

Roseville Grants Advisory Commission Application Workshop

November 10, 2026

CITY OF ROSEVILLE CALIFORNIA

Workshop Goals

- OVERVIEW OF FUNDING
- ELIGIBILITY REQUIREMENTS
- TIMELINE, FUNDING PRIORITIES & COMMUNITY NEED AREAS
- ONLINE SUBMITTAL PROCESS
- APPLICATION QUESTIONS
- APPLICATION REQUIREMENT OVERVIEW
- SCORING RUBRIC & APPLICATION THRESHOLDS
- CLOSING REMARKS & Q&A

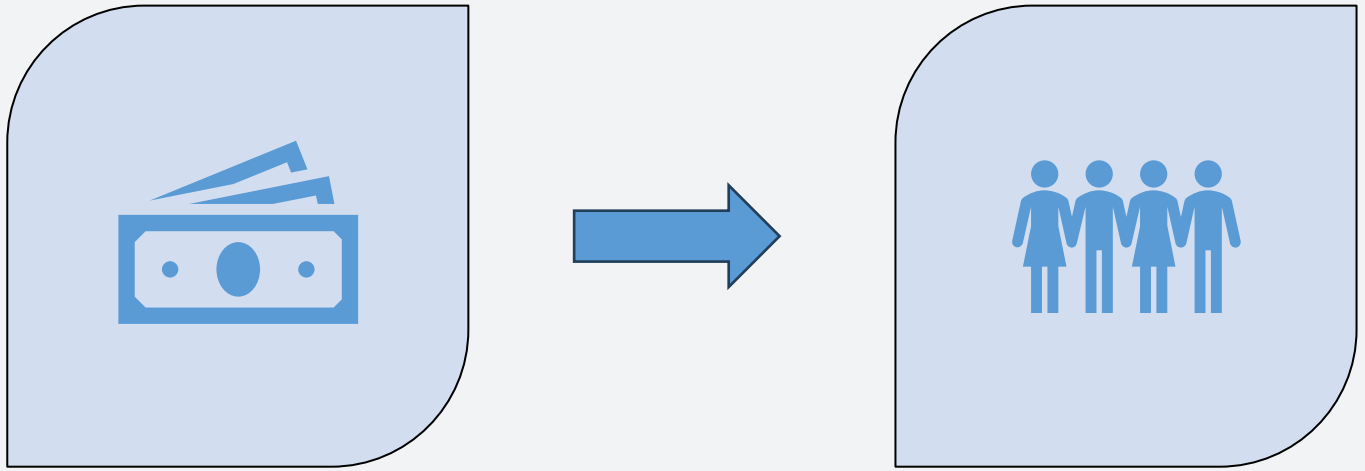
History of Citizens' Benefit Fund



Citizens' Benefit Fund	REACH Fund, ARPA & Roseville Auto Mall Community Fund	Total since 1994
$17,738,419	$1,607,169	$19,345,588

