not due until Monday, September 12, 2022

If your organization is awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must be expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds are not spent in accordance with the approved purpose stated on the Application, the organization will be required to refund the amount of funds. To substantiate that Fiscal Year 2021-2022 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 on or before due date: Monday, September 12, 2022.

**EXPENDITURE REPORT due on or before Monday, September 12, 2022**

1. Provide the number of beneficiaries living in 92590, 92591 and 92592 that directly benefited from this program (approximate number of beneficiaries if you don't have a precise number): 1,200
2. Fill out this table (include additional copies if needed to explain all expenditures)
3. Attach Receipts/Invoices (in the same order as listed in this table)
4. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590, Attn: City Manager's Office - CSF

Organization: Cultivating Inclusion Inc. Name of Project/Program: Cultivating Inclusion

Amount of Grant Fund Awarded: \$5,000 Month + Year Grant Received from City: 01/2022

Attachment Number	Name of Company on Receipt/Invoice	Date (Mo/Day/Yr) on Receipt/Invoice <small>Must be dated on or between July 1, 2021 - June 30, 2022</small>	Amount of Expenditure	Describe... (1) what the expenditure was (2) purpose of the expenditure <small>MUST support Project/Program description on Application + Award Letter</small>	Explain ... how the expenditure specifically benefited <b>Temecula residents</b> <small>If names/addresses of Temecula beneficiaries are available, please attach.</small>
1	Home Depot	3-15-2022	\$83.27	Hardware cloth for garden boxes to keep	For more healthy food for food banks
2	Home Depot	3-26-2022	\$52.42	Plants to grow at farm for clients	and food bank to benefit from
3	Louie's Nursery	4-1-2022	\$553.50	Mixed veggie soil for a healthy crop.	Food for food banks.
4	Orozco Gen. Maint.	3-29-2022	\$385.00	Weed abatement for a healthier environment	Food for food banks.
5	Rodent Pest Tech.	4-1-2022	\$230.00	Keep farm healthy + safe for clients.	Clean environment for day program clients.
6			\$		
7			\$		

**EXPENDITURE TOTAL**

Note: Expenditure Total must be equal to (or greater than) the "Amount of Grant Fund Awarded" (above) provided by the City **\$ 1,304.19**

## FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT

**If your organization is awarded a Community Service Funding Grant in FY 2021-2022 by the City of Temecula, then this information is not due until Monday, September 12, 2022**

If your organization is awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must be expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds are not spent in accordance with the approved purpose stated on the Application, the organization will be required to refund the amount of funds. To substantiate that Fiscal Year 2021-2022 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 on or before due date: **Monday, September 12, 2022.**

### EXPENDITURE REPORT due on or before Monday, September 12, 2022

1. Provide the number of beneficiaries living in 92590, 92591 and 92592 that directly benefitted 1200 from this program (approximate number of beneficiaries if you don't have a precise number):
2. Fill out this table (include additional copies if needed to explain all expenditures)
3. Attach Receipts/Invoices (in the same order as listed in this table)
4. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590, Attn: City Manager's Office - CSF

**Organization:** Cultivating Inclusion Inc.      **Name of Project/Program:** Cultivating Inclusion Inc.

**Amount of Grant Fund Awarded:** \$ 5,000.00      **Month + Year Grant Received from City:** 01/2022

Attachment Number	Name of Company on Receipt/Invoice	Date (Mo/Day/Yr) on Receipt/Invoice <small>Must be dated on or between July 1, 2021 - June 30, 2022</small>	Amount of Expenditure	Describe... (1) what the expenditure was (2) purpose of the expenditure  <small>MUST support Project/Program description on Application + Award Letter</small>	Explain ... how the expenditure specifically benefitted <u>Temecula</u> residents <small>If names/addresses of Temecula beneficiaries are available, please attach.</small>
1	Orozco Gen Maint	03/01/2022	\$ 385.00	Keeping our farm free of weeds so that it has a neat accessible appearance.	Helps keep our farm safe for visitors and more food for food banks.
2	Rodent Pest Tech	<del>07/20/2021</del>	<del>\$ 230.00</del>	Rid the farm of vermin and pests to ensure a safe environment.	Helps keep our farm safe for clients and more food for food banks.
3	Rodent Pest Tech	09/19/2021	\$ 230.00	Rid the farm of vermin and pests to ensure a safe environment.	Helps keep our farm safe for clients and more food for food banks.
4	Rodent Pest Tech	11/19/2021	\$ 230.00	Rid the farm of vermin and pests to ensure a safe environment.	Helps keep our farm safe for clients and more food for food banks.
5	Rodent Pest Tech	12/20/2021	\$ 230.00	Rid the farm of vermin and pests to ensure a safe environment.	Helps keep our farm safe for clients and more food for food banks.
6	Rodent Pest Tech	02/19/2022	\$ 230.00	Rid the farm of vermin and pests to ensure a safe environment.	Helps keep our farm safe for clients and more food for food banks.
7	Rodent Pest Tech	03/22/2022*	\$ 230.00	Rid the farm of vermin and pests to ensure a safe environment.	Helps keep our farm safe for clients and more food for food banks.

#### EXPENDITURE TOTAL

Note: Expenditure Total must be equal to (or greater than) the "Amount of Grant Fund Awarded" (above) provided by the City

\*pd on 3/11/2022  
~~\$ 4,705.00~~ / pg 3 of 3  
 Total = \$5,014.40 for 3 pgs

~~1535.~~  
543.27  
2000.  
1304.19  
**5,382.40**

**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**  
**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. [If you were awarded less than \$5,000, submit Expenditure Report for that amount.]

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
 Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: <u>Cultivating Inclusion Inc.</u>		Name of Project/Program: <u>Cultivating Inclusion Inc.</u>			
TOTAL FY 2022-2023 Amount of Grant Fund Awarded: \$ _____		Month & Year FIRST \$5,000 check was received from City: _____			
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted).					
2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City					
3. Is this Expenditure Report is submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____.					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	



**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

**ORGANIZATION NAME:** Cultivating Inclusion Inc.

**MAILING ADDRESS:** Cultivating Inclusion c/o Mary Ann Tams **PHONE:** ( 951-296-7756 )  
31430 Loma Linda Rd., Temecula, CA 92592-1604 **EMAIL:** Cultivatinginclusion2@yahoo.com

**PRESIDENT / AUTHORIZED OFFICER:** Mary Ann Tams, Garden Director  
PRINT NAME TITLE

**SIGNATURE:** Mary Ann Tams **DATE:** August 2, 2022  
MONTH, DAY, YEAR

IF DIFFERENT THAN ABOVE,  
**APPLICATION PREPARED BY:** \_\_\_\_\_  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
[Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959

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

DEPARTMENT OF THE TREASURY

Date: JUN 26 2018

CULTIVATING INCLUSION INC  
39901 ALPINE UNION DR UNIT C  
MURRIETA, CA 92563-0000

Employer Identification Number:  
82-4809510  
DLN:  
26053569009448  
Contact Person:  
CUSTOMER SERVICE ID# 31954  
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:  
March 9, 2018  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947

CULTIVATING INCLUSION INC

Sincerely,

*Stephen A. Martin*

---

Director, Exempt Organizations  
Rulings and Agreements



## Entity Status Letter

Date: 7/31/2022

ESL ID: 3166835146

### 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: 4127453

Entity Name: CULTIVATING INCLUSION 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](http://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)

[HELP](#)[MENU](#)

[Home](#) > [Tax Exempt Organization Search](#) > **Cultivating Inclusion Inc.**

[< Back to Search Results](#)

# Cultivating Inclusion Inc.

EIN: 82-4809510 | Temecula, CA, United States

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> **Other Names**

## Determination Letter

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A favorable determination letter is issued by the IRS if an organization meets the requirements for tax-exempt status under the Code section the organization applied.

> **Final Letters**

## Publication 78 Data

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Organizations eligible to receive tax-deductible charitable contributions. Users may rely on this list in determining deductibility of their contributions.

**On Publication 78 Data List:** Yes

**Deductibility Code:** PC

## Form 990-N (e-Postcard)

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Organizations who have filed a 990-N (e-Postcard) annual electronic notice. Most small organizations that receive less than \$50,000 fall into this category.

> **Tax Year 2021 Form 990-N (e-Postcard)**

**Tax Period:**

2021 (01/01/2021 - 12/31/2021)

**EIN:**

82-4809510

**Legal Name (Doing Business as):**

Cultivating Inclusion Inc

**Mailing Address:**

31430 Loma Linda Road  
Temecula, CA 92592  
United States

**Principal Officer's Name and Address:**

Mary A Tams

31430 Loma Linda Road  
Temecula, CA 92592  
United States

**Gross receipts not greater than:**

\$50,000

**Organization has terminated:**

No

**Website URL:**

<http://www.cultivatinginclusionfarm.com>

- > **Tax Year 2020 Form 990-N (e-Postcard)**
  
- > **Tax Year 2019 Form 990-N (e-Postcard)**
  
- > **Tax Year 2018 Form 990-N (e-Postcard)**

## Registrant Details

Entity type: Corporate/Class as registered with the Secretary of State or based on founding & registration documents

<b>Organization Name:</b>	CULTIVATING INCLUSION INC.	<b>IRS FEIN:</b>	824809510
<b>Entity Type:</b>	Public Benefit	<b>SOS/FTB Corporate/Organization Number:</b>	4127453
<b>Registry Status:</b>	Current	<b>Renewal Due/Exp. Date:</b>	5/15/2023
<b>RCT Registration Number:</b>	CT0265665	<b>Issue Date:</b>	10/14/2019
<b>Record Type:</b>	Charity Registration	<b>Effective Date:</b>	10/14/2019
<b>Date of Last Renewal:</b>	6/6/2022	<b>DBA:</b>	

## Mailing Address

**Street:** 31430 LOMA LINDA RD  
**Street Line 2:**  
**City, State Zip:** TEMECULA CA 92592

## Filings & Correspondence

<a href="#">CT-470 Confirmation of Registration</a>	Click on Document Type at the left to open PDF
<a href="#">Founding Documents</a>	Click on Document Type at the left to open PDF
<a href="#">Form CT-TR-1</a>	2021
<a href="#">CT-550 Form RRF-1 Incomplete</a>	2018
<a href="#">Form RRF-1</a>	2019 - AMENDED
<a href="#">Form CT-TR-1</a>	2020
<a href="#">Form RRF-1</a>	2020
<a href="#">Form RRF-1</a>	2021
<a href="#">Renewal Filing</a>	2020

## Annual Renewal Data

<b>Status of Filing:</b>	Accepted
<b>Accounting Period Begin Date:</b>	1/1/2018
<b>Accounting Period End Date:</b>	12/31/2018
<b>Filing Received Date:</b>	10/29/2019
<b>Form RRF-1 Reject/Incomplete Reason:</b>	
<b>Form CT-TR-1 Reject/Incomplete Reason:</b>	
<b>IRS Form 990 Reject/Incomplete Reason:</b>	
<b>Notes From Registry Staff:</b>	
<b>Status of Filing:</b>	E-Accepted
<b>Accounting Period Begin Date:</b>	1/1/2019
<b>Accounting Period End Date:</b>	12/31/2019
<b>Filing Received Date:</b>	1/27/2020
<b>Form RRF-1 Reject/Incomplete Reason:</b>	
<b>Form CT-TR-1 Reject/Incomplete Reason:</b>	
<b>IRS Form 990 Reject/Incomplete Reason:</b>	
<b>Notes From Registry Staff:</b>	
<b>Status of Filing:</b>	Accepted

**Accounting Period Begin Date:** 7/1/2019  
**Accounting Period End Date:** 7/1/2020  
**Filing Received Date:** 7/27/2020  
**Form RRF-1 Reject/Incomplete Reason:**  
**Form CT-TR-1 Reject/Incomplete Reason:**  
**IRS Form 990 Reject/Incomplete Reason:**  
**Notes From Registry Staff:**

**Status of Filing:** Accepted  
**Accounting Period Begin Date:** 1/1/2020  
**Accounting Period End Date:** 12/31/2020  
**Filing Received Date:** 11/22/2021  
**Form RRF-1 Reject/Incomplete Reason:** Resubmission/Correction Accepted  
**Form CT-TR-1 Reject/Incomplete Reason:** Resubmission/Correction Accepted  
**IRS Form 990 Reject/Incomplete Reason:**  
**Notes From Registry Staff:**

**Status of Filing:** Accepted  
**Accounting Period Begin Date:** 1/1/2021  
**Accounting Period End Date:** 12/31/2021  
**Filing Received Date:** 5/27/2022  
**Form RRF-1 Reject/Incomplete Reason:** Resubmission/Correction Accepted  
**Form CT-TR-1 Reject/Incomplete Reason:** Resubmission/Correction Accepted  
**IRS Form 990 Reject/Incomplete Reason:**  
**Notes From Registry Staff:**

## Related Registrations & Event Reports

The related records are available based on the record type being viewed.

- If you are viewing a record, you may see related records with the same name as the record you are viewing.
- Staff Registration: reports to Public Reports.
- Click on the RGT Registration link to navigate to the related record.

No Related Records



**FY 2022/2023**

**COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA**

**GRANT APPLICATION #**

**14**

**DORLAND MOUNTAIN ARTS  
COLONY INC.**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ \_\_\_\_\_ MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: Art for Temecula Start Date: 1/1/2023 End Date: 12/31/2023

Physical Address of Project/Program: Dorland Mountain Arts 36701 Highway 79 Temecula, CA 92592  
INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable Dorland Mountain Arts  
to: Mailing Address: PO Box 6 Temecula CA 92593

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant

Organization: Dorland Mountain Arts Year Founded: 1979

Website: www.dorlandartscolony.com Social Media: \_\_\_\_\_

Number of Paid Staff: 2 Number of Volunteers: 95

Geographic Area(s) the Organization Serves: Temecula valley

Geographic Area(s) the Project/Program Serves: Temecula Valley

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Janice Cipriani- Willis Title/Position: Executive Director

Contact Person's Direct Telephone: 951-302-3837 Contact Person's Email: info@dorlandartscolony.org

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 1984  
No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 95-3786125 State Identification Number: \_\_\_\_\_

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://rct.doi.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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

### MISSION STATEMENT OF ORGANIZATION

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

Dorland's mission is to provide a unique, inclusive working retreat for visual artists, writers, and musicians inspiring creativity in a secluded natural setting. Dorland serves the regional community with arts events, educational and healing workshops and projects for children and adults. In conjunction with The Nature Conservancy, Dorland is mandated to protect the ecology of the undeveloped portion of its 300 acres. As such, Dorland staff and volunteers maintain trails and a small lake on the property, and make every effort to identify and preserve indigenous flora and fauna, and remove non-indigenous species.

On May 3, 2004, the Eagle Mountain fire destroyed every single one of Dorland's structures. Convening immediately after the fire, the Board of Directors, devoted past resident artists, and individual supporters moved forward to rebuild. A licensed arborist guided the project, delicately removing fire-damaged trees to preserve the remaining indigenous oaks and surrounding native plants. Importantly, the Board of Directors used this loss as an opportunity to begin more sustainable building and construction practices.

Since 2014, Dorland has added four more cottages, a Community Arts Center, ADA compliance (including two ADA parking spaces) and a pavilion and deck for community events. The now-thriving Associate Artists Program benefits Dorland's local and regional artists by providing artists, writers, musicians and supporters of the arts with essential space to meet, discuss, create, plan and implement activities that support Dorland.

