

# NEIGHBORHOOD REINVESTMENT PROGRAM GRANT APPLICATION INSTRUCTIONS

<https://www.sandiegocounty.gov/content/sdc/cao/edga/grants-office/NRP.html>

## ABOUT THE NEIGHBORHOOD REINVESTMENT PROGRAM

The Neighborhood Reinvestment Program provides grant funds to County departments, public agencies, and to non-profit organizations for one-time community, social, environmental, education, cultural or recreational needs. Board of Supervisors Policy B-72: Neighborhood Reinvestment Program governs the distribution of these funds and can be viewed [here](#). To apply for Neighborhood Reinvestment Program funding from the County, an applicant must submit a completed application form, a cover letter and submit a complete package to one or more of the five Supervisors (see Board Policy B-72 for criteria).

## ELIGIBILITY

### Who can apply?

**Only non-profit or government/public agencies (e.g., cities, school districts and fire protection districts) operating in San Diego County may apply.** Non-County government entities may apply to fund projects that benefit the community and enhance the region's quality of life. Non-profit entities must provide services in or more of the following areas:

- Educational/recreational projects for children and/or adults;
- Local business and tourism promotional activities;
- Arts and cultural programs;
- Environmental awareness programs or projects, including maintaining and increasing open space holdings;
- Public safety programs including fire protection; or
- Health and social service initiatives and programs.

Non-profit organization with gross receipts of <b>more than \$50,000</b>	Non-profit organization with gross receipts of less <b>than \$50,000</b>
<ul style="list-style-type: none"><li>• A copy of the IRS letter showing its current Tax Exempt/Non-profit status</li><li>• Pages 1 – 8 of its most recent IRS Form 990 <b>or</b> pages 1 – 3 of IRS form 990EZ.</li></ul>	<ul style="list-style-type: none"><li>• A copy of the IRS letter showing its current Tax Exempt/Non-profit status</li><li>• A copy of the most recent IRS Form 990N e-postcard</li></ul>

For additional information, **contact the IRS at 1-877-829-5500** or [www.irs.gov](http://www.irs.gov) and click on the Charities & Non-Profits tab.

## COVER LETTER

The cover letter must include the following information:

- A brief description/history of the organization and the project for which funds are requested;
- A cost estimate for the project;
- A statement regarding whether any Neighborhood Reinvestment Program grant applications have been submitted to other Supervisorial District Offices for this or any other project and whether your

## NEIGHBORHOOD REINVESTMENT PROGRAM GRANT APPLICATION INSTRUCTIONS

organization has an active application for a Community Enhancement Program grant. If so, briefly describe each one and indicate the amount requested;

- Statement that the organization agrees to spend any funds that may be awarded for the projected within 12 months of the grant award;
- Any prior County funding from the Neighborhood Reinvestment Program, Community Enhancement Program or Community Enhancement American Rescue Plan Act (ARPA) received by the organization for any project within the past three years;
- A description of not less than one sentence for each previously funded project including the amount received, and the date of the grant award.

The cover letter should be addressed to the Supervisorial District office from which funding is requested. If a request is made to more than one office, a separate application must be submitted to **each** office.

### ADDITIONAL ELIGIBILITY CRITERIA (Application Form, Page 1)

Non-profit organizations must be registered and in good standing with the California Attorney General (AG) AND that they are eligible to conduct business in the State of California as defined by the California Secretary of State (SOS). Specific details for these eligibility criteria are outlined and highlighted below.

Prior to completing an application, non-profit organizations will need to ensure they are eligible to apply. Eligible applicants must be identified on the Charitable Organization Registry maintained by the California Attorney General (AG) as **CURRENT, EXEMPT**, or provide evidence that they are not required to register or are in process of being registered. In addition, eligible applicants must have a status of **ACTIVE** with the California Secretary of State or otherwise show that they are authorized to conduct business in the State.