CITY OF ROSEVILLE CALIFORNIA

Funds Available



TOTAL FUNDS AVAILABLE

$321,905.00 WITH MAX AWARD OF $32,000

IMPROVE THE QUALITY OF LIFE FOR THE CITIZENS OF THE CITY OF ROSEVILLE

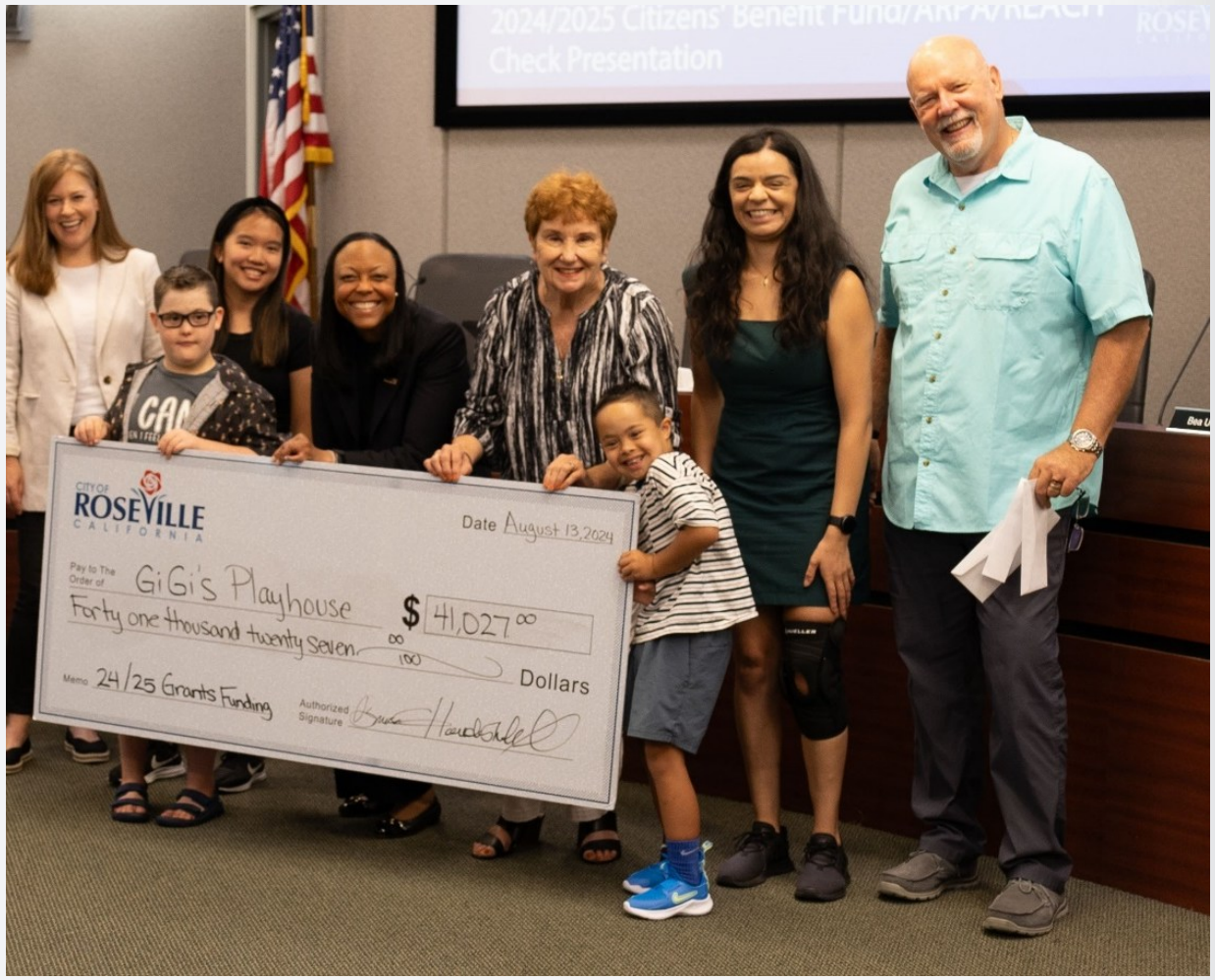
Grant Eligibility

Who Can Apply:

- 501(c)(3), 501(c)(4), including Private Schools/Organizations
- Applications directly from Private Schools are subject to certain limitations

Additional Requirements:

- Non-profits must have a current City of Roseville business license
- One application per site for
  - Private schools
  - School-based non-profit parent-teacher clubs
  - Booster clubs
  - Non-profit school-based programs



Timeline

December 1, 2026

- Grant application opened
- Link on website to ZoomGrants

February 1, 2027

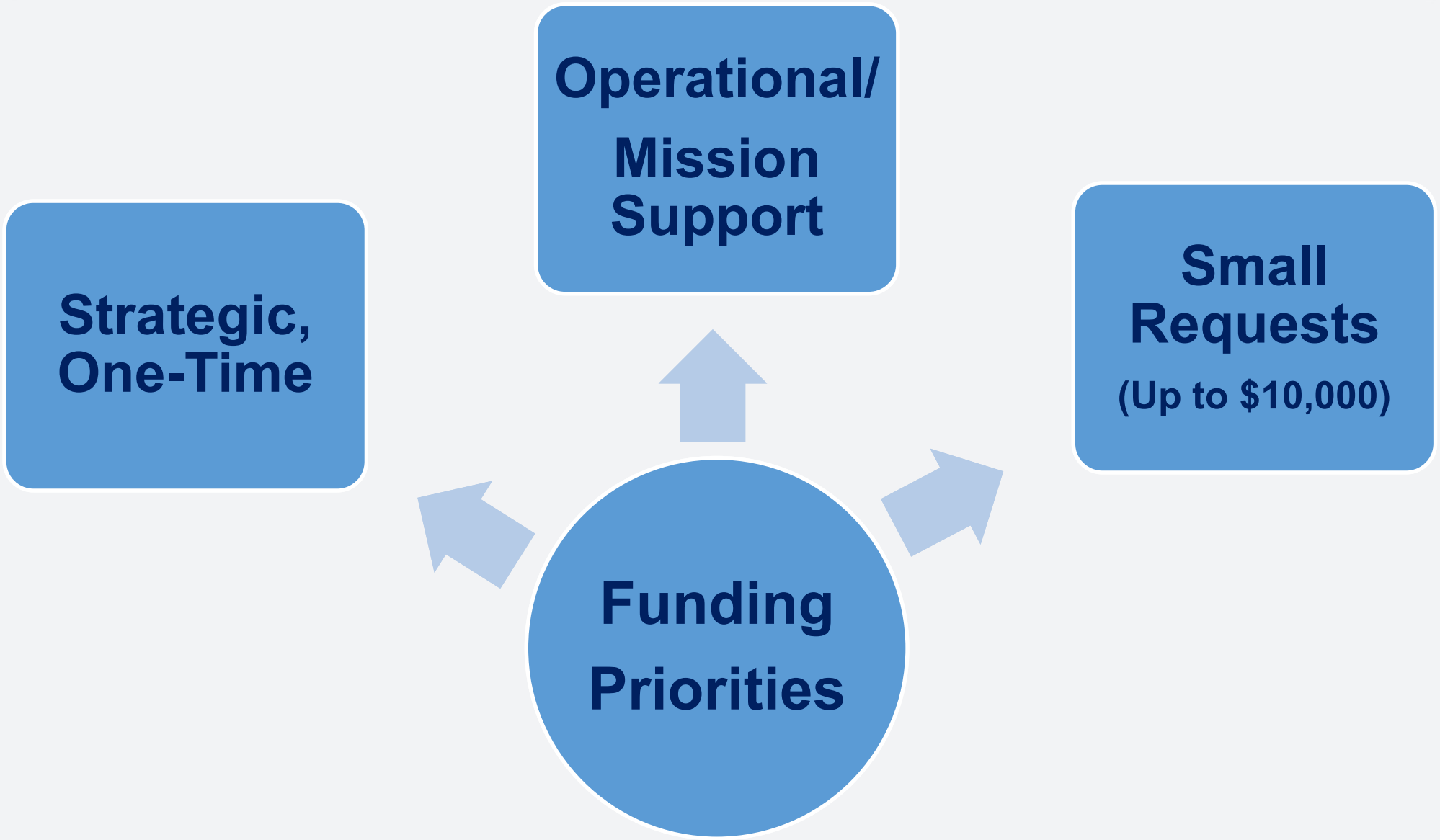
- Grant applications must be submitted ONLINE in ZoomGrants by 5:00pm

April 13, 2027

- Grant Advisory Commission meeting – funding meeting & recommendations

August 10, 2027

- 27/28 Funding Cycle Check Presentation
  The funding cycle runs July 1, 2027 – June 30, 2028



Select ONE area of funding

Social Determinants of Health (Select One)



Food – Increased access to healthier food options for lower income communities



Health & Wellness – Improved physical, mental & behavioral health and wellness



Community & Social Context – Improved access to arts & cultural resources for all and a kinder more inclusive and connected community



Education – More vocational training & educational opportunities for all ages



Neighborhood & Physical Environment – Improved access to safe & affordable housing for all



City of Roseville Website: Roseville.ca.gov/grants



❖ **Returning Applicants**
Log in using your existing ZoomGrants account. Can't access your login? Contact ZoomGrants directly.