### FINANCIAL STATEMENTS

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		

## GRANT PROJECT/PROGRAM DESCRIPTION

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

The Associate Artist Program serves our local area of Temecula Valley. The program is run solely by volunteers. 550 local members participate in the program by organizing public activities that support Dorland, the regional arts community, and each other. Dorland's cultural events in the Temecula Valley attract an average of 1615 attendees/ year, promoting the arts in our region. In conjunction with the City of Temecula, Dorland supports local artists with exhibits at the Merc Gallery, the Temecula Valley Museum, an online gallery and other local venues. The recent addition of Dorland's Community Arts Studio building with its outdoor Pavilion further gives Dorland the opportunity to provide expanded public arts events, exhibits, and educational and healing workshops for community children, youth, and adults.

Programs that directly serve Temecula Valley residents:

**ASSOCIATE ARTISTS PROGRAM:** Coffee on the Deck - Discussions about art, sharing, demos and critiques. 2 x per month

**COMMUNITY ARTS CENTER:** 6 Art Exhibits per year open for public viewing and receptions

**WORKSHOPS:** Sunday Scribblers - Free. This is a writing workshop and critique focusing on poetry and prose every Sunday. It includes guest speakers.

**Table Manners Theater - Free.** Open to the public to participate in reading original and new plays and screenplays. 6x per year

### 2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.

ALSO, INCLUDE A LIST OF GOODS, EQUIPMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

Funding will support the operation of the Community Art where Dorland runs its community programs. Grant support would enhance the amenities by funding the installation of a utility sink and new flooring.

New Flooring Art in the Community Studio/Gallery -\$1500

Utility Sink Art in Studio/Gallery -\$500

Facilities/Rent/Insurance for Community Studio/Gallery - \$1,839

Supplies - \$430

Marketing - \$289

**TOTAL- \$4558**

### 3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.

Dorland hosts many events open to Temecula residents in The Community Arts Center located on our beautiful mountain campus. This three room building, deck and pavilion area allows us a space to invite local residents to participate in programs, workshops and special projects.

The main room of this building provides a gathering place for workshops, programs and meetings. In addition, there is a library room and studio used for programs and available for special projects. The deck and covered pavilion provide outdoor space for community meetings, workshops and programs. Dorland Mountain Arts strives to provide a safe and welcoming space for the community to come together, learn about new ideas and skills and meet other creative folks. By offering free and very low cost programs to Temecula residents we are providing an opportunity for creative exchange, learning and sharing. Having a quality space with varied amenities enhances the experience for Temecula residents and allows for more programs in the future.

3b ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:	800-1000
--	----------

3c ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:	10
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**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

**4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.**

Dorland Mountain Arts is committed to providing quality programs and experiences to the Temecula community. Upgrading our program space will help us continue to provide creative sharing and learning opportunities. The Community Art Center is vital to our mission and indispensable in offering a quality experience to the residents of Temecula Valley.

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 4,558	
Amount contributed to the Project/Program by the Applicant Organization	\$ 5,500	
Other grants or funding already awarded for Project/Program, if any	\$	
In-Kind match amount or volunteer credit hours estimated amount	\$ 7,704	
<b>TOTAL REVENUE</b>	<b>\$ 17,762</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$
Facilities/Rent/Insurance		\$ 1,839
Supplies		\$ 430
Marketing		\$ 289
Services		\$ 2,000
Food		
Other flooring and sink		\$ 2,000
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$ 3,500
<b>TOTAL EXPENSES</b>		<b>\$</b>
<b>TOTAL BUDGET</b>	<b>\$ 17,762</b>	<b>\$ 10,058</b>

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022 (last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City on or before due date: **September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

**Organization:** \_\_\_\_\_ **Name of Project/Program:** \_\_\_\_\_

**FY 2021-2022 Amount of CSF Grant Fund Awarded:** \$ \_\_\_\_\_ **Month & Year CSF Grant Received from City:** \_\_\_\_\_

**Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number):** \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		

**EXPENDITURE TOTAL \$** EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.



**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**  
**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. (If you were awarded less than \$5,000, submit Expenditure Report for that amount.)

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
 Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: _____		Name of Project/Program: _____			
TOTAL FY 2022-2023		Month & Year FIRST \$5,000 check			
Amount of Grant Fund Awarded: \$ _____		was received from City: _____			
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted). 2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City 3. Is this Expenditure Report is submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____.					
<b>Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____</b>					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

**ORGANIZATION NAME:** Dorland Mountain Arts

**MAILING ADDRESS:** PO Box 6 **PHONE:** ( 951 ) 302-3837  
Temecula CA 92593 **EMAIL:** info@DorlandArts.org

**PRESIDENT / AUTHORIZED OFFICER:** Natasha Harrisojn

**SIGNATURE:**  **DATE:** 9/10/2022

IF DIFFERENT THAN ABOVE,  
**APPLICATION PREPARED BY:** \_\_\_\_\_

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: Stacey.Brown@TemeculaCA.gov (951) 694-6413  
Betsy.Lowrey@TemeculaCA.gov (951) 693-3959

Internal Revenue Service  
District Director  
DORLAND MOUNTAIN ARTS COLONY, INC.

Department of the Treasury

Date:

NOV 01 1984

Our Letter Dated:

December 29, 1982

Person to Contact:

M. Tomback

Contact Telephone Number:

(213) 688-4885

Dorland Mountain Colony, Inc.  
36701 Highway 79  
Temecula, CA 92390

Dear Applicant:

This modifies our letter of the above date in which we stated that you would be treated as an organization which is not a private foundation until the expiration of your advance ruling period.

Based on the information you submitted, we have determined that you are not a private foundation within the meaning of section 509(a) of the Internal Revenue Code, because you are an organization of the type described in section 509(a)(1)\*. Your exempt status under section 501(c)(3) of the code is still in effect.

Grantors and contributors may rely on this determination until the Internal Revenue Service publishes notice to the contrary. However, a grantor or a contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act that resulted in your loss of section 509(a)(1)\* status, or acquired knowledge that the Internal Revenue Service had given notice that you would be removed from classification as a section 509(a)(1)\* organization.

Because this letter could help resolve any questions about your private foundation status, please keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown above.

Sincerely yours,



District Director

\*and 170(b)(1)(A)(vi)

P.O. Box 2350, Los Angeles, Calif. 90053

Letter 1050 (DO) (7-77)



## Entity Status Letter

Date: 9/12/2022

ESL ID: 7857079728

### 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: 1104809

Entity Name: DORLAND MOUNTAIN ARTS COLONY 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](http://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 Secretary of State**  
**Electronic Certified Copy**

I, SHIRLEY N. WEBER, Ph.D., Secretary of State of the State of California, hereby certify that the attached transcript of 2 pages is a full, true and correct copy of the original record in the custody of the California Secretary of State's office.



**IN WITNESS WHEREOF**, I execute  
this certificate and affix the Great  
Seal of the State of California on  
this day of January 15, 2022

A handwritten signature in black ink, appearing to read "S. N. Weber".

**SHIRLEY N. WEBER, Ph.D.**  
Secretary of State

Verification Number: P82RJ34  
Entity (File) Number: C1104809

To verify the issuance of this Certificate, use the Verification Number above  
with the Secretary of State Electronic Verification Search available at  
[bizfile.sos.ca.gov](http://bizfile.sos.ca.gov)



**California Secretary of State  
Electronic Filing**



**Corporation - Statement of Information**

Entity Name: DORLAND MOUNTAIN ARTS COLONY,  
INC.

Entity (File) Number: C1104809  
File Date: 01/13/2022  
Entity Type: Corporation  
Jurisdiction: CALIFORNIA  
Document ID: H110480

**Detailed Filing Information**

1. Entity Name: DORLAND MOUNTAIN ARTS COLONY,  
INC.
  
2. Business Addresses:
  - a. Street Address of Principal Office in California: 36701 Highway 79 South  
Temecula, California 92592  
United States of America
  
  - b. Mailing Address: PO Box 6  
Temecula, California 92593  
United States of America
  
3. Officers:
  - a. Chief Executive Officer: Curtis Horton  
1869 Pasadena Glen Rd  
Pasadena, California 91107  
United States of America
  
  - b. Secretary: Noreen Ring  
1935 Vista Del Norte  
Fallbrook, California 92028  
United States of America

Certificate Verification Number: P82RJ34  
Use bizfile.sos.ca.gov to verify the certified copy.

Document ID: H110480



## California Secretary of State Electronic Filing

### Officers (Cont'd):

c. Chief Financial Officer:

Nalashia Harrison  
24 Almy St  
Newport, Rhode Island 02840  
United States of America

4. Agent for Service of Process:

Curtis Horton  
1869 Pasadena Glen Rd  
Pasadena, California 91107  
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: Janice Cipriani

*Use [bizfile.sos.ca.gov](http://bizfile.sos.ca.gov) for online filings, searches, business records, and resources.*

**Certificate Verification Number: P82RJ34**  
Use [bizfile.sos.ca.gov](http://bizfile.sos.ca.gov) to verify the certified copy.

**Document ID: H110480**

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**Open to Public Inspection**

**A** For the 2020 calendar year, or tax year beginning **2020**, and ending **20**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> DORLAND MOUNTAIN ARTS COLONY P.O. BOX 6 TEMECULA, CA 92593-0006	<b>D</b> Employer identification number 95-3786125 <b>E</b> Telephone number (951) 302-3837 <b>G</b> Gross receipts \$ 142,830.
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<b>F</b> Name and address of principal officer: SAME AS C ABOVE	<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions.
--	--

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) (insert no.)  4947(a)(1) or  527

**J** Website: ▶ WWW.DORLANDARTSCOLONY.ORG **H(c)** Group exemption number ▶

**K** Form of organization:  Corporation  Trust  Association  Other ▶ **L** Year of formation: 1982 **M** State of legal domicile: CA

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities: THE MISSION OF DORLAND MOUNTAIN ARTS COLONY IS TO PROVIDE A UNIQUE WORKING AND PERFORMANCE RETREAT FOSTERING CREATIVITY, AND A COMMUNITY CONNECTION TO THE CREATIVE PROCESS, IN A SECLUDED NATURAL SETTING.

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets.

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	7
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	7
<b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	2
<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	30
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0.
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	0.

		Prior Year	Current Year
<b>8</b>	Contributions and grants (Part VIII, line 1h)	174,803.	57,364.
<b>9</b>	Program service revenue (Part VIII, line 2g)	79,267.	74,586.
<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,450.	642.
<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	13,066.	10,238.
<b>12</b>	<b>Total revenue</b> — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>268,586.</b>	<b>142,830.</b>

		Prior Year	Current Year
<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)		
<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	21,669.	25,993.
<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)		
<b>b</b>	<b>Total fundraising expenses</b> (Part IX, column (D), line 25) ▶ 1,662.		
<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	86,561.	105,170.
<b>18</b>	<b>Total expenses.</b> Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>108,230.</b>	<b>131,163.</b>
<b>19</b>	<b>Revenue less expenses.</b> Subtract line 18 from line 12	<b>160,356.</b>	<b>11,667.</b>

		Beginning of Current Year	End of Year
<b>20</b>	Total assets (Part X, line 16)	903,212.	920,211.
<b>21</b>	Total liabilities (Part X, line 26)	11,158.	16,490.
<b>22</b>	<b>Net assets or fund balances.</b> Subtract line 21 from line 20	<b>892,054.</b>	<b>903,721.</b>

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer CURTIS HORTON <small>Type or print name and title</small>	Date PRESIDENT
------------------	--	-------------------

<b>Paid Preparer Use Only</b>	Print/type preparer's name LESLIE A. DOHERTY, CPA	Preparer's signature LESLIE A. DOHERTY, CPA	Date	Check <input type="checkbox"/> if self-employed	PTIN P00449291
	Firm's name ▶ LESLIE A DOHERTY CPA APC Firm's address ▶ 41880 KALMIA ST STE 115 MURRIETA, CA 92562			Firm's EIN ▶ 20-2082661 Phone no. (951) 698-2260	

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No



FY 2022/2023

COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA

GRANT APPLICATION #

**15**

**FINE ARTS THEATER NETWORK**

**CITY OF TEMECULA**  
**FISCAL YEAR 2022 - 2023**  
**COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA**  
**PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 50,000.00 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

**Pump up the Volume**

Project/Program Title: \_\_\_\_\_ Start Date: 12/1/22 End Date: 5/31/23

Physical Address of Project/Program: 42051 Main Street, Temecula CA 92590

INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Fine Arts Network

Mailing Address: 41391 Kalmia St #200

Murrieta, CA 92562

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant **Fine Arts Network Theater**

Organization: Company Year Founded: 1994

Website: www.fantheater.com Social Media: FB, Instagram

Number of Paid Staff: 3 (part time) Number of Volunteers: 100's annually

Geographic Area(s) the Organization Serves: SW Riverside County, Temecula Valley

Geographic Area(s) the Project/Program Serves: Old Town Temecula Community Theater

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Beverly Stephenson Title/Position: founder/director

Contact Person's Direct Telephone: 951-314-2401 Contact Person's Email: faerietalewriter@gmail.com

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 10/7/94

No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 33-0624570 State Identification Number: 1872912

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

1.  Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
2.  Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
3.  Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

**MISSION STATEMENT OF ORGANIZATION**

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

To build the self-esteem of all individuals through broad based, hands-on exposure in the performing arts. To channel the creativity of young and old in a positive and artistic direction. To utilize the success and self-esteem attained through participation as a preventative measure against negative peer pressure and anti-social behaviors. To involve the community, from youths to seniors in the sharing of their talents both on stage and off as leaders and mentors. To provide instruction in all genres of performing arts and stagecraft. To produce and perform quality local productions for the benefit of the participants and the spectators.

**FINANCIAL STATEMENTS**

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
Theater LIVE after Covid	\$2500	October 2020	Community Service
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) **FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		

**GRANT PROJECT/PROGRAM DESCRIPTION**

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

When the Old Town Theater opened, The Theater Foundation provided 36 wireless mic units. We, (Theater Foundation, Fine Arts Network, TVP) the resident companies have refurbished these mics multiple times over the past 17 years. We, now, only have 10 working units. We, Fine Arts Network, proposes to purchase an additional 24 units so we once again have enough mics to stage full musicals, concerts and plays. The program specifically is to keep the OTTCT at the cutting edge of performance venues by providing a quality visual and sound experience. The program would free us from the burden of renting mics from outside agencies at a hefty price while maintaining a quality sound experience.

2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.

ALSO, INCLUDE A LIST OF GOODS, EQUIPMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

The grant will provide for the purchase of 24 body mic kits which includes the elements, battery pack, transmitter and case to house all 24 units. (see attached)

*24 full kits plus 6 back-up elements.*

3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.

The Old Town Temecula Community Theater (OTTCT) has been praised as a "jewel box" of a theater. From its inception we have provided great sound. That element is in danger of disappearing due to the 17 year old and nearly obsolete equipment we have refurbished on several occasions. Local residents comprise over 50% of our audience. Temecula residents are proud to boast of the fine theater we have. If the sound quality is poor, the entire experience of live theater is undermined and becomes a negative experience for all. When first conceived, great attention was paid to the acoustics of the theater. After all the time and money spent on building and creating a fine reputation, we desire to maintain the high standards expected from this facility.

3b ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:	10,000+ annual
3c ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:	200+

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.

Pump up the Volume will maintain quality sound and quality theatrical experience at the OTTCT by purchasing new state of the art equipment.

5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.

The pandemic stripped us of our reserves and any ability we might have had to purchase this equipment directly. At the most recent board meeting we were earmarking funds to purchase new mic units over the next 3 years. We hoped to purchase 5-10 units (based on costs) immediately. Based on the estimate we just received, we would be hard pressed to afford 5 units currently ourselves. It would then take us 5 years in order to build to a full rack of 24 mics, hoping that we would not lose all of the older 10 units before we could replace them. The pandemic has created a situation, where we feel we are at ground zero, starting all over again building audiences, networking with performers and training our young theatrical enthusiasts.