To prove eligibility, non-profit entities must do the following:

- **California Attorney General:** In accordance with the Supervision of Trustees and Fundraisers for Charitable Purposes Act, Government Code 12580 et seq., most non-profit organizations are required to register with the California Attorney General before soliciting funds. Information regarding the registration process, including the status of already registered charities, is available on the California Attorney General's website at <https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>. Please provide a copy of the screen shot from the Registry Verification Search Tool on the California Attorney General's website showing a **CURRENT** or **EXEMPT** status or other evidence of compliance with the State's charitable registration requirements managed by the Attorney General. Acceptable evidence includes the following documents (see Appendix for example):
  - Printed screenshot of Registry Verification showing **CURRENT** or **EXEMPT** status
  - Printed screenshot of paid Initial or Annual Registration
- **California Secretary of State:** In order to receive NRP Grant Program funds from the County, non-profit organizations are required to enter into a grant agreement with the County. To enter into a contract and conduct other business activities in the State, an organization must generally be identified as **ACTIVE** by the California Secretary of State and the status of registered organization is available on the Secretary of State's website at <https://bizfileonline.sos.ca.gov/search/business>. Please provide a copy of the screen shot from the Business Search on the California Secretary of State's website showing an **ACTIVE** status or other evidence of authority to conduct business in the State. Acceptable evidence includes the following documents (see Appendix for example):
  - Printed screen shot of California Secretary of State Business Search
  - Printed screen shot of payment/transaction at [sos.ca.gov](https://sos.ca.gov) to establish or renew **ACTIVE** status

## NEIGHBORHOOD REINVESTMENT PROGRAM GRANT APPLICATION INSTRUCTIONS

### ORGANIZATION INFORMATION (Application Form, Page 1)

**Federal Tax Identification Number (TIN)/Employer Identification number (EIN):** Enter the federal tax identification number as it appears in the IRS letter showing the organization's Tax Exempt/Non-profit status.

**Organization Name:** Enter the full **legal** name of the organization as registered with the California Secretary of State (i.e., typically what is identified by the Business Search on the Secretary of State's website).

**Street Address:** Enter the address of the Organization's primary place of business.

**Mailing Address:** Enter the address to which all correspondence will be sent or select "same as above."

**Popular Name or 'doing business as' (d.b.a.):** If funding is being requested for a program or sub-entity with the organization or if the organization is popularly known by a different name, enter that name on this line, e.g. Organization Name: Arts and Theatre Association d.b.a. Our Town Playhouse.

**Supervisory District:** Indicate the Supervisory District in which the organization is physically located. To ensure that the application is submitted to the correct Supervisory District office, go to the County of San Diego's website: [and enter the street address to determine the correct Supervisory District.](#)

**Title of Grant Request:** Provide a brief title that describes the project for which funding is sought.

**Contact Persons:** Enter the name of two individuals who will be responsible for overseeing the expenditure of the grant funds and who are authorized to sign the Neighborhood Reinvestment Program grant agreement on behalf of the organization. ***Provide copies of pertinent portions of the articles of Incorporation, articles of association or other governing documents establishing authority to sign the grant agreement.*** The **Contact Persons** must each complete a Levine Act Form. There are two copies of the form included with the application.

### PROPOSAL INFORMATION (Application Form, Pages 1 and 2)

**Project Location:** Identify the location of the project for which funds are requested.

Whenever possible, provide a street address for the project. For capital projects also identify the name of the person or entity that owns the project site, and the name of the person or entity who will be responsible for site/project maintenance once it is complete. Attach a copy of any agreements to maintain the site/project, as applicable, and any letter of commitment or agreements to proceed with the project from the site owner should grant funds be awarded, as applicable. Capital projects are defined as construction of new facilities (such as structures, playgrounds, ball fields, etc.) or repairs or improvements to existing facilities.

For events or other projects/programs that may not be site specific, provide a brief description of the area or community that will be served by the project/program for which funds are requested.

**Purpose of Grant:** Provide a brief description for the project for which funding is sought. If the request encompasses multiple needs, provide an itemized list of the components in priority order. A higher priority shall be given to requests for capital projects and other one-time expenses.

**Cost Estimate:** Attach verifiable cost estimates for the project.

## NEIGHBORHOOD REINVESTMENT PROGRAM GRANT APPLICATION INSTRUCTIONS

**Questions 1 and 2:** Provide clear, concise information in response to questions 1 and 2. This information will be used to help evaluate each proposal. Additional pages may be attached if needed to answer these questions.

### SUMMARY OF FINANCIAL INFORMATION

Provide the requested financial information for the organization as a whole, not just for the project or activity for which funding is requested.