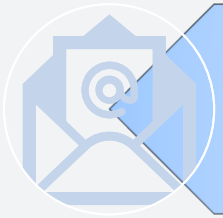
❖ **New Applicants**
You'll be prompted to create a new account during the application process.

For submission issues:
Call ZoomGrants: **866-323-5404**
Click the **Help** button in your ZoomGrants account

For technical support:
Email: questions@zoomgrants.com
ZoomGrants Support Team is available Monday through Friday from 8a-5p Mountain Time

CITY OF ROSEVILLE CALIFORNIA

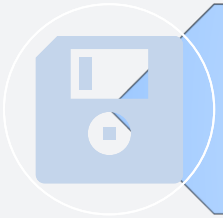
A Few ZoomGrants Suggestions



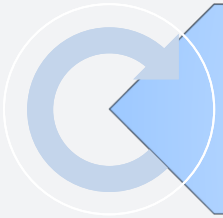
Use a shared or monitored email for the application contact



Plain text is the only thing that can copy/paste



Application automatically saves; will timeout if being inactive



If system is glitchy, clear cache or browser

Application Requirements Overview

- **Non-Applicable Documents**
  - ➤ Must include an explanation if a required document does not apply to your organization.
- **Form Usage**
  - ➤ Only provided forms are accepted.
- **Signature Requirements**
  - ➤ Must be wet signatures or use DocuSign or Adobe Sign.
  - ➤ Typed signatures are not accepted.
- **Capital Expenditures**
  - ➤ Bids are required for all capital expenditure requests.
- **Counseling Services**
  - ➤ Submit current California certification for all counseling service providers.

FY27/28 CBF Grant Application Questions

1) Lead Agency is:
   - Non-Profit 501(c)(3)
   - Non-Profit 501(c)(4)
   - Private School

2) Project Description: In 50 words or less, describe the proposed program/project, including the use of the funds and who will be served.

3) This request will: (Select only one option below)
   - Launch a new service, program or facility
   - Continue to provide an existing service
   - Increase or improve quality of services provided
   - Expand services provided to a larger population or increase the capacity of a facility

4) Funding Priority (Select only one option below)

- **Strategic**: One-time grants for innovative programs/projects, capital improvements or new initiatives
- **Operational/Mission Support**: Grants for programs/projects that demonstrate effectiveness addressing a community need
- **Small Request (up to $10,000)**: Grants which can go toward either new programs/projects or support existing operations which have demonstrated effectiveness at meeting community need

5) Social Determinants of Health: (Select only one option below)

- **Food** - Increased access to healthier food options for lower income communities
- **Health and Wellness** - Improved physical, mental and behavioral health, and wellness
- **Community and Social Context** - Improved access to arts and cultural resources for all and a kinder more inclusive and connected community
- **Education** - More vocational training and educational opportunities for all ages
- **Neighborhood and Physical Environment** - Improved access to safe and affordable housing for all

6) Number of:
   - Board Members
   - Paid Staff (F/T)
   - Paid Staff (P/T)
   - Volunteers

7) Date Founded:

8) Organization's Mission:

9) What are the major goals of your organization?

10) What were the major accomplishments of the organization last fiscal year?
    Please list specific outcomes.

11) List any grants awarded by the Roseville Grants Advisory Commission during the previous five funding cycles, including the amount awarded and purpose of the funding. If the organization has previously received funding for the same or a similar effort, briefly describe what was accomplished and how the current request builds upon, expands, or differs from the prior funding.

12) If the full amount is not awarded, explain how a reduced award would change the project, including services, staffing, timeline, outcomes, and the number of Roseville residents served.

13) If volunteers will support the proposed effort, describe their roles and responsibilities, anticipated number of volunteers or volunteer hours, training and supervision, and how volunteer participation contributes to successful implementation.

For Questions 14-16, please refer to what was selected in question #5 regarding the Social Determinants of Health (SDOH)

14) What specific need, barrier, or service gap affecting Roseville residents will the proposed effort address? Identify the Social Determinant(s) of Health (SDOH) affected by the identified need and explain how the proposed effort will address the need, barrier, or gap.

Use credible data, research, assessments, service use, and surveys to support your response. Include Roseville-specific data when possible and note the geographic area represented and its relevance to Roseville residents.

15) Describe the specific population(s) of Roseville residents who will be served by the proposed effort. Include demographic data on the population. Please provide:

- The anticipated number of Roseville residents to be served.
- Relevant characteristics, circumstances, or barriers affecting the population.
- How residents will access, enroll in, or be referred to the proposed effort.
- How your organization will verify Roseville residency and eligibility under the grant guidelines.
- Why this population is particularly affected by the need identified in Question 14.

Describe with detail how the proposed effort complements, expands, fills a gap in, or differs from similar services currently available in Roseville. If similar services exist, explain why this proposed effort is still needed

16) Describe the specific services or activities your project will provide and explain how they meet the identified need, fit the population served, and differ from or improve on existing Roseville services.

Provide evidence for your approach, such as research, proven or promising practices, past results, participant data, or community experience. Explain why it fits the population served and how it supports the outcomes in Question 15.

17) Identify significant community partners involved in the proposed effort and describe each partner's role. Include referral relationships, coordination of services, and how collaboration improves access, efficiency, or outcomes for Roseville residents.