6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.

The above mentioned funds will complement and ultimately replace seriously dated equipment that verges on being obsolete. It will allow new and existing programs/productions to maintain the high caliber of sound come to be expected of performances at OTTCT.

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 50,000	
Amount contributed to the Project/Program by the Applicant Organization	\$ 17,000	
Other grants or funding already awarded for Project/Program, if any	\$ -0-	
In-Kind match amount or volunteer credit hours estimated amount	\$	
<b>TOTAL REVENUE</b>	<b>\$ 67,000</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment	24 body mics with elements, casing, transmitters etc. see attached	<b>\$ 67,000</b>
Facilities/Rent/Insurance		\$
Supplies		\$
Marketing		\$
Services		\$
Food		\$
Other		\$
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$
<b>TOTAL EXPENSES</b>		<b>\$</b>
<b>TOTAL BUDGET</b>	<b>\$ 67,000</b>	<b>\$ 67,000</b>

**FISCAL YEAR (FY) 2020-2021 COMPLIANCE REPORT**

**If your organization is awarded a Community Service Funding Grant in FY 2020-2021 by the City of Temecula, then this information is not due until September 13, 2021**

If your organization is awarded a Community Service Funding Grant in Fiscal Year 2020-2021 by the City of Temecula, all grant funds received must be expended anytime on or between July 1, 2020, and June 30, 2021. In addition, ~~all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation~~ may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds are not spent in accordance with the approved purpose stated on the Application, the organization will be required to refund the amount of funds. To substantiate that Fiscal Year 2020-2021 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 **on or before due date: September 13, 2021.**

**EXPENDITURE REPORT due on or before September 13, 2021**

1. Provide the number of beneficiaries living in 92590, 92591 and 92592 that directly benefitted from this program (approximate number of beneficiaries if you don't have a precise number): **4,000 locals annually**
2. Fill out this table (include additional copies if needed to explain all expenditures)
3. Attach Receipts/Invoices (in the same order as listed in this table)
4. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590, Attn: City Manager's Office - CSF

**Organization:** Fine Arts Network Theater Co.      **Name of Project/Program:** Theater LIVE after Covid

**Amount of Grant Fund Awarded:** \$ 2500.00      **Month + Year Grant Received from City:** DEC 2020

Attachment Number	Name of Company on Receipt/Invoice	Date (Mo/Day/Yr) on Receipt/Invoice <small>Must be dated on or between July 1, 2020 - June 30, 2021</small>	Amount of Expenditure	Describe... (1) what the expenditure was (2) purpose of the expenditure <small>MUST support Project/Program description on Application + Award Letter</small>	Explain ... how the expenditure specifically benefitted <u>Temecula residents</u>
1	Correction Made By City:  <b>Brittany Campbell</b>	7/1/2020 - 9/30/2020 10/1/2020 - 12/31/2020 <del>June 2020</del> <del>September 2021</del> 1/1/2021 - 3/31/2021 4/1/2024 - 6/30/2021	\$ 300.00 \$ 300.00 <del>\$1200.00</del> \$ 300.00 \$ 300.00	1. Social Media 2. To keep FAN alive and relevant during closure. To promote Go Fund Me and fundraising efforts during closure on Social Media	It benefitted residents by keeping them informed of social opportunities that were safe and available. It provided and outlet for safe gathering and provided hope and comfort through artistic presentations
2	Got Print.com	January 13, 2021	\$2,427.94	1. Season program 2. To provide advertising and promotion materials	In anticipation of opening we prepared a advertising style magazine piece to provide information about the City, the Theater and upcoming shows and what to expect

**EXPENDITURE TOTAL**      3627.94

Note: Expenditure Total must be equal to (or greater than) the "Amount of Grant Fund Awarded" (above) provided by the City.



**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022  
(last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City **on or before due date: September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

Organization: Fine Arts Network Theater Name of Project/Program: Pump up the Volume  
Company

FY 2021-2022 Amount of CSF Grant Fund Awarded: \$ -0- Month & Year CSF Grant Received from City: October 2020

Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number): \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.</b>	

**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**  
**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. [If you were awarded less than \$5,000, submit Expenditure Report for that amount.]

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
 Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: <u>Fine Arts Network Theater</u>		Name of Project/Program: <u>Pump up the Volume</u>			
Company					
TOTAL FY 2022-2023		Month & Year FIRST \$5,000 check			
Amount of Grant Fund Awarded: \$ _____		was received from City: _____			
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted).					
2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City					
3. Is this Expenditure Report is submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____.					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

ORGANIZATION NAME: Fine Arts Network Theater Company +

MAILING ADDRESS: 41391 Kalmia St.#200 PHONE: ( 951 ) 314-2401  
Murrieta, CA 92562 EMAIL: fantheaterco@gmail.com

PRESIDENT / AUTHORIZED OFFICER: Joe Arreola President  
PRINT NAME TITLE

SIGNATURE:  DATE: 9/9/22  
MONTH, DAY, YEAR

IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY: Beverly Stephenson, founder/director  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
[Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959



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

## Entity Status Letter

Date: 9/12/2022

ESL ID: 5629859781

### 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: 1872912

Entity Name: FINE ARTS 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](http://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)



[Home](#) > [Tax Exempt Organization Search](#) > [Fine Arts Network](#)

[< Back to Search Results](#)

## Fine Arts Network

EIN: 33-0624570 | Murrieta, CA, United States

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### Publication 78 Data ⓘ

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Organizations eligible to receive tax-deductible charitable contributions. Users may rely on this list in determining deductibility of their contributions.

**On Publication 78 Data List:** Yes

**Deductibility Code:** PC

### Copies of Returns (990, 990-EZ, 990-PF, 990-T) ⓘ

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Electronic copies (images) of Forms 990, 990-EZ, 990-PF or 990-T returns filed with the IRS by charities and non-profits.

> [Tax Year 2019 Form 990](#)

> [Tax Year 2018 Form 990](#)

> [Tax Year 2017 Form 990](#)

> [Tax Year 2016 Form 990EZ](#)

> [Tax Year 2015 Form 990EZ](#)

INTERNAL REVENUE SERVICE  
DISTRICT DIRECTOR  
2 CUPANIA CIRCLE  
MONTEREY PARK, CA 91755-7406

DEPARTMENT OF THE TREASURY

Date: OCT 07 1994

FINE ARTS NETWORK  
C/O VIRGINIA K. COSTILOW  
28410 FRONT STREET, SUITE 104  
TEMECULA, CA 92590

Employer Identification Number:  
33-0624570  
Case Number:  
954230016  
Contact Person:  
TERRY IZUMI  
Contact Telephone Number:  
(714) 826-1448  
Accounting Period Ending:  
December 31  
Foundation Status Classification:  
509(a)(2)  
Advance Ruling Period Begins:  
July 27, 1994  
Advance Ruling Period Ends:  
Dec. 31, 1998  
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)

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Header section A-M: For the 2020 calendar year, or tax year beginning 2020, and ending 2020. Includes organization name (FINE ARTS NETWORK), address (25185 MADISON AVE, STE A, MURRIETA, CA 92562), EIN (33-0624570), and gross receipts (\$119,301).

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1. Mission statement (PRODUCTIONS AND PERFORMANCE OPPORTUNITIES TO THE TEMECULA VALLEY); 2-6. Governance metrics; 7a-b. Revenue/Income; 8-12. Revenue breakdown; 13-19. Expenses breakdown; 20-22. Net Assets or Fund Balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of Stephanie Beals, Date, Title: TREASURER

Paid Preparer Use Only: Preparer Name: LESLIE A. DOHERTY, CPA; Firm Name: LESLIE A DOHERTY & COMPANY, PC; Firm Address: 41880 KALMIA ST STE 170, MURRIETA, CA 92562

May the IRS discuss this return with the preparer shown above? See instructions. [X] Yes [ ] No

# Star Way Systems Corporation

P. O. Box 1357  
Murrieta, CA 92564

Phone # 951-678-5680  
Fax # 951-678-8052

# Quote

9/8/2022
Quote #
19592

*Bid 1*

Bill To
Fine Arts Network Beverly Stephenson 41391 Kalmia St Ste 200 Murrieta, CA 92562

Location
Will Call

Purchase Date	Description	Rep	Terms
TBD	Wireless Purchase - 9/2022	SP	See Below

Description	Quantity	Unit Price	Subtotal	Discount	Net Price	Tax
Omnidirectional Condenser Miniature-Lavalier Mic-Black	30	95.00	2,850.00		2,850.00	
Quad Digital Wireless Receiver with internal power supply, 1/2 Wave Antenna and Rack Mounting hardware	6	9,034.00	54,204.00		54,204.00	
Digital Wireless Bodypack Transmitter with Miniature 4-pin Connector	24	794.00	19,056.00		19,056.00	
Five-way active antenna and power distribution system. Switchable frequency ranges: 147-216 MHz, 470-960 MHz, 1240-1260 MHz, 1492-1525 MHz, 1785-1805 MHz	2	1,474.00	2,948.00		2,948.00	
Passive Directional Antenna (470-952 MHz) includes 10' BNC/BNC Cable	2	373.00	746.00		746.00	
Rechargeable Battery	48	126.00	6,048.00		6,048.00	
Rack Battery Charger	4	835.00	3,340.00		3,340.00	
Black Label 16-space Amp Rack with Wheels	2	799.99	1,599.98		1,599.98	
Utility Rack Drawer 3RU 5.25in	4	242.00	968.00		968.00	
Snake Cable 12-channel XLR male to XLR female, 10'	2	189.49	378.98		378.98	
Labor - Rack Build					1,500.00	
Estimated shipping					600.00	
OPTIONAL UPGRADE: (30) Omnidirectional Earset Headworn Microphone, cocoa - Shure MX153C/O-TQG \$226.25 each x 30 = \$6,787.50 plus tax, if applicable						
NOTE: Prices are valid for 15 days from date of quote. Deposit of 50% is required to bind this quote. Once order is placed (ie. deposit is received), estimated delivery is 6 months due to supply chain issues.						
Sales Tax				8.75%		5,248.40
<b>Total</b>						<b>\$67,330.16</b>

To accept this quote, please sign, date and return:

Prepared by CS



# Full Compass Systems, Ltd

9770 Silicon Prairie Parkway  
 MADISON, WI 53593  
 608-831-7330  
 Fax: 608-831-6330

## Quotation

Confirmation # SOC4836238-3  
 Page 1 of 2  
 Date 9/12/2022  
 Sales order SOC4836238  
 Purchase order #  
 Ordered by  
 Salesperson Dave Cradler  
 Payment Credit Card  
 Customer account CUC2601395  
 FOB FOBO  
 Expiration date 10/27/2022

### Bill to:

Fine Arts Network  
 41391 Kalmia St  
 Ste 200  
 MURRIETA HOT SPRINGS, CA 92562

### Ship to:

Fine Arts Network  
 41391 Kalmia St  
 Ste 200  
 MURRIETA HOT SPRINGS, CA 92562

*Bid 2*

Mfg	Item number	Description	Qty ordered	Unit	Ship via	Unit price	Extended price	Fin
SHU	MX153T/O-TQG	Mic, Headworn Omni Cond. Tan	30	EA	Bestway	\$224.12	\$6723.60	
		<a href="https://www.fullcompass.com/prod/205081">https://www.fullcompass.com/prod/205081</a>						
SHU	ULXD4Q-G50	Quad Digital Receiver	6	EA	Bestway	\$5088.45	\$30530.70	
		<a href="https://www.fullcompass.com/prod/215817">https://www.fullcompass.com/prod/215817</a>						
SHU	ULXD1-G50	Transmitter, Bodypack	24	EA	Bestway	\$491.58	\$11797.92	
		<a href="https://www.fullcompass.com/prod/205101">https://www.fullcompass.com/prod/205101</a>						
SHU	UA845UW-B	Antenna/PowerDistSy	2	EA	Bestway	\$917.28	\$1834.56	
		<a href="https://www.fullcompass.com/prod/518501">https://www.fullcompass.com/prod/518501</a>						
SHU	PA805SWB	Antenna Wide Band	2	EA	Bestway	\$272.42	\$544.84	
		<a href="https://www.fullcompass.com/prod/125440">https://www.fullcompass.com/prod/125440</a>						
SHU	SB900B	Lithium-Ion Rechargeable Battery	48	EA	Bestway	\$101.92	\$4892.16	
		<a href="https://www.fullcompass.com/prod/602392">https://www.fullcompass.com/prod/602392</a>						
SHU	SBRCUS	Axient Digital Rackmount 8-Bay Charging Station	4	EA	Bestway	\$613.72	\$2454.88	
		<a href="https://www.fullcompass.com/prod/530000">https://www.fullcompass.com/prod/530000</a>						
ODY	FZAR16WBL	Case,16sp w/Wheels,BlackLabel	2	EA	Bestway	\$533.49	\$1066.98	
		<a href="https://www.fullcompass.com/prod/230379">https://www.fullcompass.com/prod/230379</a>						
MID	UD3	3 Space Rack Drawer	4	EA	Bestway	\$142.56	\$570.24	
		<a href="https://www.fullcompass.com/prod/020422">https://www.fullcompass.com/prod/020422</a>						
PRO	MT12FXFM-10	Snake 12chl XLRf-XLRM 10ft	2	EA	Bestway	\$114.66	\$229.32	

**Sales subtotal amount:** \$60645.20

**Promotional discount:** \$0.00

**Shipping & handling:** \$375.24

**Net amount:** \$61020.44

**Sales tax:** \$5306.46

**Total:** \$66326.90

**FY 2022/2023**

**COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA**

**GRANT APPLICATION #**

**16**

**FIRST TEE INLAND EMPIRE  
AKA BRIGHTON HILL ACADEMY  
SPORTS AND LEARNING CENTER**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 50,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: First Tee IE Life Skills Experience Classes Start Date: 9/1/2022 End Date: Ongoing

Physical Address of Project/Program: \_\_\_\_\_

INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: First Tee – Inland Empire

Mailing Address: 215 N. D Street, Suite 304

San Bernardino, CA 92401

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant Brighton Hill Academy SLC dba First Tee – Inland Empire

Organization: \_\_\_\_\_ Year Founded: 2014

IG- firstteeinlandempire

Website: www.firstteeinlandempire.org Social Media: FB- firsttee-inlandempire

Number of Paid Staff: 4 Number of Volunteers: 35

Geographic Area(s) the Organization Serves: Riverside and San Bernardino County

Geographic Area(s) the Project/Program Serves: Temecula Valley

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Pamela Tyler Title/Position: Executive Director

Contact Person's Direct Telephone: 909.297.6262 Contact Person's Email: \_\_\_\_\_

pamelatyler@thefirstteeinlandempire.org

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 2014

No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 46-4933764 State Identification Number: 3671608

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

### MISSION STATEMENT OF ORGANIZATION

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

To impact the lives of young people by providing educational programs that build character, instill life-enhancing values and promote healthy choices through the game of golf.

Create a safe introduction to golf for Temecula Youth via three delivery channels: Green golf courses, Community Programs partnering with other Youth Organizations, and School Programs introducing the program via PE Classes in the Temecula Unified School District teaching youth CORE Values, life skills, and how to succeed in their communities. Participants ages 5–18 progress through the program, deepening their understanding of life skills and golf development.

The integrated approach helps youth build confidence and resilience while on the course, at home and in school. The goal is to Build Game Changers who are committed to: Pursuing Goals, Growing through Challenge, Collaborating with others, Building Positive Self-Identity and Using Good Judgment.