This portion of the requests' summary budget data for two different periods (see column headings). Data provided in the "prior year actuals" column should be actual amounts. The "current year" column should reflect current year budgeted amounts, even if the organization uses a fiscal year time period that differs from the County's (July 1 – June 30). The financial data that is entered should reflect the organization's current fiscal year and immediate past fiscal year.

Report revenues in the following four categories:

- County Community Enhancement Program Grant
- County Community Enhancement Program Grant, American Rescue Plan Act (ARPA)
- County Neighborhood Reinvestment Program Grant
- City funding (specify the city)
- Other revenues (e.g. State, donations, and other grants)

Total revenues are then totaled on the form followed by an entry for total expenditures. The "Operating Surplus (Deficit)" is calculated as the difference between revenues and expenditures.

### RESOLUTION OF THE BOARD OF DIRECTORS (Application Form, Page 4)

Page 4 requires the signature, name and title of **ALL** individuals who are authorized to sign the grant agreement with the County of San Diego for Neighborhood Reinvestment Program funds for the 2024-2025 fiscal year. An **original** Resolution from the organization's Board of Directors authorizing the submittal of this funding request **must** be submitted with the application package.

### LEVINE ACT DISCLOSURE FORM (Application Form, Page 5)

The Levine Act requires applicants to disclose contributions made by their parties or agents. Complete the disclosure form in its entirety and submit with the application. The **Contact Persons** must each complete a Levine Act Form. There are two copies of the form included with the application.

## NEIGHBORHOOD REINVESTMENT PROGRAM GRANT APPLICATION INSTRUCTIONS

### APPLICATION SUBMISSION

**Submit by e-mail (preferred method):** E-mail the completed electronic application and all required items to the appropriate Supervisorial District Offices(s).

**Submit by USPS/in person:** Mail the completed application and all required items or hand deliver to:

ATTN: District (**NUMBER**) Neighborhood Reinvestment Program  
County of San Diego  
1600 Pacific Hwy, Room 335  
San Diego, CA 92101

Please note, if an application is submitted to more than one Supervisorial District Office, a separate electronic or hard copy of the completed application package must be sent to **each** office.

**Additional Questions:** Contact Board of Supervisors offices at:

- **District 1** – Supervisor Nora Vargas  
(619) 531-5511 [District1Grants@sdcounty.ca.gov](mailto:District1Grants@sdcounty.ca.gov)
- **District 2** – Supervisor Joel Anderson  
(619) 531-5522 [District2Grants@sdcounty.ca.gov](mailto:District2Grants@sdcounty.ca.gov)
- **District 3** – Supervisor Terra Lawson-Remer  
(619) 531-5533 [District3Grants@sdcounty.ca.gov](mailto:District3Grants@sdcounty.ca.gov)
- **District 4** – Supervisor Monica Montgomery Steppe  
(619) 531-5544 [District4Grants@sdcounty.ca.gov](mailto:District4Grants@sdcounty.ca.gov)
- **District 5** – Supervisor Jim Desmond  
(619) 531-5555 [District5Grants@sdcounty.ca.gov](mailto:District5Grants@sdcounty.ca.gov)

### APPLICATION CHECKLIST

**The complete application package must include the following:**

- 1. Cover Letter
- 2. The completed application
- 3. Any additional pages that may be needed in conjunction with project location information, cost estimates and to answer questions 1 and 2 on page 2
- 4. A copy of the IRS letter showing current Tax Exempt/Non-profit Status (not required for government/public agencies).
- 5. A copy of pages 1-8 of the most recent IRS form 990 or pages 1-3 of 990EZ. For organizations with gross receipts of less than \$50,000, attach IRS form 990N e-postcard (not required for government/public agencies).
- 6. Screen shots from the California Attorney General Charitable Registration Verification Tool and the Secretary of State Business Search websites showing the non-profit organizations are **CURRENT** or **EXEMPT** and **ACTIVE** or other evidence of compliance with Attorney General and Secretary of State registration requirements (not required for government/public agencies).
- 7. Copies of pertinent parts of articles of incorporation, articles of association or other governing documents identifying persons authorized to sign a Neighborhood Reinvestment Program grant agreement (not required for government/public agencies).
- 8. A complete and signed Levine Act disclosure form.