18) Which specific Roseville City Council Strategic Plan Priority most aligns with the proposed effort? *The Strategic Plan can be found here: www.roseville.ca.gov/strategicplan*

- ❑ Ensure a safe and healthy community
- ❑ Remain fiscally responsible in a changing world
- ❑ Enhance economic vitality
- ❑ Invest in well-planned infrastructure and growth
- ❑ Support community engagement and advocacy
- ❑ Deliver exceptional City services

19) Explain the specific connection between the proposed effort, the identified City priority, and the expected benefit to Roseville residents.

Do not restate the City of Roseville strategic priorities; focus on the specific connection between the project, the priority and the community benefit.

20) What is your expected outcome and how is your organization going to measure it? Identify your specific goals, measurable objectives, and anticipated targets.

Brief Examples: Provide weekly food assistance to 100 Roseville residents & track households served by ZIP code. Deliver counseling services to 50 Roseville residents, including up to 6 individual sessions or 7 group sessions during the funding year

21) A) Explain how the requested funding will be used to support the proposed effort. B) Identify each major expense and describe how it contributes to the proposed activities and expected outcomes for program participants.

22) Describe the other funding or resources that support, or are expected to support, this project. Include grants, contracts, donations, fundraising, fees, governmental or private funding, in-kind support, and other significant resources. For each major source, list the amount, funding status, and any restrictions.

Explain why grant funding is needed in addition to these resources and specifically what the requested City funding will make possible for the proposed project.

23) Describe your plan for sustaining the effort after the grant period ends. What would happen to the proposed effort if Citizens' Benefit Fund grant funding was not available?

24) Is this funding for a Capital Expenditure?

Questions 25-27 will only be displayed if this grant funding is going to be for a Capital Expenditure.

Capital Expenditure is the purchase of fixed assets that have benefits of more than one year.
Ex: construction of buildings, additions and remodeling, initial, additional & replacement of equipment, furniture, fixtures, machinery, vehicles & media.

25) Please briefly describe the item(s) needed and the itemized costs.

26) For property improvement, does the organization own the building or property to be improved?

- ❑ Yes - Upload proof of ownership in Documents Tab
- ❑ No - Upload lease and owner's written authorization for making the proposed property improvements in Documents Tab

27) Have you included the required bids?
If providing bids, use one Quote Summary Sheet per Capital Expenditure located in the Documents Tab.

- ❑ Yes
- ❑ No - Provide explanation why bids are not necessary in Documents Tab

Proposed Effort Budget & Narrative

REQUIRED: Budget Narrative

Please provide a budget narrative with the Budget Income and Expense information for the PROPOSED EFFORT for which you are requesting funding. *(Funds are awarded in August, information included in the budget chart is for the Budget year in which funds are to be used.)*

In the budget narrative, be sure to answer how will funding these costs meet goals and objectives described in this request?

Please note: The AGENCY Budget information is a separate request under the Documents Tab.

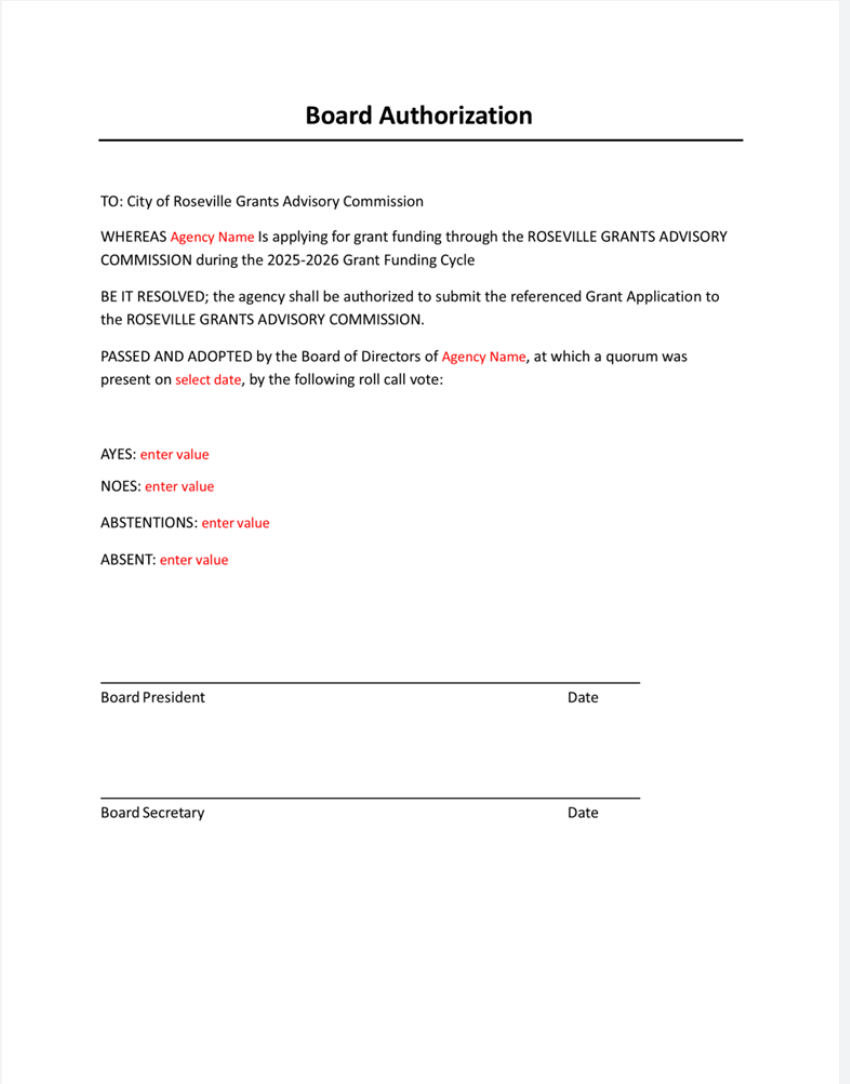


Why so many required documents…

- The Citizens' Benefit Fund Policy Manual
  - Established in 1994
  - Guiding document to the Grants Advisory Commission and Roseville City Council
- Items to verify current nonprofit status
- Fiscal responsibility