### FINANCIAL STATEMENTS

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
First Tee Inland Empire Jr Golf Program	\$ 2000	May 2021	CMO-MR
First Tee Inland Empire Jr Golf Program	\$ 1000	May 2021	CMO-J Stewart
First Tee Inland Empire Jr Golf Program	\$ 1000	May 2021	CMO- ME
First Tee Inland Empire Jr Golf Program	\$ 2500	July 2021	CMO- Schwank
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) **FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$ 75,000	J Michael or J Kathleen Smith (Quarterly)	2020
\$ 20,000	Tom Pernice, Jr. Charities, Inc. 20,000.00	12-2020
\$ 10,000	Toyota -Corporate	2020
\$ 99,910	Corporate Contributions	2021
\$ 67,848	Government Grants	2021
\$ 5,826	Business Contributions	2021
\$ 25,000	Charles Schwab Matching Funds Grant	2022

**GRANT PROJECT/PROGRAM DESCRIPTION**

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

First Tee – Inland Empire (FTIE) is a youth character development educational program teaching youth NINE CORE Values and NINE Healthy habits while learning to play golf. Youth learn life skills on how to better communicate with family, in school and how to succeed in their future endeavors. Supporting children ages 5-18 in the City of Temecula in the First Tee IE Junior Golf Program. The goal is to reach youth through After-School Program opportunities on local Golf Courses, School PE Programs and Community Programs through the City of Temecula Parks.

**2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

ALSO, INCLUDE A LIST OF GOODS, EQUIPEMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

The grant funding will be utilized to expand FTIE programs in City of Temecula. This funding will allow FTIE to purchase curriculum, supplies for programs, hats, shirts, and other items needed to run the programs. It will help offset insurance, service costs and snacks. Additional Coaches will be needed which require Background Checks, training, and additional Program Expenses.

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

FTIE exists to enable kids to build strength of character that empowers them through a lifetime of new challenges. Temecula's youth in our programs are: more confident in school, and active community members. A progressive curriculum that focuses on social and emotional learning objectives through activities that are developmentally appropriate, designed to meet kids where they are. FTIE is building Game Changers who can change and enrich a community. The outcome of being in First Tee programs are good citizens, better people, more confident youth with a higher self-esteem that helps heal their generation and community. This helps reduce juvenile delinquency, gang affiliation, and crime for the community. Stats show 98% graduate High School and 84% go onto College. FTIE is focused on diversity, equity and inclusion of all youth no matter their ethnicity or socioeconomic status. It provides an equal playing field for under-served kids who normally would not be able to afford playing golf. Scholarships are offered. No child is turned away.

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:	35

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

**4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.**

By seamlessly integrating the game of golf with a life skills curriculum, FTIE creates learning experiences that build inner strength, self-confidence, and resilience that kids carry to everything they do. FTIE offers after school programs at Golf Courses, Parks and Schools for eight weeks, four times a year and summer camps. We could not expand our program access to these youth programs without generous contributions from the City of Temecula!

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

FTIE lost 60% of committed funds during Covid-19 Pandemic. This resulted in reduced staff and reduced programming to the community.

Increased costs during this inflationary period has driven up the cost for employees, program supplies, vendor and transportation costs, higher golf course fees, all materials affecting each area of the operation have increased.

In an effort to help First Tee Chapters rebound from Covid and inflationary concerns, Charles Schwab is offering Matching Grant funds if the Chapter receives 50% more donations than the year before, FTIE will receive \$32,500 in 2023.

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

If approved, funds will expand and continue existing programming in more Temecula Parks, Schools, Golf Courses, Charter Schools and other Youth Organizations .

**OBJECTIVES:**

- Growing Participant base by 50%, increasing Girls participation by 15%, and BIPOC by 25%
- Growing Coach base by 50% to reach 650 more participants while increasing diversity of staff/coach/volunteers to six more under-served, underrepresented program locations
- Increasing after-school programming locations by 35% to help students reach their full potential as productive, caring, and responsible citizens

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 50,000	
Amount contributed to the Project/Program by the Applicant Organization	\$ 105,000	
Other grants or funding already awarded for Project/Program, if any	\$ 35,000	
In-Kind match amount or volunteer credit hours estimated amount	\$ 25,000	
<b>TOTAL REVENUE</b>	<b>\$ 215,000</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$ 2000
Facilities/Rent/Insurance		\$ 2000
Supplies		\$ 1500
Marketing		\$
Services		\$ 10,000
Food		1,500
Other		\$ 33,000
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$ 165,000
<b>TOTAL EXPENSES</b>		<b>\$</b>
<b>TOTAL BUDGET</b>	<b>\$ 215,000</b>	<b>\$ 215,000</b>



**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022 (last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City **on or before due date: September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

Organization: \_\_\_\_\_ Name of Project/Program: \_\_\_\_\_

FY 2021-2022 Amount of \$ \_\_\_\_\_  
 CSF Grant Fund Awarded: \_\_\_\_\_ Month & Year CSF Grant Received from City: \_\_\_\_\_

Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number): \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.</b>	

**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**

**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. [If you were awarded less than \$5,000, submit Expenditure Report for that amount.]

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: _____			Name of Project/Program: _____		
TOTAL FY 2022-2023 Amount of Grant Fund Awarded: \$ _____			Month & Year FIRST \$5,000 check was received from City: _____		
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted).					
2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City					
3. Is this Expenditure Report is submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

**ORGANIZATION NAME:** Brighton Hill Academy SLC dba First Tee – Inland Empire

**MAILING ADDRESS:** 215 N. D Sreet  
San Bernardino, CA 92401

**PHONE:** (909 ) 297-6262

**EMAIL:** pamelatyler@thefirstteeinlandempire.org

**PRESIDENT / AUTHORIZED OFFICER:** Pamela Tyler Co-Founder, Executive Director  
PRINT NAME TITLE

**SIGNATURE:**  **DATE:** 8-18-2022  
MONTH, DAY, YEAR

**IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:** \_\_\_\_\_  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
[Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959

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

DEPARTMENT OF THE TREASURY

Date: **JAN 28 2015**

BRIGHTON HILL ACADEMY SPORTS AND  
LEARNING CENTER  
C/O MELODY FISCHETTI  
3560 RAWLEY ST  
CORONA, CA 92882

Employer Identification Number:  
46-4933764  
DLN:  
17053301366004  
Contact Person:  
FAITH E CUMMINS ID# 31534  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
170(b)(1)(A)(vi)  
Form 990 Required:  
Yes  
Effective Date of Exemption:  
April 30, 2014  
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](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,



Director, Exempt Organizations

Letter 947



## Entity Status Letter

Date: 8/25/2022

ESL ID: 8861241572

### 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: 3671608

Entity Name: BRIGHTON HILL ACADEMY SPORTS AND LEARNING CENTER

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](http://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)

990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Header section containing organization name (BRIGHTON HILL ACADEMY SPORTS AND LEARNING CENTER), EIN (46-4933764), address (215 NORTH D STREET, SAN BERNARDINO, CA 92401), and principal officer (JT VISBAL).

Part I Summary

Table with 3 columns: Line number, Description, and Amount. Rows include Revenue (Total revenue: 335,669), Expenses (Total expenses: 266,225), and Net Assets or Fund Balances (Net assets: 67,105).

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature block containing the signature of JT VISBAL, CHAIRMAN EMERITUS, dated 05/04/2022.

FY 2022/2023

COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA

GRANT APPLICATION #

**17**

**FRED FINCH  
YOUTH CENTER CARES INC.**

**CITY OF TEMECULA**  
**FISCAL YEAR 2022 - 2023**  
**COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA**  
**PROGRAM APPLICATION**

(Please Print or Type)

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 3,960.00 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: Temecula BEST Program  
Equipment and Materials Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Physical Address of Project/Program: 27555 Ynez Road, Suite 406 Temecula, CA 92591  
INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Fred Finch CARES, Inc.  
Mailing Address: 8787 Complex Drive, Suite 300  
San Diego, CA 92123

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant Fred Finch CARES, Inc.  
Organization: \_\_\_\_\_ Year Founded: 2017

Website: fredfinch.rg/cares Social Media: facebook.com/fredfinchcares

Number of Paid Staff: 132 Number of Volunteers: 5

Geographic Area(s) the Organization Serves: southern California

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

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Clay Myers-Bowman Title/Position: Development Officer

Contact Person's Direct Telephone: (619) 972-1985 Contact Person's Email: claymyersbowman@fredfinch.org

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: \_\_\_\_\_

No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 81-4243450 State Identification Number: 3956277

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://rct.doi.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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

**MISSION STATEMENT OF ORGANIZATION**

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

The purpose of Fred Finch CARES is to set the standard for thorough developmental assessment and supportive services to children and families impacted by developmental disabilities, mental health concerns, and significant trauma and loss, in San Diego County and across Southern California. Our staff is diverse, compassionate, committed, and innovative. All our services respond to the needs of our local communities. At Fred Finch CARES, we are committed to having a workforce that is reflective of diversity as well as representative of the cultural and linguistic needs of those we serve. Children are empowered to foster self-reliance and independence, build, and improve healthy relationships, teach self-awareness, and increase their coping skills and self-esteem. Caregivers learn the skills to manage difficult situations, assess, and meet their child's needs. By providing an array of individualized, trauma-informed, and culturally responsive interventions that build upon each participant's strengths, we ensure strong positive outcomes.

**FINANCIAL STATEMENTS**

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		

**GRANT PROJECT/PROGRAM DESCRIPTION**

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

Fred Finch CARES has developed the Behavior Education and Skills Training (BEST) program in order to bridge the behavioral health workforce gap while meeting the growing need for behavioral health workforce in communities of high need, including Temecula where we currently operate several social service and behavioral health programs for children, youth and families. Fred Finch CARES seeks support to implement a Bilingual BEST program to help build a behavioral health workforce in Temecula.

**2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

ALSO, INCLUDE A LIST OF GOODS, EQUIPMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

The BEST program will provide 10 participants with a paid training experience that will enhance their knowledge and skills in serving children, youth, and families with developmental disabilities; learn the basics of Applied Behavior Analysis, and medical and mental health terminology, while preparing them for job opportunities within our organization. Each successful graduate of the program who transitions into an entry-level position will be equipped to serve up to 10 bilingual (Spanish/English) and/or monolingual Spanish speaking children, youth, or families.

This grant funding will support material and equipment costs for the training.

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

The BEST program was developed out of the need for Registered Behavioral Technicians to work with children, youth and their families impacted by developmental disabilities. We are seeking to train qualified bilingual providers in the Temecula area who can deliver high quality services across a variety of sectors. By providing participants the training and skills that can be utilized across different treatment settings, we can ensure that the same quality of service is implemented to meet the growing needs of the community.

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

10

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

0

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

**4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.**

In response to a dire need for cultural and linguistic diversity in mental health care, Fred Finch CARES seeks funding to support a bilingual Behavior Education and Skills Training program in order to meet the growing need for behavioral health workers in Temecula.

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 3,960.00	
Amount contributed to the Project/Program by the Applicant Organization	\$	
Other grants or funding already awarded for Project/Program, if any	\$	
In-Kind match amount or volunteer credit hours estimated amount	\$	
TOTAL REVENUE	\$	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$
Facilities/Rent/Insurance		\$2396.00
Supplies (requested funding)		\$3960.00
Marketing		\$
Services		\$
Food		\$
Other Participant Stipends; Contractors		\$5000.00
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$6526.39
TOTAL EXPENSES		\$17,882.39
TOTAL BUDGET	\$	\$17,882.39

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022 (last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City on or before due date: **September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

Organization: Fred Finch CARES, Inc. Name of Project/Program: Temecula BEST Program Equipment and Materials

FY 2021-2022 Amount of \$ \_\_\_\_\_  
 CSF Grant Fund Awarded: \_\_\_\_\_ Month & Year CSF Grant Received from City: \_\_\_\_\_

Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number): \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		

**EXPENDITURE TOTAL \$** EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.

**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**  
**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. [If you were awarded less than \$5,000, submit Expenditure Report for that amount.]

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
 Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: <u>Fred Finch CARES, Inc.</u>		Name of Project/Program: <u>Temecula BEST Program Equipment and Materials</u>			
TOTAL FY 2022-2023		Month & Year FIRST \$5,000 check			
Amount of Grant Fund Awarded: \$ _____		was received from City: _____			
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted).					
2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City					
3. Is this Expenditure Report is submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____.					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

**ORGANIZATION NAME:** Fred Finch CARES, Inc.

**MAILING ADDRESS:** 8787 Complex Drive, Suite 300 **PHONE:** (\_\_\_\_) \_\_\_\_\_  
San Diego, CA 92123 **EMAIL:** \_\_\_\_\_

**PRESIDENT / AUTHORIZED OFFICER:** Julie Henderson, Director of Development  
PRINT NAME TITLE

**SIGNATURE:**  **DATE:** 09/12/22  
MONTH, DAY, YEAR

**IF DIFFERENT THAN ABOVE, APPLICATION PREPARED BY:** Bonnie Alexander, Grant Writer  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
[Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959





Department of the Treasury  
Internal Revenue Service

P.O. Box 2508  
Cincinnati OH 45201

In reply refer to: 0248364843

Dec. 05, 2017 LTR 4168C 0

81-4243450 000000 00

00005054

BODC: TE

FRED FINCH YOUTH CENTER CARES INC  
% TOM ALEXANDER  
3800 COOLIDGE AVE  
OAKLAND CA 94602



011299

Employer ID Number: 81-4243450  
Form 990 required: Yes

Dear Taxpayer:

This is in response to your request dated Nov. 24, 2017, regarding your tax-exempt status.

We issued you a determination letter in August 2017, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

Our records also indicate 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 a return is required, you must file Form 990, 990-EZ, 990-N, or 990-PF by the 15th day of the fifth month after the end of your annual accounting period. IRC Section 6033(j) provides that, if you don't file a required annual information return or notice for three consecutive years, your exempt status will be automatically revoked on the filing due date of the third required return or notice.

For tax forms, instructions, and publications, visit [www.irs.gov](http://www.irs.gov) or call 1-800-TAX-FORM (1-800-829-3676).

If you have questions, call 1-877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific Time).

0248364843  
Dec. 05, 2017 LTR 4168C 0  
81-4243450 000000 00  
00005055

FRED FINCH YOUTH CENTER CARES INC  
% TOM ALEXANDER  
3800 COOLIDGE AVE  
OAKLAND CA 94602

Sincerely yours,



Kim A. Billups, Operations Manager  
Accounts Management Operations 1



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

## Entity Status Letter

Date: 9/12/2022

ESL ID: 6921971578

### 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: 3956277

Entity Name: FRED FINCH YOUTH CENTER CARES, 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](http://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)

# **PUBLIC DISCLOSURE COPY**

**PLEASE FILE IN A SAFE PLACE**

**ARMANINO LLP**

12657 Alcosta Blvd., Suite 500  
San Ramon, CA 94583  
ph 925.790.2600  
fx 925.790.2601

Form **990**  
(Rev. January 2020)  
Department of the Treasury  
Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**  
Open to Public Inspection

**A** For the 2019 calendar year, or tax year beginning **JUL 1, 2019** and ending **JUN 30, 2020**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization FRED FINCH YOUTH CENTER CARES, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 3800 COOLIDGE AVENUE City or town, state or province, country, and ZIP or foreign postal code OAKLAND, CA 94602 <b>F</b> Name and address of principal officer: ED HSU SAME AS C ABOVE	<b>D</b> Employer identification number 81-4243450 <b>E</b> Telephone number 510-482-2244 <b>G</b> Gross receipts \$ 2,891,868. <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <a href="https://www.fredfinch.org/cares/">HTTPS://WWW.FREDFINCH.ORG/CARES/</a>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: 2016 <b>M</b> State of legal domicile: CA

**Part I Summary**

	<b>1</b>	Briefly describe the organization's mission or most significant activities: FRED FINCH YOUTH CENTER CARES, INC. ("CARES") WAS FORMED IN NOVEMBER 2016 (CONTINUED ON SCHEDULE O)		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>Activities &amp; Governance</b>	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>4</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>3</b>
	<b>5</b>	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	<b>5</b>	<b>132</b>
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>3</b>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
	<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 39	<b>7b</b>	<b>0.</b>
<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	Prior Year 1,140,649.	Current Year 1,386,832.
	<b>9</b>	Program service revenue (Part VIII, line 2g)	959,817.	1,505,036.
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	633.	0.
	<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,101,099.	2,891,868.
<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,660,619.	2,412,929.
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	<b>16b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶	0.	
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	734,327.	983,296.
	<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,394,946.	3,396,225.
	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	-293,847.	-504,357.
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	Beginning of Current Year 1,112,402.	End of Year 801,849.
	<b>21</b>	Total liabilities (Part X, line 26)	2,972,233.	3,166,037.
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	-1,859,831.	-2,364,188.