**NEIGHBORHOOD REINVESTMENT PROGRAM GRANT APPLICATION INSTRUCTIONS**

**APPENDIX**

**California Attorney General Proof of Eligibility**

**Current Status**

State of California  
Department of Justice



Office of the  
Attorney General

[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:	ALBION 12 FOUNDATION	IRS FEIN:	474630618
Entity Type:	Public Benefit	SOS/FTB Corporate/Organization Number:	3808265

<b>Registry Status:</b>	Current	<b>Renewal Due/Exp. Date:</b>	5/15/2023
RCT Registration Number:	CT0242750	Issue Date:	10/7/2016
Record Type:	Charity Registration	Effective Date:	10/7/2016
Date of Last Renewal:	10/20/2022	DBA:	

## Mailing Address

Street:	3555 ROSECRANS STREET, SUITE 114, #556
Street Line 2:	
City, State Zip:	SAN DIEGO CA 92110

## Filings & Correspondence

<a href="#">CT-453 Suspension</a>	Suspension Letter - VIA DE LA VALLE 208
<a href="#">CT-453 Suspension</a>	Suspension Letter - GARNET AVE 495
<a href="#">CT-551 Form RRF-1 Refund</a>	Return check letter
<a href="#">CT-551D Form RRF-1 Refund</a>	Return Check
<a href="#">Founding Documents</a>	Founding Documents
<a href="#">Confirmation of Registration Letter</a>	Confirmation of Registration Letter
<a href="#">Correspondence from Registry</a>	Cleared Intent to Suspend
<a href="#">Renewal Filing</a>	2021
<a href="#">Form RRF-1</a>	2020
<a href="#">CT-550 Form RRF-1 Incomplete</a>	2020
<a href="#">CT-550 Form RRF-1 Incomplete</a>	2020
<a href="#">Renewal Filing</a>	2020
<a href="#">Renewal Filing</a>	2019
<a href="#">Renewal Filing</a>	2018
<a href="#">Form RRF-1</a>	2017
<a href="#">Form RRF-1</a>	2016
<a href="#">Form RRF-1</a>	2015
<a href="#">CT-451 1st Delinquency Notice</a>	1st Delinquency Letter

## Annual Renewal Data

# NEIGHBORHOOD REINVESTMENT PROGRAM GRANT APPLICATION INSTRUCTIONS

## Exempt Status

State of California  
Department of Justice



Office of the  
Attorney General

[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>	UNIVERSITY OF CALIFORNIA SAN DIEGO	<b>IRS FEIN:</b>	956006144
<b>Entity Type:</b>	Public Benefit	<b>SOS/FTB Corporate/Organization Number:</b>	

<b>Registry Status:</b>	Exempt	<b>Renewal Due/Exp. Date:</b>	
<b>RCT Registration Number:</b>	CT0159030	<b>Issue Date:</b>	3/10/2010
<b>Record Type:</b>	Charity Registration	<b>Effective Date:</b>	3/10/2010
<b>Date of Last Renewal:</b>		<b>DBA:</b>	

### Mailing Address

<b>Street:</b>	9500 GILMAN DR
<b>Street Line 2:</b>	
<b>City, State Zip:</b>	LA JOLLA CA 92093

### Filings & Correspondence

No Related Documents

### Annual Renewal Data

No Annual Renewal Data

### 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.

## Secretary of State Proof of Eligibility

**ALBION 12 FOUNDATION**  
(3808265) ✕



Request Certificate

<i>Initial Filing Date</i>	07/16/2015
<i>Status</i>	Active
<i>Standing - SOS</i>	Good
<i>Standing - FTB</i>	Good
<i>Standing - Agent</i>	Good
<i>Standing - VCFCF</i>	Good
<i>Formed In</i>	CALIFORNIA
<i>Entity Type</i>	Nonprofit Corporation - CA - Public Benefit
<i>Principal Address</i>	3555 ROSECRANS STREET, SUITE 114, #556 SAN DIEGO, CA 92110
<i>Mailing Address</i>	3555 ROSECRANS STREET, SUITE 114, #556 SAN DIEGO, CA 92110
<i>Statement of Info Due Date</i>	07/31/2023
<i>Agent</i>	Individual CAROLINE MORRISON 514 VIA DE LA VALLE, SUITE 207 SOLANA BEACH, CA 92075



View History



Request Access