Required Documents

- **Board Authorization**
  - ➤ Form in ZoomGrants
  - ➤ Use Provided Form
  - ➤ All Areas must be filled out and signed
  - ➤ Need Date of Meeting



Board Authorization

TO: City of Roseville Grants Advisory Commission

WHEREAS Agency Name Is applying for grant funding through the ROSEVILLE GRANTS ADVISORY COMMISSION during the 2025-2026 Grant Funding Cycle

BE IT RESOLVED; the agency shall be authorized to submit the referenced Grant Application to the ROSEVILLE GRANTS ADVISORY COMMISSION.

PASSED AND ADOPTED by the Board of Directors of Agency Name, at which a quorum was present on select date, by the following roll call vote:

AYES: enter value

NOES: enter value

ABSTENTIONS: enter value

ABSENT: enter value

Board President Date

Board Secretary Date



CITY OF ROSEVILLE CALIFORNIA

Assurances and Certifications

In submitting this application,

I/We understand that copies of the required assurances and certifications must be provided prior to the award of funding and must be maintained during the entire funding period.

I/We certify that:

- **The agency complies with the Americans with Disabilities Act (ADA) and State law in providing access to programs, services and facilities.**
- **Funds will not be used for sectarian or religious purposes.**
- **If CBF funds are awarded for capital expenditures or works of improvement the organization will comply with State prevailing wage law for construction, alteration, demolition, installation or repair work.**
- **Under penalty of perjury of the laws of the State of California that all statements in this application are true and correct.**

Agency Name: _____

First Signature: Wet Signature Required _____
(for non-profits - Exec Director; for private schools - Principal)

Name: _____

Title: _____

Date: _____

Second Signature: Wet Signature Required _____
(for non-profits - Chair of the Board; for private schools - District Superintendent/Trustee)

Name: _____

Title: _____

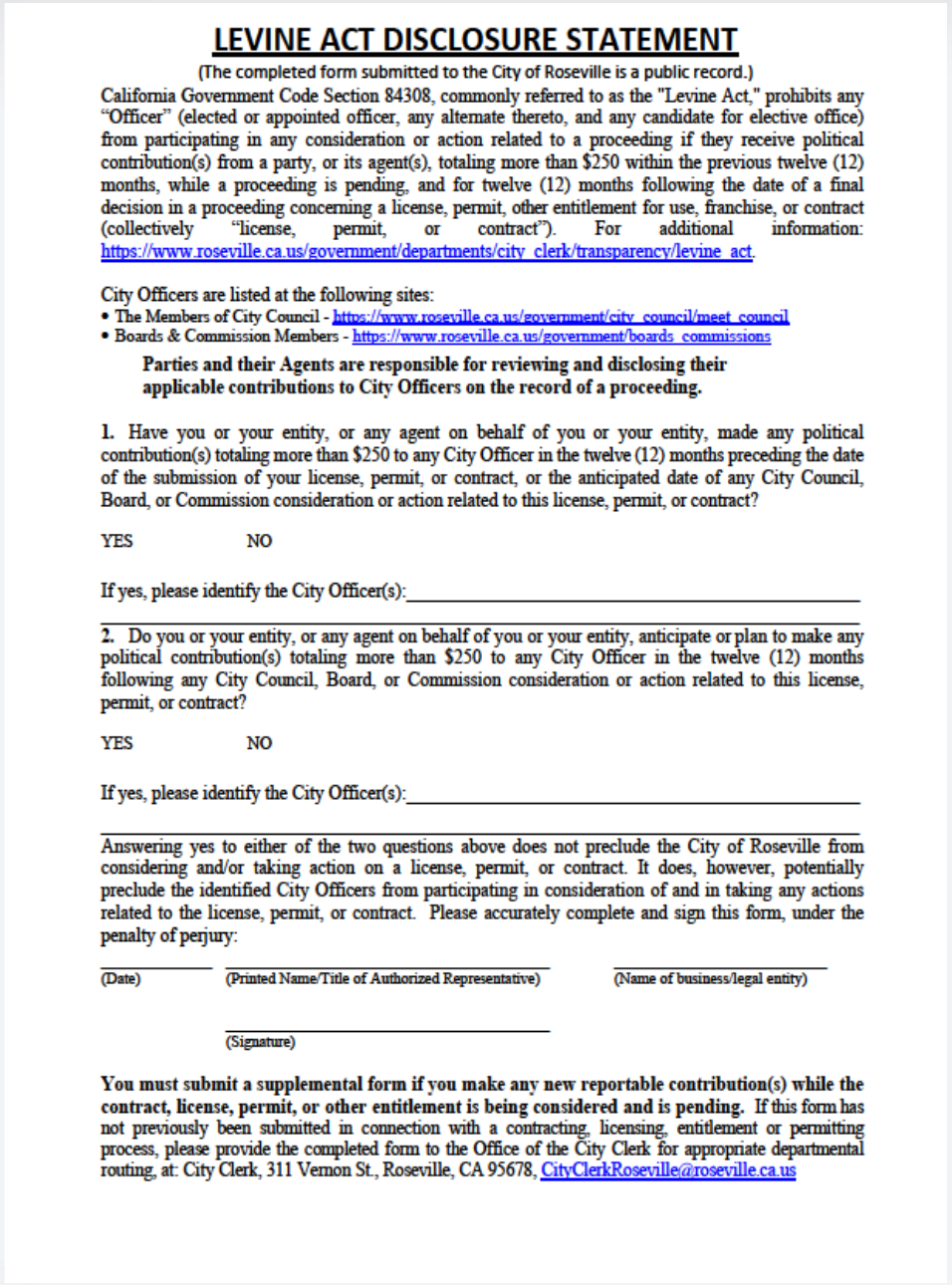
Date: _____

- **Assurances & Certifications**

➤ Form in ZoomGrants

➤ Use Provided Form

➤ All Areas must be filled out and signed



LEVINE ACT DISCLOSURE STATEMENT

(The completed form submitted to the City of Roseville is a public record.)