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer ED HSU, CFO Type or print name and title	Date			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name MATTHEW PETROSKI	Preparer's signature MATTHEW PETROSKI	Date 05/13/21	Check if self-employed <input type="checkbox"/>	PTIN P00853132
	Firm's name ARMANINO LLP	Firm's address 12657 ALCOSTA BLVD, STE. 500 SAN RAMON, CA 94583-4600	Firm's EIN 94-6214841	Phone no. 925-790-2600	

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

FY 2022/2023

COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA

GRANT APPLICATION #

**18**

**GOOD SAMARITAN  
FOOD PANTRY**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 50,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: Temecula Hunger Relief Program Start Date: 8/1/22 End Date: 8/1/23

Physical Address of Project/Program: \_\_\_\_\_  
INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Good Samaritan Community Food Pantry  
Mailing Address: 32127 Camino Rabago, Temecula CA 92592

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant

Organization: Good Samaritan Community Food Pantry Year Founded: 2019

Website: <https://goodsamaritancommunity.org/> Social Media: <https://www.facebook.com/Good-Samaritan-Community-Food-Pantry-111174284381679> Number of Paid Staff: 0

Number of Volunteers: 12 Geographic Area(s) the Organization Serves: Temecula Residents

Geographic Area(s) the Project/Program Serves: Exclusively used for Temecula residents \_\_\_\_\_  
NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Teri Sue Parker \_\_\_\_\_ Title/Position: Founder \_\_\_\_\_

Contact Person's Direct Telephone: 951-415-5731 \_\_\_ Contact Person's Email: [terisuecate@hotmail.com](mailto:terisuecate@hotmail.com) \_\_\_

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 8/5/2020 \_\_\_  
No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 85-3139441 \_\_\_\_\_ State Identification Number: 4636074 \_\_\_\_\_

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

### MISSION STATEMENT OF ORGANIZATION

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

Our goal here at Good Samaritan is to provide and deliver healthy, fresh, food and essentials for Temecula residents, their families, and pets in a safe and courteous way.

Our goal is to lift up as many residents as possible who are in need and help them get back on their feet by taking some of the pressure of food insecurity. Delivering food and essentials they need gives them hope, strength, nourishment, and essential items for themselves, their families and their pets.

For the elderly and disabled we want to give them peace of mind they will not have to choose between food or medications or keeping their pets, and other essential living expenses they have. We focus on Isolated seniors, veterans, cancer patients, disabled, foster families, and families at risk. Providing fresh and healthy nourishment can and will help these residents get back on their feet quicker and feel supported by their community.

### FINANCIAL STATEMENTS

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW,



**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) **FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$1,000	Morongo Casino	4/2020
\$	Chick-fil-A – They are awarding grants if we get one 12/2022	
\$		
\$		
\$		
\$		
\$		
\$		

**GRANT PROJECT/PROGRAM DESCRIPTION**

**IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE**

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

This grant would support our Hunger Relief Program for Temecula. Temecula residents who are experiencing food insecurity.

**2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

**ALSO, INCLUDE A LIST OF GOODS, EQUIPMEMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.**

Healthy food to prepare breakfast, lunch, dinner, pet food, essential items and household goods, paper products and cleaning supplies for their homes.

This grant would allow us to purchase food that we currently do not get enough of from the community. It is important that the weekly food bags have all of the essential items from all the major food groups and not just canned goods. We deliver meat, grains, dairy, fresh fruits, vegetables and per food that allows them to prepare their meals for their family and pets.

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

Good Samaritan Community Food Pantry is a local grassroots food pantry.

We drop off exclusively to Temecula residents in need directly to their doorstep weekly and biweekly. This allows Temecula residents to stay in their homes. and keep their pets with them. We have found that many of the residents do not have reliable transportation, so delivering food and essentials directly to them has taken some of the burden from their shoulders.

3b ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:	1000
3c ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:	15+

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

The funding from this grant will replenish the essential healthy food and essential items for the residents here in Temecula and their pets by providing Good Samaritan the resources to purchase the food locally and other essential items the homes need. By focusing on specific areas in Temecula we can provide residents with special dietary needs and restrictions for some, food prices have doubled and the food we drop off weekly or Bi-weekly has to be replenished and replaced.

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

We depended 100% on donations of food and essentials from the residents locally, at the beginning we were able to keep adding residents in need due to the amount of food and essentials and pet food that was being dropped off to us. But now with food prices doubling and gas prices so high the donations of food and essentials and pet food has come to almost a complete halt. Inflation has devastated so many homes as well as food pantries since many people can only feed themselves and their families and can no longer afford to donate. We also deliver 99% of the food directly to the needy, so the gas prices for volunteers has become a big challenge for our drivers.

We were serving residents that could not leave their home, shut ins and residents with high risk factors we had to deliver safely and many have diet restrictions and health issues. The number of residents in need now is staggering. We serve so many with health issues that going out and buying healthy food to help keep them healthy is a luxury, some that we serve had not had fresh produce for months and some were afraid of who handled their food as to not get infected with the virus. Our number of shut-in's has increased and our number of family's has tripled over the last year as the cost of food has made it very hard to keep the fridges and freezers and shelves stocked.

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

The funds from this grant would allow us to create new ways to add more residents in need and families with special needs. This grant would allow Good Samaritan to continue what we are doing daily - filling the food bags full of healthy foods, essentials, and pet food.

We can continue "Adopt A Family" "Adopt A Senior" programs during the Holiday's which has brought so much joy to those who need it. We can continue to provide fresh, healthy, safe food so those in need so they can prepare good meals for breakfast, lunch, and dinner. It will also help us to keep providing paper goods and cleaning supplies, so they can keep germs from spreading and their homes safe and clean. We will be able to continue providing those with special dietary needs.

It allows us to keep bringing pet foods and supplies, so they don't have to surrender their beloved pets to a shelter because they can no longer feed them.

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$50,000	
Amount contributed to the Project/Program by the Applicant Organization - Estimated donations through out donate button on website for project	\$1500	
Other grants or funding already awarded for Project/Program, if any	\$0	
In-Kind match amount or volunteer credit hours estimated amount **OUR IN-KIND donations come in as dropped off food and supplies by the community which has decreased substantially. Guesstimate for 2022	\$85,000 as donated food or essentials NOT CASH	
<b>TOTAL REVENUE</b>	<b>\$51,500</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$
Facilities/Rent/Insurance – Electric/Gas		\$6500.00
Supplies – Baggies/Wrapping/Bags/Flyers/Boxes		\$2500.00
Marketing		\$
Services		\$
Food and Essentials		\$41,000
Other		\$
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$0
<b>TOTAL EXPENSES</b>		<b>\$</b>
<b>TOTAL BUDGET</b>	<b>\$50,000</b>	<b>\$50,000</b>

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

**\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.**

If your organization was awarded a Community Service Funding Grant in FY 2021-2022  
(last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City **on or before due date: September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

**Organization:** \_\_\_\_\_ **Name of Project/Program:** \_\_\_\_\_

**FY 2021-2022 Amount of CSF Grant Fund Awarded:** \$ \_\_\_\_\_ **Month & Year CSF Grant Received from City:** \_\_\_\_\_

**Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number):** \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		
<b>EXPENDITURE TOTAL</b>			\$	<b>EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

**ORGANIZATION NAME: Good Samaritan Community Food Pantry**

**MAILING ADDRESS: 21227 Camino Rabago Temecula CA 92592    PHONE: 951-415-5731**

**EMAIL: terisuecate@hotmail.com**

**PRESIDENT / AUTHORIZED OFFICER: Teri Sue Parker**

**Founder**

**SIGNATURE:**

*Teri Sue Parker*  
PRINT NAME

**DATE:**

*8-11-2022*

MONTH, DAY, YEAR

IF DIFFERENT THAN ABOVE,

APPLICATION PREPARED BY:

*Teri Sue Parker*  
PRINT NAME

TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions:    [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
                  [Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959



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

## Entity Status Letter

Date: 8/7/2022

ESL ID: 7074774595

### 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: 4636074

Entity Name: GOOD SAMARITAN COMMUNITY FOOD PANTRY 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 .
- 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](http://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)

**FY 2022/2023**

**COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA**

**GRANT APPLICATION #**

**19**

**GREEN ACRES  
INTERACTIVE THERAPY INC.**



**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 50,000 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: Walk, Ride, Run for Gait Start Date: 5/1/23 End Date: 6/30/23

Physical Address of Project/Program: 35750 De Portola Road Temecula. Ca. 92592  
INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Green Acres Interactive Therapy  
Mailing Address: 35750 De Portola Road  
Temecula. CA 92592

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant Green Acres Interactive  
Organization: Therapy Year Founded: 2014

Website: Gaitprogram.org Social Media: FT, Twitter

Number of Paid Staff: 9 Number of Volunteers: 20

Geographic Area(s) the Organization Serves: Temecula

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

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Margaret Rich Title/Position: Founder

Contact Person's Direct Telephone: 909-240-4500 Contact Person's Email: info@gairprogram.org

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 2014  
No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 46-4355227 State Identification Number: 3547698

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

**MISSION STATEMENT OF ORGANIZATION**

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

To enrich lives by providing physical and emotional therapy through horses and farm interaction.

**FINANCIAL STATEMENTS**

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.

**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$ \$5,000	Staples	8/22
\$		
\$		
\$		
\$		
\$		
\$		
\$		

**GRANT PROJECT/PROGRAM DESCRIPTION**

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

To celebrate the growth of Gait and to keep t6he therapeutic riding accessible to the community of Temecula. We invite the community to join us for Walk, Ride, Run for Gait, a fun reason to get outdoors and raise awareness.

This was a virtual program because of Covid but now we would like it to be a City of Temecula event.

2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.

ALSO, INCLUDE A LIST OF GOODS, EQUIPMEMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

Funds will be used to pay for the boarding, care and feeding of the horses involved in the program.

Funds ill be used to provide safety equipment (helmets, Gloves and any other tack) as needed to keep participants safe.

Funds will be used to clear the trail that will be used for the participants.

Funs will be used to provide water, snacks and T-shirts for the participants.

S

3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.

With the funding we can open up the ranch to the Temecula residents to get involved with the program that night not have the financial funds available to participate in the program.

There isn't another facility in Temecula that handles special needs, PTSD for Veterans and other public servants, and helping families that are in need of group therapy because of adoption or group home facilities.

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:

50

**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

**4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.**

This program is to raise awareness for the City of Temecula about it's therapeutic program and provide a facility to help families in need of therapy that is interactive with animals and be outdoors.

**5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.**

During Covid we had to shut down our facility and lay off employees and we could not secure volunteers even when we opened up the doors.

We have to use extensive funds to make the environment safe by purchasing products to clean helmets and reins and tack.

We have also had to deal with the rising costs of fuel, horse feed and vet care and food and have not raised our prices as to keep it affordable for the community.

**6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.**

The additional funds will help expand out program from virtual to a physical event that the city of Temecula can participate in.

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>		
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>	<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>		
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)	\$ 50,000	
Amount contributed to the Project/Program by the Applicant Organization	\$	
Other grants or funding already awarded for Project/Program, if any	\$ 5,000	
In-Kind match amount or volunteer credit hours estimated amount	\$	
<b>TOTAL REVENUE</b>	<b>\$ 55,000</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>		
Tools/Equipment		\$ 10,000
Facilities/Rent/Insurance		\$ 15,000
Supplies		\$ 5,000
Marketing		\$ 5,000
Services		\$ 2,500
Food		\$ 4,200
Other		\$
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.	\$ 10,000
<b>TOTAL EXPENSES</b>		<b>\$ 51,700.00</b>
<b>TOTAL BUDGET</b>	<b>\$</b>	<b>\$ 50,000</b>

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022 (last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City on or before due date: **September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

Organization: Green Acres Interactive Name of Project/Program: Walk, Ride, Run for Gait Therapy

FY 2021-2022 Amount of \$ \_\_\_\_\_

CSF Grant Fund Awarded: \_\_\_\_\_ Month & Year CSF Grant Received from City: \_\_\_\_\_

Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number): \_\_\_\_\_

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.</b>	

**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**  
**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. (If you were awarded less than \$5,000, submit Expenditure Report for that amount.)

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
 Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: <u>Green Acres Interactive Therapy</u>			Name of Project/Program: <u>Walk, Ride, Run for Gait</u>		
TOTAL FY 2022-2023			Month & Year FIRST \$5,000 check		
Amount of Grant Fund Awarded: \$ _____			was received from City: _____		
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes ___ or No ___ (already submitted). 2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City 3. Is this Expenditure Report is submitted to request reimbursement of funds? No ___ or Yes ___ If yes, Amount of Request \$ _____.					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure		
			Amount	Description	Purpose
<small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>					
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	



**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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.
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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.
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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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

ORGANIZATION NAME: Green Acres Interactive Therapy

MAILING ADDRESS: 35750 De Portola Rd PHONE: (90) 240-4500  
Temecula, CA 92592 EMAIL: info@gaitprogram.org

PRESIDENT / AUTHORIZED OFFICER: Margaret Rich, Founder  
PRINT NAME TITLE

SIGNATURE: Margaret Rich DATE: 9/12/2022  
MONTH, DAY, YEAR

IF DIFFERENT THAN ABOVE,  
APPLICATION PREPARED BY: \_\_\_\_\_  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: [Stacey.Brown@TemeculaCA.gov](mailto:Stacey.Brown@TemeculaCA.gov) (951) 694-6413  
[Betsy.Lowrey@TemeculaCA.gov](mailto:Betsy.Lowrey@TemeculaCA.gov) (951) 693-3959

**GREEN ACRES INTERACTIVE THERAPY, INC. (3547698)**

**Request Certificate**

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**Initial Filing Date** 02/01/2013  
**Status** Active  
**Standing - SOS** Good  
**Standing - FTB** Good  
**Standing - Agent** Good  
**Standing - VCFCF** Good  
**Formed In** CALIFORNIA  
**Entity Type** Nonprofit Corporation - CA - Public Benefit  
**Principal Address** 35750 DE PORTOLA ROAD TEMECULA, CA 92592  
**Mailing Address** 35750 DE PORTOLA ROAD TEMECULA, CA 92592  
**Statement of Info Due Date** 02/28/2023  
**Agent** Individual 2810395 MARGARET RICH 35750 DE PORTOLA RD TEMECULA, CA 92592

<b>Entity Information</b>	<b>Initial Filing Date</b>	<b>Status</b>	<b>Entity Type</b>	<b>Formed In</b>	<b>Agent</b>
GREEN ACRES INTERACTIVE THERAPY, INC. (3547698)	02/01/2013	Active	Nonprofit Corporation - CA - Public Benefit	CALIFORNIA	MARGARET RICH