California Government Code Section 84308, commonly referred to as the "Levine Act," prohibits any "Officer" (elected or appointed officer, any alternate thereto, and any candidate for elective office) from participating in any consideration or action related to a proceeding if they receive political contribution(s) from a party, or its agent(s), totaling more than $250 within the previous twelve (12) months, while a proceeding is pending, and for twelve (12) months following the date of a final decision in a proceeding concerning a license, permit, other entitlement for use, franchise, or contract (collectively "license, permit, or contract"). For additional information: https://www.roseville.ca.us/government/departments/city_clerk/transparency/levine_act.

City Officers are listed at the following sites:

- The Members of City Council - https://www.roseville.ca.us/government/city_council/meet_council
- Boards & Commission Members - https://www.roseville.ca.us/government/boards_commissions

Parties and their Agents are responsible for reviewing and disclosing their applicable contributions to City Officers on the record of a proceeding.

1. Have you or your entity, or any agent on behalf of you or your entity, made any political contribution(s) totaling more than $250 to any City Officer in the twelve (12) months preceding the date of the submission of your license, permit, or contract, or the anticipated date of any City Council, Board, or Commission consideration or action related to this license, permit, or contract?

YES NO

If yes, please identify the City Officer(s):_____

_____

2. Do you or your entity, or any agent on behalf of you or your entity, anticipate or plan to make any political contribution(s) totaling more than $250 to any City Officer in the twelve (12) months following any City Council, Board, or Commission consideration or action related to this license, permit, or contract?

YES NO

If yes, please identify the City Officer(s):_____

_____

Answering yes to either of the two questions above does not preclude the City of Roseville from considering and/or taking action on a license, permit, or contract. It does, however, potentially preclude the identified City Officers from participating in consideration of and in taking any actions related to the license, permit, or contract. Please accurately complete and sign this form, under the penalty of perjury:

_____ _____ _____

(Date) (Printed Name/Title of Authorized Representative) (Name of business/legal entity)

_____

(Signature)

You must submit a supplemental form if you make any new reportable contribution(s) while the contract, license, permit, or other entitlement is being considered and is pending. If this form has not previously been submitted in connection with a contracting, licensing, entitlement or permitting process, please provide the completed form to the Office of the City Clerk for appropriate departmental routing, at: City Clerk, 311 Vernon St., Roseville, CA 95678, CityClerkRoseville@roseville.ca.us

- **Levine Act**
  - ➤ Form in ZoomGrants
  - ➤ Use Provided Form
  - ➤ All Areas must be filled out and signed

Annual Registration Renewal (RRF-1)

Annual Renewal Required

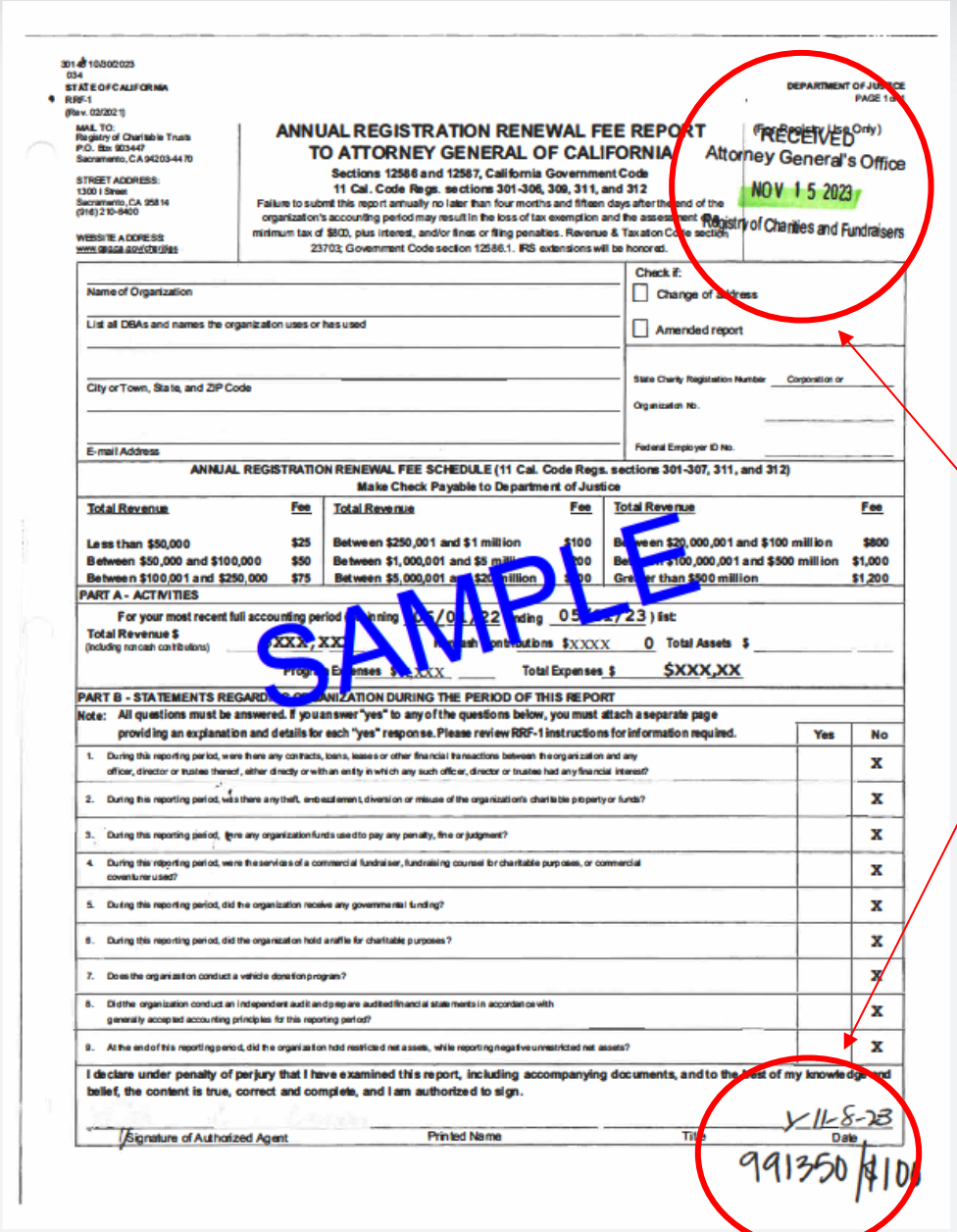
➤ All charitable corporations, unincorporated associations, and trustees **must renew annually** with the CA Attorney General's Registry of Charities and Fundraisers.