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

DEPARTMENT OF THE TREASURY

Date: **AUG 18 2014**

GREEN ACRES INTERACTIVE THERAPY,  
INC>  
C/O SELINA STEELE  
PO BOX 890339  
TEMECULA, CA 92589-0339

Employer Identification Number:  
46-4355227  
DLN:  
17053167363024  
Contact Person:  
CUSTOMER SERVICE ID# 31954  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
February 28  
Public Charity Status:  
170(b)(1)(A)(vi)  
Form 990 Required:  
Yes  
Effective Date of Exemption:  
February 1, 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.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Form **990-EZ**

**Short Form**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

**2020**

**Open to Public Inspection**

▶ Do not enter social security numbers on this form, as it may be made public.  
▶ Go to [www.irs.gov/Form990EZ](http://www.irs.gov/Form990EZ) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

**A For the 2020 calendar year, or tax year beginning** Mar 1, 2020, and ending Feb 28, 2021

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C Name of organization**  
GREEN ACRES INTERACTIVE THERAPY INC  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
35750 DE PORTOLA  
 City or town, state or province, country, and ZIP or foreign postal code  
TEMECULA, CA 92592

**D Employer identification number**  
46-4355227

**E Telephone number**  
9513022384

**F Group Exemption Number** ▶

**G Accounting Method:**  Cash  Accrual Other (specify) ▶

**H Check**  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**I Website:** ▶ N/A

**J Tax-exempt status (check only one)** -  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**K Form of organization:**  Corporation  Trust  Association  Other

**L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ.** ▶ \$ 134,166.

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)**  
 Check if the organization used Schedule O to respond to any question in this Part I

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21		
Revenue	1	Contributions, gifts, grants, and similar amounts received	72,993.																												
	2	Program service revenue including government fees and contracts	40,815.																												
	3	Membership dues and assessments																													
	4	Investment income																													
	5a	Gross amount from sale of assets other than inventory																													
	b	Less: cost or other basis and sales expenses																													
	c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)																													
	6	Gaming and fundraising events:																													
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)																													
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)									1,845.																					
c	Less: direct expenses from gaming and fundraising events										5,854.																				
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)											-4,009.																			
7a	Gross sales of inventory, less returns and allowances																														
b	Less: cost of goods sold																														
c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)																														
8	Other revenue (describe in Schedule O) See Line 8 Stmt.															18,513.															
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8																128,312.														
Expenses	10	Grants and similar amounts paid (list in Schedule O)																													
	11	Benefits paid to or for members																													
	12	Salaries, other compensation, and employee benefits											88,075.																		
	13	Professional fees and other payments to independent contractors											2,100.																		
	14	Occupancy, rent, utilities, and maintenance											42,703.																		
	15	Printing, publications, postage, and shipping											2,071.																		
	16	Other expenses (describe in Schedule O) See Line 16 Stmt.											60,849.																		
17	<b>Total expenses.</b> Add lines 10 through 16												195,798.																		
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)																													
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)																													
	20	Other changes in net assets or fund balances (explain in Schedule O)																													
	21	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20																													



WHAT WE DO (WHAT WE DO)  
 GAIT STAFF (GAIT-STAFF)  
 EMPLOYMENT & VOLUNTEER (EMPLOYMENT AND VOLUNTEER)  
 PROGRAMS

THERAPEUTIC HORSEBACK RIDING (THERAPEUTIC-HORSEMANSHIP)  
 ANIMAL INTERACTION (PASTORAL-THERAPY)  
 STORIES (SUCCESS-STORIES)

# WALK, RIDE, RUN

## WALK, RIDE, RUN FOR GAIT

A NEW VIRTUAL 10K OR 10 MILE WALK, RIDE, RUN, FUNDRAISER

To celebrate the growth of Green Acres Interactive Therapy and to keep therapeutic riding accessible

to our community, we invite you to join us for Walk, Ride, Run for Gait a fun reason to get

Events

DONORS (DONORS)

PONY UP FOR GAIT (PONY-UP)

WALK, RIDE, RUN FOR

## EVENT DATES

MAY 1ST THROUGH JUNE 30TH

SIGN UP TODAY! ([HTTPS://WALKRIDERUNFORGAIT.MAXGIVING.BID/TICKETS](https://walkriderunforgait.maxgiving.bid/tickets))

## SIGN UP NOW THROUGH JUNE 30TH

Whether you are saddling up or joining us on for, we cannot wait to see your photos of you and your family spending time outdoors for this pressure free walk, ride or run for GAIT

### TWO WAYS TO JOIN US & SUPPORT GAIT

#### 10K WALK/JOG

This division is for those who wish to complete the miles on foot, bike, hike, run, swim, walk, roll - however, you choose to participate! Complete 10K (or 6.2 Miles) in whatever way that works best for you. We thank you for your support.

#### 10-MILE RIDE

Saddle up your trusty companion and join us for a ten-mile ride at your pace! Track your rides through your favorite app. Whether you complete it all at once or break it down over several rides, you can stick to the pace that works for you and your trusty companion.

COST: \$50 PER PARTICIPANT ([HTTPS://RUNSIGNUP.COM/RACE/CA/TEMECULA/RUNTROTFORGAIT](https://runsignup.com/race/ca/temecula/runtroutforgait))

## STEPS TO PARTICIPATE



### SIGN UP

Click on the link to go to our "Walk, Ride, Run for GAIT" Sign-up page and get registered. This allows us to prep your swag bag to arrive in May during the run of the event!

**Now through - June 30th**



### TELL YOUR FRIENDS AND FAMILY

Spread the word and have your friends and family join in on this great excuse to get outside and enjoy a fun and safe activity for a great cause.



### SADDLE UP!

This event is a self-led 10k or 10-mile ride that can be completed any time at any pace



in the month of May. Share your experience  
out on the trails with us my tagging  
#WalkRideRunforGAIT or @GAITProgram

May 1st - June 30th

Please note that this is a **SELF-COORDINATED** run with no setup, chip-timing, or coordinators  
on-site. Your time will be self-recorded, submitted, and can be posted on our website after your run  
or ride.

**A VIRTUAL FUNDRAISER**

# WALK RIDE RUN

**FOR GAIT**

**PICK YOUR RACE**

Select if you would like to join us on foot for the 10K walk or on 10-mile ride. Remember, you can split up your time outdoors into different days and complete your miles at any speed!

**GAIT** GREEN ACRES INTERACTIVE THERAPY

NEW EXTENDED EVENT DATES:  
**MAY 1st - June 30th, 2022**

**WALK, RIDE, RUN FOR GAIT!**

A virtual 10k or 10 Mile Walk, Ride  
Run Fundraiser.

To celebrate the growth of Green Acres Interactive Therapy and to keep therapeutic riding accessible to



## JOIN A TEAM

Join a team and make it a group effort! Pick an existing group (like The Rich Group or KRE Show Horse) or make your own. The teams with the most members and the most money raised will receive special recognition at the end of the race.

## RAISE AWARENESS

By joining us for this special event, you are raising awareness for GAIT and helping our program grow.



our community, we invite you to join us for Walk, Ride, Run for GAIT, a fun reason to get outdoors and raise awareness for GAIT!

## SIGN UP DATES:

**Now through June 30th, 2022**

Whether you are saddling up or joining us on foot, we cannot wait to see your photos of you and your family spending some time outdoors for this pressure-free walk or run for GAIT.

## Sign up at :

[walkriderunforgait.mixgiving.bid](mailto:walkriderunforgait.mixgiving.bid)

More Information:

[Heather@GaitProgram.org](mailto:Heather@GaitProgram.org)

[WWW.GAITPROGRAM.ORG](http://WWW.GAITPROGRAM.ORG)



## LIMITED EDITION T-SHIRT

Each participant will receive a 100% t-shirt designed specifically for Walk, for Ride, Run for GAIT.

All swag bags will be shipped in early May so be sure to sign up today to receive your shirt and other goodies!

INTERESTED IN JOINING US AS A SPONSOR?



A virtual 10K or 10 Mile Ride, Walk, Run Fundraiser with limitless potential!

## GAIT

is currently seeking a select number of participants for this special fundraiser with limited availability!

Email us Today!

[heather@gaitprogram.org](mailto:heather@gaitprogram.org)



## SIGN UP DATES

## JOIN NOW!

Join us as a sponsor to support our mission to enrich lives of those with special needs through equine and animal interaction and reach thousands of new customers.

To celebrate the growth of our program and to keep therapeutic riding accessible to our community, we invite you to join us as a sponsor for Walk, Ride, Run for Gait 2022, a fun reason to get outdoors and raise awareness for Green Acres Interactive Therapy. Whether participants are saddling up or joining us on foot, you can expect a fun and positive event that benefits our local community.

## WHO WILL YOU REACH?

+600 Followers on Social Media  
will be linked directly to you

+2,000 Emails will include  
our thanks for your support

Now through June 30th, 2022

walkriderunforgait.maxgiving.bid

+300 Families at Green Acres  
will appreciate your generosity

Instagram icon, YouTube icon, Twitter icon, Facebook icon, Email icon

**SIGN UP NOW!**  
**([HTTPS://WALKRIDERUNFORGAIT.MAXGIVING.BID/TICKETS](https://walkriderunforgait.maxgiving.bid/tickets))**

35750 DE PORTOLA ROAD, TEMECULA, CA,  
92592 (951) 302-2384 [INFO@GAITPROGRAM.ORG](mailto:info@gaitprogram.org) ([MAILTO:INFO@GAITPROGRAM.ORG](mailto:info@gaitprogram.org))

GAIT is a 501(c)3 non-profit organization | EIN # 46-4355227

(https: (https:

*Follow us on our social media for news and updates!*

Rancho California Arabian Horse Association Presents

at **Green Acres Ranch**  
35750 De Portola Road  
in Temecula

# Horses Head *to* Hoof

**SUNDAY, April 19th**  
10am - 4pm

**THIS IS A FREE EVENT THAT IS OPEN TO THE PUBLIC**

\$5 Parking donation\* per car  
includes 1 FREE Raffle ticket!

\*donation to benefit **GAIT Therapeutic Riding Program**  
and Temecula Valley Rural Lifestyles

**CELEBRATING THE AMAZING WORLD  
OF ALL THINGS HORSES**

*The beauty of the horse transcends all labels and preferences.  
Behind every horse person lies the child that simply fell in love with a horse.*

• **DEMONSTRATIONS** • **VENDORS** • **CLUBS** • **FOOD**  
• **RAFFLE** • **PONY RIDES** • **PETTING ZOO** • **HAY RIDES**

Any questions contact Heather - [heather@greenacresranchinc.com](mailto:heather@greenacresranchinc.com) (951) 302-6045

**FY 2022/2023**

**COMMUNITY SERVICE FUNDING  
REINVESTMENT IN TEMECULA**

**GRANT APPLICATION #**

**20**

**HABITAT FOR HUMANITY  
INLAND VALLEY INC.**

**CITY OF TEMECULA**

**FISCAL YEAR 2022 - 2023  
COMMUNITY SERVICE FUNDING - REINVESTMENT IN TEMECULA  
PROGRAM APPLICATION**

*(Please Print or Type)*

**DUE ON OR BEFORE: MONDAY, SEPTEMBER 12, 2022**

**PROJECT/PROGRAM INFORMATION**

Amount Requested: \$ 44,094 MAXIMUM ALLOWABLE: \$50,000 PER ORGANIZATION

Project/Program Title: Temecula Real Estate and Education Center Start Date: 10.1.22 End Date: 6.30.23

Physical Address of Project/Program: 41615 Winchester Rd Ste 214, Temecula CA 92590

INCLUDE IF DIFFERENT THAN ORGANIZATION'S MAILING ADDRESS

If Grant is Awarded, Make Check Payable to: Habitat for Humanity Inland Valley

Mailing Address: 27475 Ynez Road #390  
Temecula, CA 92591

**ORGANIZATION AND GEOGRAPHIC AREA SERVED**

Name of Applicant Habitat for Humanity Inland Valley  
Organization: Valley Year Founded: 1991

Website: habitativ.org Social Media: facebook.com/HabitatIV/

Number of Paid Staff: 42 Number of Volunteers: 1,266

Geographic Area(s) the Organization Serves: Southwest Riverside County

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

NOTE: COMMUNITY SERVICE FUNDING GRANT PROGRAM FUNDING MUST BE EXCLUSIVELY USED TO SERVE TEMECULA.

Contact Name: Mary Stein Title/Position: Associate Director

Contact Person's Direct Telephone: 951-296-3362 Contact Person's Email: mary@habitativ.org

**NONPROFIT STATUS**

Is this organization incorporated as a nonprofit? Yes  Date of Incorporation as a Nonprofit: 2/21/91

No  IF NO, THEN INELIGIBLE TO RECEIVE CITY FUNDING

Federal Identification Number: 33-0461804 State Identification Number: C1681922

PRINT OUT AND ATTACH TO THIS APPLICATION VERIFICATION FROM FEDERAL (IRS) AND STATE (FTB) AS FOLLOWS:

- Attach IRS Deductibility Status using this link: <http://apps.irs.gov/app/eos/>
- Attach State Entity Status Letter using this link:  
[https://www.ftb.ca.gov/online/self\\_serve\\_entity\\_status\\_letter/index.asp](https://www.ftb.ca.gov/online/self_serve_entity_status_letter/index.asp)
- Attach first page only of most recent IRS Form 990 or attach print out of detailed info about your charity found on this State Registry's Search Tool: <http://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?

No  Yes  IF YES, BRIEFLY DESCRIBE:

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

No  Yes  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

**MISSION STATEMENT OF ORGANIZATION**

BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION/GOALS AND OBJECTIVES.

The mission of Habitat for Humanity Inland Valley, in partnership with God, is to facilitate the dream of homeownership as well as improve the living conditions for those in the community.

**FINANCIAL STATEMENTS**

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 UPON REQUEST TO DEMONSTRATE SOUND FINANCIAL MANAGEMENT. DO NOT SUBMIT NOW.



**FUNDING SOURCES**

**CITY OF TEMECULA**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM THE CITY FOR ANY PROGRAM? No  Yes  IF YES, PROVIDE BELOW.

NAME OF PROGRAM/PROJECT FUNDED BY THE CITY GRANT OR SPONSORSHIP	AMOUNT	MONTH + YEAR FUNDING RECEIVED	NAME OF CITY GRANT OR SPONSORSHIP
Critical Home Repair Program	\$ 50,000	20/21	CDBG
Critical Home Repair Program	\$ 52,662.72	21/22	CDBG
A Brush with Kindness	\$ 5,000	21/22	CSF
Critical Home Repair Program	\$ 49,724	22/23	CDBG
Temecula Home Repair Program	\$ 500,000	22/24	Covid19 Reinvest
	\$		
	\$		
	\$		

**OTHER OUTSIDE SOURCES**—SINCE MARCH OF 2020, HAS THIS ORGANIZATION RECEIVED (OR IS CONCURRENTLY REQUESTING) ANY OTHER SOURCES OF FUNDING FROM ENTITIES (NOT INCLUDING THE CITY) **FOR THE SAME PROJECT/PROGRAM IN THIS APPLICATION?**

No  Yes  IF YES, PROVIDE INFORMATION IN TABLE BELOW.