➤ Must file the Annual Registration Renewal Fee Report (RRF-1 Form) no later than four months and 15 days after the close of the organization's calendar or fiscal year (e.g., if the fiscal year ends on December 31, this form is due on May 15).

Must Show Evidence of Filing

➤ Most currently filing

➤ Filed an extension with IRS, include copy of extension


STATE OF CALIFORNIA
RRF-1
(Rev. 03/2021)

ANNUAL REGISTRATION RENEWAL FEE REPORT
TO ATTORNEY GENERAL OF CALIFORNIA
Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-306, 309, 311, and 312

RECEIVED
Attorney General's Office
NOV 15 2023
Registry of Charities and Fundraisers

SAMPLE

Name of Organization
List all DBAs and names the organization uses or has used
City or Town, State, and ZIP Code
E-mail Address

Check if:
Change of address
Amended report

State Charity Registration Number
Corporation or Organization No.
Federal Employer ID No.

ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312)
Make Check Payable to Department of Justice

Total Revenue	Fee	Total Revenue	Fee	Total Revenue	Fee
Less than $50,000	$25	Between $250,001 and $1 million	$100	Between $20,000,001 and $100 million	$800
Between $50,000 and $100,000	$50	Between $1,000,001 and $5 million	$200	Between $100,000,001 and $500 million	$1,000
Between $100,001 and $250,000	$75	Between $5,000,001 and $20 million	$400	Greater than $500 million	$1,200

PART A - ACTIVITIES

For your most recent full accounting period beginning 05/01/22 ending 05/31/23) list:
Total Revenue $ (Including noncash contributions) $XXX,XX
Noncash contributions $XXXX 0
Total Assets $
Program Expenses $XXXX
Total Expenses $ $XXX,XX

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment?		X
4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?		X
5. During this reporting period, did the organization receive any governmental funding?		X
6. During this reporting period, did the organization hold a raffle for charitable purposes?		X
7. Does the organization conduct a vehicle donation program?		X
8. Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?		X
9. At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?		X

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.

Signature of Authorized Agent | Printed Name | Title | Date 11-8-23

991350 $100

Evidence form was filed

State of California Department of Justice

Department of Justice Charities

oag.ca.gov/charities

Annual Registration Renewal

oag.ca.gov/charities/renewals

DOJ Registry Statuses

oag.ca.gov/charities/content/info

- **Copy of Organization's Active Secretary of State Registration**
  - ➤ **Secretary of State website: bizfileonline.sos.ca.gov/search/business**

Secretary of State
Certificate of Status

EXAMPLE

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

Entity Name:	Organization Name
Entity No.:	XXXXX
Registration Date:	10/31/2000
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 January 30, 2025.

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

Certificate No.: 29091xxxx

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.

BA2024022XXXX

STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION
California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 653-3516

For Office Use Only
-FILED-
File No.:BA2024022XXXX
Date Filed: 2/2/2024

B24XX-9507 02/02/2024 1:22 PM Received by California Secretary of State

EXAMPLE

Entity Details

Corporation Name	ORGANIZATION NAME
Entity No.	XXXXXXX
Formed In	CALIFORNIA

Street Address of California Principal Office of Corporation

Street Address of California Office	12345 STREET IN ROSEVILLE ROSEVILLE, CA 95747

Mailing Address of Corporation

Mailing Address	STREET IN ROSEVILLE ROSEVILLE, CA 95747-4003
Attention	

Officers

Officer Name	Officer Address	Position(s)
NAME OF OFFICER	STREET IN ROSEVILLE ROSEVILLE, CA 95747-4003	Chief Executive Officer
NAME	STREET IN ROSEVILLE Roseville, CA 95747-4003	Chief Financial Officer
NAME	STREET IN ROSEVILLE ROSEVILLE, CA 95747	Secretary

Additional Officers

Officer Name	Officer Address	Position	Stated Position
None Entered			

Agent for Service of Process

Agent Name	NAME
Agent Address	STREET IN ROSEVILLE ROSEVILLE, CA 95747-4003

Email Notifications

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

Electronic Signature

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

SIGNATURE — Signature

02/01/2024 — Date

Page 1 of 1

CITY OF ROSEVILLE CALIFORNIA

- Copy of **Current** 501c3 or 501c4
- List of Board Members
- Agency's **Current** Fiscal Year Budget – detailed
- City of Roseville Business License - current
- List of Key Personnel for the Program/Project Seeking Funds

Rest of the Required Documents

CITY OF ROSEVILLE CALIFORNIA

Required Documents (if applicable)

- **Proof of Ownership/Copy of Lease – If Requesting funds for Property Improvements**
  - ➤ If a leasing property, must include letter from property owner that they authorize the improvements.