AMOUNT RECEIVED	NAME OF ENTITY	MONTH + YEAR FUNDING RECEIVED
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		

**GRANT PROJECT/PROGRAM DESCRIPTION**

IMPORTANT - RECEIPTS/INVOICES IS REQUIRED TO BE SUBMITTED TO THE CITY TO VALIDATE THE ORGANIZATION SPENT GRANT FUNDING AWARDED BY THE CITY TO SUPPORT THE PROJECT/PROGRAM AS DESCRIBED HERE

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

The Temecula Real Estate and Education Center will provide resources, training and home buyer counseling services to help Temecula residents with affordable homeownership. Homebuyer orientations, resource fairs, financial literacy and Healthy Homes workshops will provide educational support to empower residents towards homeownership and preserving home affordability. 1:1 home buyer counseling will guide qualified clients through the complicated affordable home buying process with licensed real estate support and advocacy while also utilizing other available collaborative resources like downpayment assistance.

**2 DESCRIBE HOW THE ORGANIZATION WILL SPEND THE GRANT FUNDING, IF AWARDED.**

ALSO, INCLUDE A LIST OF GOODS, EQUIPEMENT, AND/OR SERVICES THIS ORGANIZATION HAS PURCHASED OR PLANS TO PURCHASE WITH AWARDED FUNDS TO SUPPORT THIS PROGRAM/PROJECT.

Habitat IV will spend the grant funding on launching and supporting the Temecula Real Estate and Education Center. Funds will be spent on facility costs to house the Center, including expenses related to securing space including rent, utilities, liability insurance, etc. Funds will also be spent on classroom supplies and materials for the workshops, including tables and chairs, minor improvements like shelving and partitions for the educational space, and marketing materials and signage for the Center and resource fairs.

**3 TEMECULA RESIDENTS MUST BENEFIT FROM THIS PROGRAM/PROJECT IF AWARDED CITY FUNDING. EXPLAIN HOW THIS GRANT FUNDING SPECIFICALLY BENEFITS TEMECULA RESIDENTS.**

This program will be provided to Temecula residents at the Real Estate and Education Center in Temecula and at community events or sites throughout the City. While any resident is welcome to attend and participate, we expect that most will be low-to-moderate income residents working towards affordable homeownership and struggling to navigate the complicated affordable home buying process, such as layering multiple sources of assistance towards their purchase.

3b ESTIMATED NUMBER OF PEOPLE FROM TEMECULA EXPECTED TO BENEFIT FROM THIS PROJECT/PROGRAM:	371
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3c ESTIMATED NUMBER OF VOLUNTEERS INVOLVED IN THIS PROJECT/PROGRAM:	5
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**PROJECT/PROGRAM DESCRIPTION**  
**CONTINUED**

4 SUMMARY STATEMENT – SUMMARIZE ANSWERS 1 – 3 ABOVE IN 50 WORDS OR LESS.

The Temecula Real Estate and Education Center will provide home-buyer orientations, resource fairs, financial literacy and Healthy Homes workshops, and counseling to empower residents towards home affordability.

1:1 counseling will guide participants through the complicated affordable home buying process with licensed real-estate support while utilizing collaborative resources like down-payment assistance.

5 IF APPLYING FOR MORE THAN \$5,000, PLEASE EXPLAIN HOW THE COVID-19 PANDEMIC AFFECTED THIS NONPROFIT ORGANIZATION'S ABILITY TO SERVE THE TEMECULA COMMUNITY. YOU MAY ALSO INCLUDE INFLATIONARY CONCERNS.

COVID-19 impacted our ReStores, which provide a substantial source of revenue used to support and launch programs.

The pandemic and historic inflation also significantly impacted the rising cost of housing, driving affordable homeownership even farther away for many residents.

The launch of the Temecula Real Estate and Education Center is part of a broader affordable homeownership solution as we collaborate with other agencies and advocate for residents by combining resources, along with Habitat IV support, to impact the affordable homeownership crisis.

6 IF APPLYING FOR MORE THAN \$5,000, EXPLAIN HOW FUNDS HAVE OR WILL:  
(1) CREATE NEW PROJECT/PROGRAM, (2) EXPAND EXISTING PROJECT/PROGRAM,  
AND/OR (3) CONTINUE EXISTING PROJECT/PROGRAM.

1) This funding would launch the Temecula Real Estate and Education Center by providing funds for facilities along with classroom materials, supplies, and marketing/signage.

<b>PROJECT/PROGRAM BUDGET (do not fill in shaded areas)</b>			
<b>LINE ITEMS FOR PROJECT/PROGRAM</b>		<b>REVENUES</b>	<b>EXPENSES</b>
<b>LIST REVENUES/INCOME FOR PROJECT/PROGRAM</b>			
Amount of money requested from this City of Temecula Community Services Grant (Not to exceed \$50,000)		\$ 44,094	
Amount contributed to the Project/Program by the Applicant Organization		\$	
Other grants or funding already awarded for Project/Program, if any		\$	
In-Kind match amount or volunteer credit hours estimated amount		\$	
<b>TOTAL REVENUE</b>		<b>\$ 44,094</b>	
<b>LIST OF EXPENSES FOR PROJECT/PROGRAM</b>			
Tools/Equipment			\$
Facilities/Rent/Insurance	Facility expenses: Rent, insurance, utilities, landscaping, shelving/partitions, POA dues, etc		\$ 28,944
Supplies	Classroom materials and supplies including printed materials		\$ 7,650
Marketing	Signage and marketing materials		\$ 7,500
Services			\$
Food			\$
Other			\$
Staffing Expense	THIS IS INELIGIBLE TO BE FUNDED BY CITY'S GRANT; HOWEVER PLEASE INCLUDE.		\$
<b>TOTAL EXPENSES</b>			<b>\$ 44,094</b>
<b>TOTAL BUDGET</b>		<b>\$ 44,094</b>	<b>\$ 44,094</b>

**PREVIOUS\* FISCAL YEAR (FY) 2021-2022 COMPLIANCE REPORT**

\*IF YOUR ORGANIZATION WAS NOT AWARDED A COMMUNITY SERVICE FUNDING GRANT IN FY 21/22 (LAST YEAR), THEN SKIP THIS PAGE.

If your organization was awarded a Community Service Funding Grant in FY 2021-2022 (last year) by the City of Temecula, please submit this information.

If your organization was awarded a Community Service Funding Grant in Fiscal Year 2021-2022 by the City of Temecula, all grant funds received must have been expended anytime on or between July 1, 2021, and June 30, 2022. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any future funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent.

If the funds were not spent in accordance with the approved/awarded application, the organization will be required to return the amount of funds to the City. To substantiate that Fiscal Year 2021-2022 funds received from the City were spent appropriately, proper back-up documentation including the completed table below with accompanying receipts/invoices, must be submitted to the City on or before due date: **September 12, 2022.**

1. Fill out table below (make additional copies if needed to explain all expenditures.)
2. Attach copies of receipts/invoices (in the same order as listed in this table.)
3. Send to: City of Temecula, 41000 Main St., Temecula, CA 92590 Attn: City Manager's Office – CSF

**EXPENDITURE REPORT due on or before September 12, 2022**

Organization: Habitat for Humanity Inland Valley Name of Project/Program: A Brush with Kindness

FY 2021-2022 Amount of CSF Grant Fund Awarded: \$ 5000 Month & Year CSF Grant Received from City: 2021-2022

Number of Beneficiaries Living in 92590, 92591, 92592 that Directly Benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number): 31

Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN JULY 1, 2021 - JUNE 30, 2022</small>	Expenditure		
			Amount	Description <small>DESCRIBE THE EXPENDITURE</small>	Purpose <small>PURPOSE OF EXPENDITURE</small>
1	See attached spreadsheet		\$		
2			\$		
3			\$		
4			\$		
5			\$		
6			\$		

**EXPENDITURE TOTAL \$5,105** EXPENDITURE TOTAL MUST BE EQUAL TO (OR GREATER) THAN TOTAL AWARD AMOUNT.

**FISCAL YEAR (FY) 2022-2023 COMPLIANCE REPORT**

**If your organization is awarded a Community Service Funding - REINVESTMENT IN TEMECULA Grant in FY2022-2023 by the City of Temecula, follow these instructions.**

If your organization is awarded a Community Service Funding Grant - REINVESTMENT IN TEMECULA in FY2022-2023 by the City of Temecula, all grant funds received must be expended anytime on or between March 20, 2020 and June 30, 2024. In addition, all grant funds must be substantiated with proper back-up documentation. Failure to provide proper documentation may jeopardize any funding. City of Temecula reserves the right to conduct an audit and/or require additional back-up information to substantiate how funds received from the City were spent. If the funds are not spent in accordance with the approved/awarded application, the organization may not receive and/or will be required to return said amount of funds to the City. To substantiate that grant funds from the City are spent appropriately, proper back-up documentation including the table below with accompanying receipts/invoices, must be submitted to the City as outlined on this page.

**1. Fill out Expenditure Report table below. Make additional copies if needed to explain all expenditures.**

**A. If awarded \$5,000.** Submit the following Expenditure Report within 60 days after spending \$5,000 no later than June 30, 2024, to demonstrate grant funds were spent in accordance with the Application. [If you were awarded less than \$5,000, submit Expenditure Report for that amount.]

**B. If awarded grant funds exceeding \$5,000.** A) Follow #1.A above first. B) To receive grant funds exceeding \$5,000 (between \$5K-\$50K), submit the following Expenditure Report to be *reimbursed* for the remaining balance of award to demonstrate funds were spent in accordance with the Application. This report can be submitted in \$10,000 increments (but no less than \$10,000 unless the remaining grant award funding amount is less than \$10K). This report must be submitted to the City no later than June 30, 2024 to receive remaining grant funds.

**2. Attach copies of receipts/invoices (in the same order listed in table below).**

**3. Send to:** City of Temecula, 41000 Main St., Temecula, CA 92590,  
Attn: City Manager's Dept. "CSF-Reinvestment in Temecula"

EXPENDITURE REPORT DATED _____					
Organization: <u>Habitat for Humanity</u> <u>Inland Valley</u>			Name of Project/Program: <u>Temecula Real Estate and Education Center</u>		
TOTAL FY 2022-2023			Month & Year FIRST \$5,000 check		
Amount of Grant Fund Awarded: \$ _____			was received from City: _____		
1. Is this Expenditure Report is to provide documentation for first \$5,000 awarded and received? Yes <input type="checkbox"/> or No <input type="checkbox"/> (already submitted).					
2. My organization has already received \$ _____ of the total FY 2022-23 Grant Fund awarded by the City					
3. Is this Expenditure Report is submitted to request reimbursement of funds? No <input type="checkbox"/> or Yes <input type="checkbox"/> If yes, Amount of Request \$ _____.					
Number of beneficiaries living in 92590, 92591, 92592 that directly benefitted from this Program/Project (approximate number of beneficiaries if you do not have precise number) _____					
Attachment Number	Name of Company on Receipt or Invoice	Date on Receipt/Invoice <small>MUST BE ON OR BETWEEN March 20, 2020 - JUNE 30, 2024</small>	Expenditure <small>MUST SUPPORT PROJECT/PROGRAM IN APPLICATION &amp; AWARD LETTER</small>		
			Amount	Description	Purpose
1			\$		
2			\$		
3			\$		
<b>EXPENDITURE TOTAL</b>			<b>\$</b>	<b>EXPENDITURE TOTAL</b>	

**ACKNOWLEDGEMENT/SIGNATURE PAGE**

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 an award letter signature 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 last year, then compliance receipts must be submitted on or before this application's due date or this application may be rejected as incomplete.

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

**ORGANIZATION NAME:** Habitat for Humanity Inland Valley

**MAILING ADDRESS:** 27475 Ynez Rd #390 **PHONE:** (951) 296-3362  
Temecula, CA 92591 **EMAIL:** mary@habitativ.org

**PRESIDENT / AUTHORIZED OFFICER:** Tammy Marine, Executive Director

**SIGNATURE:**  **DATE:** 9/9/22  
PRINT NAME TITLE MONTH, DAY, YEAR

**IF DIFFERENT THAN ABOVE APPLICATION PREPARED BY:** Mary Stein, Associate Director  
PRINT NAME TITLE

**SUBMIT ORIGINAL APPLICATION BY MONDAY, SEPTEMBER 12, 2022, TO:**

City of Temecula  
Community Service Funding  
Attn: City Manager's Office  
41000 MAIN STREET  
TEMECULA, CA 92590

Questions: Stacey.Brown@TemeculaCA.gov (951) 694-6413  
Betsy.Lowrey@TemeculaCA.gov (951) 693-3959



*Help build it!*

September 29, 2015

Inland Valley HFH  
27475 Ynez Rd #390  
Temecula, CA 92591-4612

**RE: 501(c)(3) Letter for Inland Valley HFH, Partner ID# 1101-5322**

Dear Affiliate Leader:

This letter will confirm that Inland Valley HFH, with employer identification number 33-0461804, is considered a subordinate under the group tax exemption umbrella of Habitat for Humanity International, Inc. ("HFHI") under Section 501(c)(3) of the Internal Revenue Code.

The group exemption number assigned to HFHI by the IRS is 8545. This number may be provided to prospective donors, foundations and other grant organizations as they request it and is required on certain IRS forms.

Enclosed is a copy of the determination letter dated March 9, 2015, provided by the IRS as evidence of HFHI's tax exempt status as well as its group exemption. The determination letter, together with this letter, confirms Inland Valley HFH's subordinate status and provides evidence of its tax exempt status under Section 501(c)(3) of the Code.

In partnership,

**Beverly Huffman**

Director, US/Canadian Support Services Center

Habitat for Humanity International 877-434-4435

[USSupportCenter@habitat.org](mailto:USSupportCenter@habitat.org) · [habitat.org](http://habitat.org) | **Habitat. We build.**

Enclosure





OGDEN UT 84201-0029

In reply refer to: 4077550277  
Mar. 09, 2015 LTR 4167C 0  
91-1914868 000000 00

00040704  
BODC: TE

HABITAT FOR HUMANITY INTERNATIONAL  
INC  
HABITAT FOR HUMANITY INTRNL PARENT  
% EDWARD K QUIBELL - CFO/SR VP  
121 HABITAT ST  
AMERICUS GA 31709-3423



052913

Employer Identification Number: 91-1914868  
Group Exemption Number: 8545  
Person to Contact: Ms Benjamin  
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Jan. 20, 2015, request for information about your tax-exempt status.

Our records indicate that you were issued a determination letter in January 1987, and that you are currently exempt under section 501(c)(3) of the Internal Revenue Code.

Based on the information supplied, we recognized the subordinates named on the list you submitted as exempt from Federal income tax under section 501(c)(3) of the Code.

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.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Tamera Ripperda  
Director, Exempt Organizations

## **IRS Group Exemption FAQs**

### **The IRS refers to “central” or “parent” organizations, as well as “subordinate” organizations? What does these terms mean?**

An organization that has been granted a 501(c)(3) group exemption by the IRS is referred to as the central or parent organization. The central organization generally supervises many affiliates or chapters, called subordinate organizations. The subordinate organizations have similar structures, purposes, missions and activities.

- ❖ In Habitat’s case, HFHI is the central organization and each Affiliate is a subordinate organization.

### **What is the reason for group exemptions vs individual exemptions?**

Group exemptions are an administrative convenience for both the IRS and organizations with many affiliated organizations. Subordinates in a group exemption do not have to file, and the IRS does not have to process, separate applications for exemption. Instead, the IRS allows the central organization to include its subordinate organizations under its tax exempt “umbrella.”

- ❖ Group exemptions are more convenient because only one central organization (HFHI) needs to be checked for tax exempt status.

### **Who determines if a subordinate organization may be included under the central organizations’ group exemption?**

The central organization, not the IRS, determines who is exempt under its 501(c)(3) umbrella. The IRS does not approve or deny a subordinate’s inclusion on HFHI’s roster of exempt subordinates. It is solely at the discretion of the central organization holding the 501(c)(3) designation as long as the subordinate is similar in mission, purpose, structure and activities. The IRS leaves it up to the central organization to police its own list of subordinate entities and to report any changes. Failure to monitor the list in accordance with the rules set forth by the IRS may result in the central organization having its 501(c)(3) status revoked.