- **3 Written Estimates from Vendor – If Requesting Funds for Capital Expenditures or Property Improvements greater than $500 and less than $4,000**
  - ➤ Documentation can be telephone, online or written cost estimates

- **3 Written Bids are Required if Requesting Capital Expenditures of $4,000 or more**
  - ➤ Telephone & online cost estimates not acceptable

- **Copy of Current California Counseling Certifications**
  - ➤ Must provide a copy of certification for each person providing counseling services

ROSEVILLE CALIFORNIA

Scoring Rubric

Grant Application Scoring Rubric	Total Points
1. Organizational Capacity & Collaboration (Application Questions 13 & 17)	10
2. Community Need & Social Determinants of Health (Application Question 14)	15
3. Population & Roseville Impact (Application Question 15)	15
4. Proposed Approach & Evidence (Application Question 16)	15
5. Strategic Alignment & Community Value (Application Question 19)	10
6. Outcomes & Measurement (Application Question 20)	15
7. Budget & Cost Effectiveness (Application Question 21)	10
8. Sustainability & Leveraging Other Resources (Application Questions 22 & 23)	10
TOTAL POINTS	100

Application Thresholds

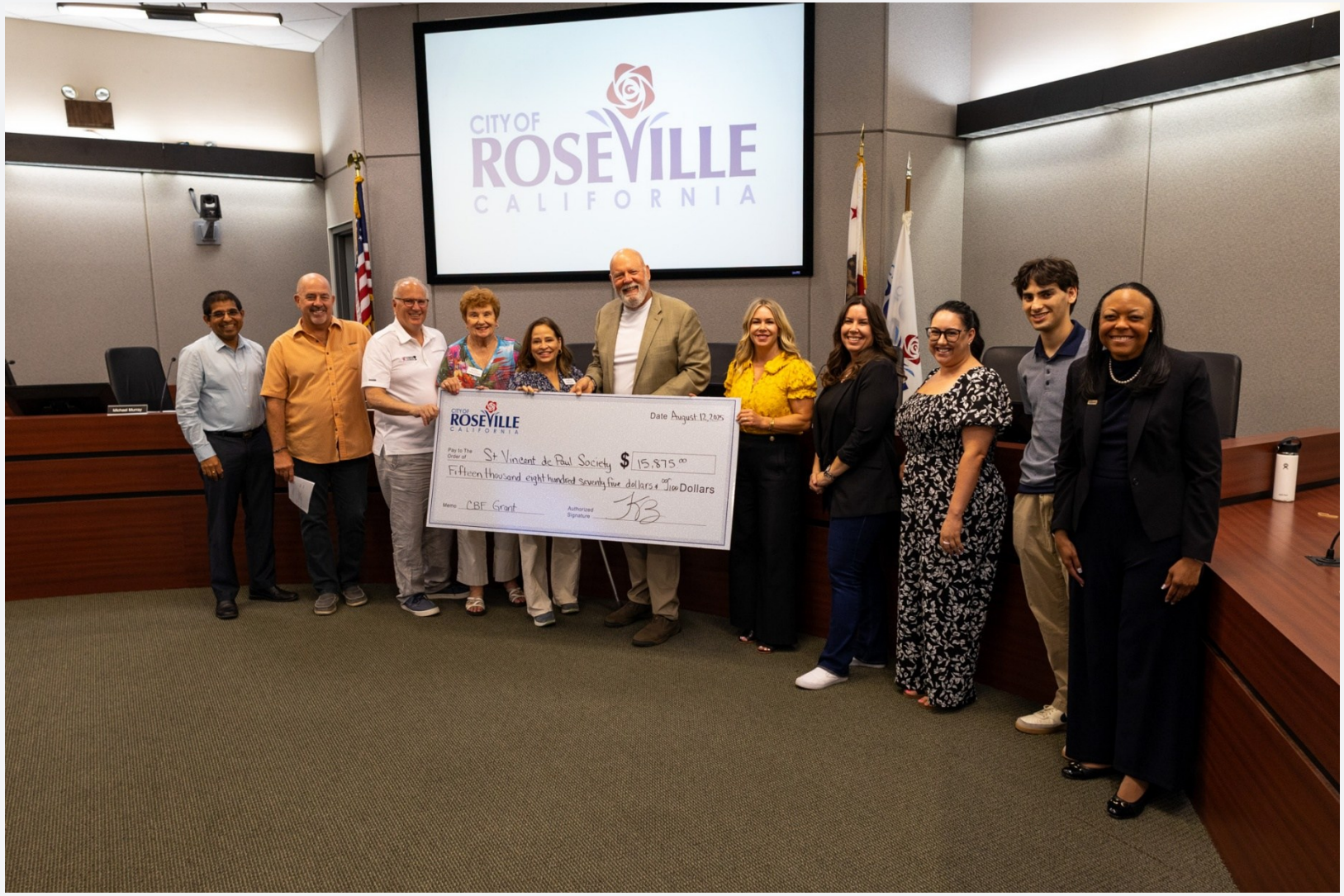
- Completed application submitted by 5pm on February 1, 2027
- All required documents must be submitted with the application
- Submitted required annual report for the 25/26 Grant Funding Cycle (if funding was received)

Questions

City of Roseville Grant Webpage	**Roseville.ca.gov/grants**
Find meeting on YouTube	**Roseville.ca.gov** Search agenda & minutes
Staff Liaison Tobi Thomas	**tthomas@roseville.ca.gov** **(916) 746-1368**

CITY OF ROSEVILLE CALIFORNIA

Thank You


CITY OF
ROSEVILLE
CALIFORNIA
CITY OF ROSEVILLE CALIFORNIA
Date August 12, 2025
Pay To The Order of St Vincent de Paul Society $ 15,875 00
Fifteen thousand eight hundred seventy five dollars & 00/100 Dollars
Memo CBF Grant
Authorized Signature