- ❖ HFHI is the final determiner of whether Affiliates are on its group exempt list. The IRS will not issue a letter with regard to an individual Affiliate.

**How does a donor verify that an organization is included as a subordinate in a group exemption ruling?**

The central organization which holds the group exemption (rather than the IRS) determines which organizations are included as subordinates under its group exemption umbrella. Therefore, a donor should verify that an organization is a subordinate eligible to receive tax deductible donations by requesting a copy of a letter provided by the central organization to the subordinate confirming the subordinate entity's inclusion on its roster of exempt subordinates. This letter, coupled with a copy of the central organizations 501(c)(3) determination letter provides adequate proof of the entity's tax exempt status.

❖ Affiliate should provide donors a copy of the confirmation letter (with the HFHI IRS determination letter attached) that HFHI provides to each Affiliate on an annual basis.

❖ Donors should be told that the IRS determination letter will not reference the Affiliate by name.

**How do donors verify that contributions are deductible with respect to a subordinate organization in a section 501(c)(3) group exemption ruling?**

Many donors are accustomed to consulting the IRS database known as EOS Select Check to confirm that donations to a specific organization are tax deductible. This works well for organizations that have an individual tax exemption; however, it creates a bit of confusion when it comes to organizations with a group tax exemption status.

The EOS Select Check database does NOT list all subordinate entities. It lists the central organization because the central organization is the entity that applied for, and was granted, a 501(c)(3) designation. Many times donors become alarmed when they do not see the individual Affiliate listed in the database. It is important to explain to your donor that providing HFHI's group exemption number (GEN) along with a confirmation letter from HFHI, as the central organization, is sufficient proof of the subordinate entity's tax exempt status. Donors may rely upon central organization verification with respect to deductibility of contributions to subordinates covered in a section 501(c)(3) group exemption ruling.

❖ Explain to your donors early the procedure so that they will not be surprised when the Affiliate is not referenced on the EOS database.

## **Employer Identification Number (EIN) vs Group Exemption Number (GEN)**

The Employer Identification Number (EIN) is a nine-digit number that is unique to each business and generally appears in the following format: XX-XXXXXXX. Its role for a business is similar to that of the Social Security number for an individual. The number includes information about which state the corporation is registered in. This unique identification number is assigned to a business entity so that they can easily be identified by the Internal Revenue Service. The EIN is also known as a Federal Identification Number (FIN) or Tax ID.

This number is apart and separate from a company's group exemption number (GEN). The EIN identifies the specific organization. The GEN identifies the entity's further designation as a tax exempt organization.

The GEN number is a number assigned by the IRS which identifies the central organization who was granted the group exemption. The GEN number is a 4 digit number that should be supplied to donors when they make a donation. This number allows the donor to make a tax deduction based on the donation to the tax exempt entity.

- HFHI's GEN is 8545. This should be given to your donors.
- Do not use HFHI's EIN in your Affiliate's tax return and other documents. This will cause the IRS to confuse your Affiliate with HFHI (including accidentally holding you responsible HFHI's payroll taxes, misreporting on Form 990, etc.)

❖ HFHI's GEN is 8545. This should be given to your donors.

❖ Do not use HFHI's EIN in your Affiliate's tax return and other documents. This will cause the IRS to confuse your Affiliate with HFHI (including accidentally holding you responsible HFHI's payroll taxes, misreporting on Form 990, etc.)



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

## Entity Status Letter

Date: 7/14/2022

ESL ID: 8461025921

### 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: 1681922

Entity Name: HABITAT FOR HUMANITY INLAND VALLEY, 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](http://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)



HOME ABOUT MEDIA CAREERS REGULATIONS RESOURCES PROGRAMS CONTACT

## Registrant Details

**Entity type:** Corporate Class as registered with the Secretary of State or based on founding & registration documents.

**Organization Name:** HABITAT FOR HUMANITY INLAND VALLEY, INC. **IRS FEIN:** 330461804  
**Entity Type:** Public Benefit **SOS/FTB Corporate/Organization Number:** 1681922

**Registry Status:** Current **Renewal Due/Exp. Date:** 11/15/2022  
**RCT Registration Number:** 081196 **Issue Date:** 6/30/2006  
**Record Type:** Charity Registration **Effective Date:** 6/30/2006  
**Date of Last Renewal:** **DBA:**

## Mailing Address

**Street:** 41615 WINCHESTER RD #214  
**Street Line 2:**  
**City, State Zip:** TEMECULA CA 92590

## Filings & Correspondence

<a href="#">CT-550 2010</a>	CT-550 2010
<a href="#">RRF-1 2010</a>	2010 RRF-1
<a href="#">RRF-1 2011</a>	2011 RRF-1
<a href="#">RRF-1 2012</a>	2012 RRF-1
<a href="#">IRS Form 990 2012</a>	2012 IRS Form 990
<a href="#">IRS Form 990 2010</a>	2010 IRS Form 990
<a href="#">Founding Documents</a>	Founding Documents
<a href="#">RRF-1 2009</a>	2009 RRF-1
<a href="#">IRS Form 990 2009</a>	2009 IRS Form 990
<a href="#">RRF-1 2008</a>	2008 RRF-1
<a href="#">IRS Form 990 2008</a>	2008 IRS Form 990
<a href="#">RRF-1 2007</a>	2007 RRF-1
<a href="#">IRS Form 990 2007</a>	2007 IRS Form 990
<a href="#">RRF-1 2006</a>	2006 RRF-1
<a href="#">IRS Form 990 2006</a>	2006 IRS Form 990
<a href="#">RRF-1 2005</a>	2005 RRF-1
<a href="#">IRS Form 990 2005</a>	2005 IRS Form 990
<a href="#">RRF-1 2004</a>	2004 RRF-1
<a href="#">RRF-1 2003</a>	2003 RRF-1
<a href="#">IRS Form 990 2003</a>	2003 IRS Form 990
<a href="#">RRF-1 2002</a>	2002 RRF-1
<a href="#">IRS Form 990 2002</a>	2002 IRS Form 990
<a href="#">RRF-1 2000</a>	2000 RRF-1
<a href="#">1st Delinquency Notice</a>	1st Delinquency Notice

<u>Renewal Filing</u>	2017
<u>Renewal Filing</u>	2020
<u>RRF-1 2013</u>	2013 RRF-1
<u>IRS Form 990 2013</u>	2013 IRS Form 990
<u>RRF-1 2011</u>	2011 RRF-1
<u>IRS Form 990 2011</u>	2011 IRS Form 990
<u>RRF-1 2014</u>	2014 RRF-1
<u>IRS Form 990 2014</u>	2014 IRS Form 990
<u>2015 RRF-1</u>	2015 RRF-1
<u>2015 IRS Form 990</u>	2015 IRS Form 990
<u>2016 Form RRF-1</u>	2016 Form RRF-1
<u>2016 IRS Form 990 Series</u>	2016 IRS Form 990 Series
<u>Renewal Filing</u>	2018
<u>Renewal Filing</u>	2019
<u>IRS Form 990 Series</u>	2021

## Annual Renewal Data

<b>Status of Filing:</b>	Accepted
<b>Accounting Period Begin Date:</b>	7/1/2009
<b>Accounting Period End Date:</b>	6/30/2010
<b>Filing Received Date:</b>	9/17/2012
<b>Form RRF-1 Reject/Incomplete Reason:</b>	
<b>Form CT-TR-1 Reject/Incomplete Reason:</b>	
<b>IRS Form 990 Reject/Incomplete Reason:</b>	
<b>Notes From Registry Staff:</b>	
<b>Status of Filing:</b>	Accepted
<b>Accounting Period Begin Date:</b>	7/1/2010
<b>Accounting Period End Date:</b>	6/30/2011
<b>Filing Received Date:</b>	7/16/2012
<b>Form RRF-1 Reject/Incomplete Reason:</b>	
<b>Form CT-TR-1 Reject/Incomplete Reason:</b>	
<b>IRS Form 990 Reject/Incomplete Reason:</b>	
<b>Notes From Registry Staff:</b>	
<b>Status of Filing:</b>	Accepted
<b>Accounting Period Begin Date:</b>	7/1/2011
<b>Accounting Period End Date:</b>	6/30/2012
<b>Filing Received Date:</b>	11/19/2012
<b>Form RRF-1 Reject/Incomplete Reason:</b>	
<b>Form CT-TR-1 Reject/Incomplete Reason:</b>	
<b>IRS Form 990 Reject/Incomplete Reason:</b>	
<b>Notes From Registry Staff:</b>	
<b>Status of Filing:</b>	Accepted
<b>Accounting Period Begin Date:</b>	7/1/2012
<b>Accounting Period End Date:</b>	6/30/2013
<b>Filing Received Date:</b>	2/20/2014
<b>Form RRF-1 Reject/Incomplete Reason:</b>	
<b>Form CT-TR-1 Reject/Incomplete Reason:</b>	
<b>IRS Form 990 Reject/Incomplete Reason:</b>	
<b>Notes From Registry Staff:</b>	
<b>Status of Filing:</b>	Accepted
<b>Accounting Period Begin Date:</b>	7/1/2013
<b>Accounting Period End Date:</b>	6/30/2014
<b>Filing Received Date:</b>	12/23/2014

Form RRF-1 Reject/Incomplete Reason:  
Form CT-TR-1 Reject/Incomplete Reason:  
IRS Form 990 Reject/Incomplete Reason:  
Notes From Registry Staff:

Status of Filing: Accepted  
Accounting Period Begin Date: 7/1/2014  
Accounting Period End Date: 6/30/2015  
Filing Received Date: 4/25/2016

Form RRF-1 Reject/Incomplete Reason:  
Form CT-TR-1 Reject/Incomplete Reason:  
IRS Form 990 Reject/Incomplete Reason:  
Notes From Registry Staff:

Status of Filing: Accepted  
Accounting Period Begin Date: 7/1/2015  
Accounting Period End Date: 6/30/2016  
Filing Received Date: 5/23/2017

Form RRF-1 Reject/Incomplete Reason:  
Form CT-TR-1 Reject/Incomplete Reason:  
IRS Form 990 Reject/Incomplete Reason:  
Notes From Registry Staff:

Status of Filing: Accepted  
Accounting Period Begin Date: 7/1/2016  
Accounting Period End Date: 6/30/2017  
Filing Received Date: 5/21/2018

Form RRF-1 Reject/Incomplete Reason:  
Form CT-TR-1 Reject/Incomplete Reason:  
IRS Form 990 Reject/Incomplete Reason:  
Notes From Registry Staff:

Status of Filing: Accepted  
Accounting Period Begin Date: 7/1/2017  
Accounting Period End Date: 6/30/2018  
Filing Received Date: 5/20/2019

Form RRF-1 Reject/Incomplete Reason:  
Form CT-TR-1 Reject/Incomplete Reason:  
IRS Form 990 Reject/Incomplete Reason:  
Notes From Registry Staff:

Status of Filing: Accepted  
Accounting Period Begin Date: 7/1/2018  
Accounting Period End Date: 6/30/2019  
Filing Received Date: 5/18/2020

Form RRF-1 Reject/Incomplete Reason:  
Form CT-TR-1 Reject/Incomplete Reason:  
IRS Form 990 Reject/Incomplete Reason:  
Notes From Registry Staff:

Status of Filing: Accepted  
Accounting Period Begin Date: 7/1/2019  
Accounting Period End Date: 6/30/2020  
Filing Received Date: 5/25/2021

Form RRF-1 Reject/Incomplete Reason:  
Form CT-TR-1 Reject/Incomplete Reason:  
IRS Form 990 Reject/Incomplete Reason:  
Notes From Registry Staff:

Status of Filing: Accepted  
Accounting Period Begin Date: 7/1/2020  
Accounting Period End Date: 6/30/2021  
Filing Received Date: 5/20/2022  
Form RRF-1 Reject/Incomplete Reason: Resubmission/Correction Accepted  
Form CT-TR-1 Reject/Incomplete Reason:



IRS Form 990 Reject/Incomplete Reason:

Notes From Registry Staff:

## Related Registrations & Event Reports

The related records shown below depend on the record type being viewed:

- Charity Registrations relate to Professional Fundraising Events which relate to Professional Fundraiser Registrations.
- Raffle Registrations relate to Raffle Reports.
- Click on the **RCT Registration No** to navigate to the related record.

<b>Prereq Type:</b>	Prerequisite	<b>Relationship:</b>	Charity		
<b>Registrant:</b>	BEYOND DIRECT MARKETING LLC				
<b>Registration No:</b>	<a href="#">E0019193</a>	<b>Registration Type:</b>	Fundraising Event	<b>Registration Status:</b>	Complete
<b>Date Established:</b>	1/23/2014	<b>Association Date:</b>	1/1/2014	<b>Expiration Date:</b>	12/31/2014
<b>Prereq Type:</b>	Prerequisite	<b>Relationship:</b>	Charity		
<b>Registrant:</b>	BEYOND DIRECT MARKETING LLC				
<b>Registration No:</b>	<a href="#">E0022449</a>	<b>Registration Type:</b>	Fundraising Event	<b>Registration Status:</b>	Complete
<b>Date Established:</b>	1/20/2015	<b>Association Date:</b>	1/1/2015	<b>Expiration Date:</b>	12/31/2015

Form **990**

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2020**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**A** For the 2020 calendar year, or tax year beginning **JUL 1, 2020** and ending **JUN 30, 2021**

<b>B</b> Check if applicable:  Address change Name change Initial return Final return/terminated Amended return Application pending	<b>C</b> Name of organization <b>HABITAT FOR HUMANITY INLAND VALLEY, INC.</b>		<b>D</b> Employer identification number  <b>** - ***1804</b>
	Doing business as		<b>E</b> Telephone number <b>951-296-3362</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>4,572,741.</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>TEMECULA, CA 92590</b>		<b>H(a)</b> Is this a group return for subordinates? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <b>H(b)</b> Are all subordinates included? Yes <input type="checkbox"/> No <input type="checkbox"/> If "No," attach a list. See instructions
<b>F</b> Name and address of principal officer: <b>TAMARA MARINE SAME AS C ABOVE</b>			<b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527			
<b>J</b> Website: ▶ <b>WWW.HABITATIV.ORG</b>			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶			<b>L</b> Year of formation: <b>1992</b> <b>M</b> State of legal domicile: <b>CA</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>THE MISSION OF HABITAT FOR HUMANITY INLAND VALLEY, INC. IN PARTNERSHIP WITH GOD, IS TO</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>15</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>15</b>
	<b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	<b>54</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>725</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	331,397.	718,129.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,074,355.	523,207.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	799.	778.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,716,698.	3,261,255.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,123,249.	4,503,369.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	1,571,254.	1,694,805.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>85,418.</b>	0.	0.
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,521,583.	2,378,371.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,092,837.	4,073,176.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	30,412.	430,193.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	3,769,205.	3,491,798.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	1,676,224.	968,624.
		2,092,981.	2,523,174.

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer <b>CLIENT'S COPY</b>	Date			
	<b>TAMARA MARINE, EXECUTIVE DIRECTOR</b> Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>DANIEL P. SCHREIBER</b>	Preparer's signature <i>[Signature]</i>	Date <b>5/16/22</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P00089202</b>
	Firm's name ▶ <b>JGD &amp; ASSOCIATES LLP</b>	Firm's EIN ▶ <b>** - ***2551</b>		Phone no. <b>858-587-1000</b>	
Firm's address ▶ <b>9191 TOWNE CENTRE DRIVE #340 SAN DIEGO, CA 92122-1274</b>					

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

032001 12-23-20

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2020)

**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**